UNIVERSITY of HAWAI'I®

KAUA'I
COMMUNITY COLLEGE

Annual Program Review

Medical Assisting Program (MEDA)

Fall 2017

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Program Description

Background

The Medical Assisting program (MEDA) at Kaua'i Community College (KCC) is 42 credit certificate of achievement (CA). Program courses will combine classroom, intensive hands on clinical laboratory experiences in both administrative and clinical competencies. In addition, students participate in clinical hours in community ambulatory care setting that allows them to apply their new healthcare skills in a real world setting and also serves as a bridge to future employment on Kaua'i. From fall 2012-fall 2014 a 23 credit certificate of competence (CO) in Medical Assisting was offered. The MEDA CA program obtained provisional approval in fall 2013 and launched in fall 2015. A provisional to established proposal will be submitted to the Board of Regents in spring 2018.

Program Organization

Mission

The mission of the Kaua'i Community College Medical Assisting (MEDA) program is:

To prepare students for employment as medical assistants by providing them with an accessible and engaging learning environment that enables them to gain the clinical knowledge and skills to contribute to the communities' health in ambulatory healthcare settings on Kaua'i.

Program Goals

The MEDA Program goal is to prepare competent entry-level medical assistants in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains.

The main objectives of the program are to:

1. Improve access to healthcare related programs for students on Kaua'i.
2. Provide students with a college education that enables them to earn a living wage.
3. Meet the Kaua'i community work force needs for medical assistants in ambulatory care.

Admissions and Advising

Students are admitted as a cohort in the fall each year. The program application period opens from December 1 through February 1. Acceptance is on a first qualified, first applied basis. Progression onto the spring semester requires passing of all required program courses in the fall.

Health clearance must be completed prior to admission into the MEDA program and remain current throughout the students' enrollment in the program. These include proof of Immunizations, TB clearance, and technical standard clearance. A licensed health care provider must document that the student meets the technical standards for the program. In order to participate in the MEDA programs required clinical activities all MEDA program students must carry malpractice insurance. This malpractice insurance must be current throughout enrollment in the MEDA program. In addition, all MEDA students must have an active healthcare provider Basic Life Support (BLS) CPR certification.

Program Course Prerequisites

Course Code	Title	Credit Hours
HLTH 140	Introduction to Human Body Systems and Related Medical Terminology	3
ENG 100	Composition I	3
MATH 75 or higher	Fundamentals of Mathematics	3-4
Any Diversified Social Science(DS) course	Any Diversified Social Science course from a UH campus	3
ACC 124	Principles of Accounting I	2
	Prerequisites Total	**15-16**

Based on two years of student data the Mathematics and English program prerequisites adequately prepare students and support student success in the MEDA program. Although students can choose a social science course there has been no evidence of any social science discipline better preparing students. However, it has become apparent that some students are having difficulty using the knowledge gained in HLTH 140 and may need additional review in this area once in the program itself. A curricula change to replace HLTH 155 with a Medical Assisting science course has been initiated to address this problem. This will not change the number of credits or have any other impact on the program.

 A change to the course sequencing was approved in spring 2017 and will be implemented in fall 2018. ACC 124 will move from a program support course to become a program prerequisite requiring it be completed prior to entry into the program. This sequencing change was made as it became apparent that taking ACC 124 during the final spring semester was adding additional stress as students also complete 12-15 hours of clinical experience each week in addition to classroom and laboratory work. Also by taking ACC 124 as prerequisite students will better prepared for MEDA 143 thereby reducing academic stress in the first fall semester.

Program Course Schedule

The MEDA program targets nontraditional students, part time and working students, and students who test into or take remedial/developmental ENG and MATH courses. The program course schedule works to support these students.

Nontraditional students often have family and work responsibilities that require programs designed to accommodate their needs. The MEDA CA program runs a block schedule three days a week in the afternoons and evenings to improve and open access for these students. In addition, adult learning methodologies incorporated into the curriculum support adult learners' success. The course schedule supports a 15 credit student load with classes on three days a week.

Traditional students are also a targeted population frequently these students are under 25 of age and are enrolled in college for two or more years without graduating or have dropped out of college altogether. In Hawaii, these students are often also working adults and with family responsibilities. The MEDA CA provides an achievable academic goal for these students that also lead to gainful employment within three semesters.

Curriculum

The MEDA program curriculum has undergone some minor revisions since implementation in fall 2015. A normal student credit load in the MEDA program is 15 credits in fall and spring semesters. In spring 2017 two new

courses were proposed to align alpha and number with Kapiolani CC MEDA CA and address an emerging issue with student preparation. These new courses are currently in the campus curriculum approval process.

Overall Program Health: Cautionary

Majors Included: MEDA   Program CIP: 51.0801

Demand Indicators		Program Year			Demand Health Call
		14-15	15-16	16-17	
1	New & Replacement Positions (State)	0	95	103	
2	*New & Replacement Positions (County Prorated)	0	2	3	
3	Number of Majors	0	15	14	
3a	Number of Majors Native Hawaiian	0	5	4	
3b	Fall Full-Time	0%	100%	86%	
3c	Fall Part-Time	0%	0%	14%	
3d	Fall Part-Time who are Full-Time in System	0%	0%	0%	**Unhealthy**
3e	Spring Full-Time	0%	59%	92%	
3f	Spring Part-Time	0%	41%	8%	
3g	Spring Part-Time who are Full-Time in System	0%	6%	0%	
4	SSH Program Majors in Program Classes	0	277	264	
5	SSH Non-Majors in Program Classes	510	451	2	
6	SSH in All Program Classes	510	728	266	
7	FTE Enrollment in Program Classes	17	24	9	
8	Total Number of Classes Taught	13	17	8	

Efficiency Indicators		Program Year			Efficiency Health Call
		14-15	15-16	16-17	
9	Average Class Size	13.4	14.9	12.1	
10	*Fill Rate	70.1%	75.5%	100%	
11	FTE BOR Appointed Faculty	0	0	0	
12	*Majors to FTE BOR Appointed Faculty	0	0	0	
13	Majors to Analytic FTE Faculty	0	8.2	16.6	
13a	Analytic FTE Faculty	1.4	1.8	0.8	
14	Overall Program Budget Allocation	Not Reported	Not Reported	Not Yet Reported	
14a	General Funded Budget Allocation	Not Reported	Not Reported	Not Yet Reported	**Cautionary**
14b	Special/Federal Budget Allocation	Not Reported	Not Reported	Not Yet Reported	
14c	Tuition and Fees	Not Reported	Not Reported	Not Yet Reported	
15	Cost per SSH	Not Reported	Not Reported	Not Yet Reported	
16	Number of Low-Enrolled (<10) Classes	7	2	0	

*Data element used in health call calculation   **Last Updated: October 29, 2017**

Effectiveness Indicators		Program Year			Effectiveness Health Call
		14-15	15-16	16-17	
17	Successful Completion (Equivalent C or Higher)	87%	90%	97%	
18	Withdrawals (Grade = W)	8	9	3	
19	*Persistence Fall to Spring	0%	91.6%	92.8%	
19a	Persistence Fall to Fall	0%	8.3%	66.6%	
20	*Unduplicated Degrees/Certificates Awarded	0	10	11	
20a	Degrees Awarded	0	0	0	
20b	Certificates of Achievement Awarded	0	10	11	**Healthy**
20c	Advanced Professional Certificates Awarded	0	0	0	
20d	Other Certificates Awarded	0	0	0	
21	External Licensing Exams Passed	Not Reported	100%	100%	
22	Transfers to UH 4-yr	0	0	0	
22a	Transfers with credential from program	0	0	0	
22b	Transfers without credential from program	0	0	0	

Distance Education: Completely On-line Classes		Program Year			
		14-15	15-16	16-17	
23	Number of Distance Education Classes Taught	0	1	0	
24	Enrollments Distance Education Classes	N/A	23	N/A	
25	Fill Rate	N/A	77%	N/A	
26	Successful Completion (Equivalent C or Higher)	N/A	91%	N/A	
27	Withdrawals (Grade = W)	N/A	1	N/A	
28	Persistence (Fall to Spring Not Limited to Distance Education)	N/A	63%	N/A	

Perkins IV Core Indicators 2015-2016		Goal	Actual	Met	
29	1P1 Technical Skills Attainment	92.00	91.67	Not Met	
30	2P1 Completion	51.00	66.67	Met	
31	3P1 Student Retention or Transfer	81.00	31.25	Not Met	
32	4P1 Student Placement	63.87	0.00	Not Met	
33	5P1 Nontraditional Participation	N/A	N/A	N/A	
34	5P2 Nontraditional Completion	N/A	N/A	N/A	

Performance Measures		Program Year			
		14-15	15-16	16-17	
35	Number of Degrees and Certificates	0	10	11	
36	Number of Degrees and Certificates Native Hawaiian	0	3	4	
37	Number of Degrees and Certificates STEM	Not STEM	Not STEM	Not STEM	
38	Number of Pell Recipients[1]	0	7	7	
39	Number of Transfers to UH 4-yr	0	0	0	

*Data element used in health call calculation
[1]PY 16-17; Pell recipients graduates not majors

Part II. Analysis of the Program

Program Efficiency

Program efficiency continues to be good. The cautionary health call is related to the lack of a BOR FTE faculty. One full time faculty member is assigned to the program. Analytic faculty is provided by one lecturer who was assigned one 3 credit course in the fall and one 3 credit course in the spring. This results is a program graduate to full time faculty ratio of 1:10 or higher. UH efficiency indicators evaluate the student /faculty ratio using the number of majors to BOR appointed faculty. In contrast to other health care programs there is no faculty to student ratio mandate. The pedagogy and nature of the hands on learning that takes place during the lab sessions requires that the class size be limited to support student success. However, program fill rate based on program capacity is robust. Class size has increased and the fill rate remains at 75% or higher for MEDA courses. However, fill rate for the HLTH courses which are also included in the program data is variable.

Program Quality

Program Evaluation

Two processes are used to evaluate the MEDA program; the annual program review (APRU) and accreditation.

Accreditation

In spring 2015 the MEDA program applied for initial accreditation from the Medical Assisting Education Review Board (MAERB) is a Committee on Accreditation (CoA) of the Commission on Accreditation of Allied Health Education Programs (CAAHEP).   MAERB makes accreditation recommendations for the status of accreditation of medical assisting programs. Accredited programs are then subject to ongoing review of program compliance and achievement of outcome thresholds.

In spring 2017 MAERB site surveyors' visited the program and conducted an on-site survey. The survey went very well and the program was commended in a number of areas. The program submitted documents in September 2017 to correct one area of citation. A final positive decision is expected in spring 2018.

CAAHEP accreditation is a mark of quality and a gold standard for Medical Assisting programs. It entails rigorous ongoing annual program evaluation and comparison of program outcomes against set benchmarks.

Program Satisfaction

Program surveys evaluate program satisfaction from a number of major stakeholders. CAAHEP accreditation requires an annual evaluation of graduate and employer satisfaction. In addition, students evaluate

clinical sites and program resources. Results indicate all stakeholders are satisfied with the MEDA program. Surveys are sent out at various times through the year and response rate has been excellent.

Stakeholders' comments also indicate a high level of satisfaction with the program. Hawaii Pacific Health (HPH) is the major employer of Medical Assistants in the state of Hawaii and on Kaua'i. The high level of program satisfaction is due in part to a close collaborative partnership between the MEDA program and community employers. This collaborative partnership ensures that the MEDA program has met, and continues to meet a critical workforce need on Kauai.

Advisory Committee

A MEDA program advisory program committee was established in spring 2014. This committee consists of major program stakeholders and meets CAAHEP accreditation requirements for its composition. Meetings take place once a year in spring. During the recent on site accreditation visit the advisory committee was identified as one of the strengths of the program. Input from the MEDA advisory committee has been positive and no major changes have been recommended. In 2016 an advisory satisfaction survey revealed high satisfaction with the MEDA program.

Program Outcomes

Program Effectiveness

The MEDA CA program is very effective. Course completion and persistence rates remain consistently at or above 90%. Graduation rates are also excellent; 100% of students who persist into the spring semester graduate. Students succeed and persist while taking a 12-15 credit semester course sequence. This is significant as many of these students continue to have an academic history of failure in courses or other programs or completion of a large number of credits over a number of years without graduating. In addition this course sequence increases the speed with which students get to graduation. For most of these students the MEDA CA continues to be their first experience of success and subsequent graduation at Kaua'i CC.

Outcome Measures

CAAHEP accredited programs must annually track and report a number of program outcomes and publically display a five year weighted average for at least one of these outcomes. The MEDA program displays these outcomes on the program web site. As the MEDA CA has two years of data the weighted average is currently a two year average. The benchmarks are set by CAAHEP and the MEDA program has met and exceeded all benchmarks.

Table 1 Weighted Average of Program Outcomes

	Retention	Positive Job Placement	Graduate Survey Participation Rate	Graduate Survey Satisfaction Rate	Employer Survey Participation Rate	Employer Survey Satisfaction Rate	Certification Exam Participation Rate	Certification Exam Pass Rate
Benchmark	60%	60%	30%	80%	30%	80%	30%	60%
2 Year Weighted Average	88%	100%	95%	100%	95%	100%	100%	100%

Persistence

Persistence rates from fall to spring are consistently good. The MEDA program is highly structured and uses weekly block scheduling this allows students to work and attend classes. This reduces a potentially major financial stressor. In addition, the students receive a lot of hands on counseling from program faculty that helps them cope with the rigors of the program and personal stressors.

Number of Majors

Demand for the program is good as work force demand for medical assistants is strong. As a large number of program graduates are working in the local community the "coconut grapevine" has become a powerful marketing tool for the program. Although the program did not fill in 2017 this was due to three qualified applicants rescinding their applications; one due to pregnancy, the other the sudden death of a girlfriend, and the third to failing to obtain a passing grade in a program prerequisite course. At VCAA Dires suggestion the program advisor will now maintain an alternate list of applicants. The discrepancy between actual jobs and the number of new and replacement positions in the system APRD continues to negatively impact the programs health call in this area. However, there was some improvement in the ARPD in this area in 2017.

Graduation

Graduation rates are also consistently excellent. Persistence from fall to spring is a good indicator of a successful graduation from the program. The small cohort model enables a strong peer to peer bond to develop within the cohort which increases the amount of social support the student receives. This peer to peer bond is also actively promoted by program coordinator and faculty. This is a critical factor in student graduation rates, in addition to a highly structured program with a high level of program faculty support. The MEDA program has particularly high rates of graduates from low income and underserved populations as a result.

Certification Exam Passage

Certification exam results are consistently excellent. MEDA program student take a certification exam from the National Center for Competency Testing (NCCT) in May each year. Students take this national exam on campus at the Kaua'i CC testing center. Kaua'i CC is an official test site for this exam .This has a significant impact on testing anxiety as students do not have to fly to Oahu to take the exam. The exam is incorporated into a review course which is part of the MEDA programs required courses. Active preparation starts mid spring semester and

culminates in taking the certification exam. This supportive format is highly effective in preparing students to pass the exam.

Job Placement

Job placement is consistently excellent. In May 2016 and 2017 all MEDA graduates who applied for a job were hired the Monday after graduation. Kaua'i Medical Clinic (KMC) is the major employer of graduates; however, Kaiser Permanente also employed a graduate this year. The collaborative relationship with KMC to develop the workforce of MA's on Kaua'i has generated an interview day which resulted in the rapid hiring of the graduates. Kaiser Permanente interviewed their employee prior to graduation, which resulted in that graduate having a job offer prior to graduation.

Students receive a lot of support and guidance in job placement. This starts with resume development in fall and spring as part of course work. Discussion of employment and employment attributes occurs frequently throughout the program. This culminates in assistance with employment applications. In addition, students are provided guidance on dressing for interview and prepared in interview skills. Managers from KMC come onto campus at the end of spring semester and provide mock interviews. The high levels of support and guidance from program faculty means students are well prepared for the job seeking process in addition to being well prepared for their new role as MA's, and are therefore highly sought after employees.

Program Alignment

College

MEDA Program PSLO and CSLO align with college institutional student learning outcomes (ISLO's). strategic goals with the UHCC Strategic Directions.

UH System

Program Articulation

The only other Medical Assisting program within the UH system is at Kapiolani Community College (Kapiolani CC). Kapiolani CC has both a Certificate of Achievement (CA) and an Associate Degree (AS) in Medical Assisting. In 2017 a program graduate on Kaua'i requested transfer to the Kapiolani CC AS program. This was the first request of its kind and unusual as Kaua'i students usually can't move to Oahu to attend college. This student had a boyfriend on Oahu and was a traditional student without significant financial or family obligations; which was also unusual. In spring 2017 this request prompted the MEDA program coordinator to facilitate acceptance and transfer of the student into the Kapiolani AS degree program after she graduated with a CA from Kaua'i CC. It also led to the development and submission of an articulation agreement with Kapiolani CC. This articulation

agreement was approved by Kaua'i CC VCAA Dire and we are now awaiting a response from Kapiolani CC though Kapiolani CC Dean of Health Sciences Hagan.

It is anticipated that the number of students requesting transfer will be very small due to geographic barriers even though the number of students interested in an Associate Degree in Medical Assisting is strong and growing as the market for MA's evolves.

Course Alignment

In spring 2017 two new courses, MEDA 201 and MEDA 150 were submitted to curriculum committee for approval to align with Kapiolani CC. These fulfill the mandate from UHCC VP Morton to align course numbers and alphas across campuses. No significant changes to the course content will take place as they are essentially the same courses as the existing HLTH 240 and HLTH 155.

UHCC Strategic Directions 2015-2020

Hawai'i Graduation Initiative (HGI)
Increasing the number of graduates and transfers and on the momentum to get students through to graduation and transfer more quickly.

The MEDA program aligns with and makes significant contribution towards the following goals.

1. Increase the number of graduates
2. Increase the number of native Hawaiian graduates
3. Increase the number of low income(Pell Grant recipients) student graduates
4. Eliminate access and success gaps for targeted populations
   a. Native Hawaiian
   b. Filipino
   c. Pacific Islander
   d. Low-income (Pell recipients)
5. Reduction in time to degree
   a. Student retention and credit accumulation

Table 3: MEDA program numbers aligned with HGI goals

	2015-2016	2016-2017
Number of Graduates	10	11
Number of Certificates of Achievement	91%	91%
Number of Certificates: Native Hawaiian	30%	36%
Number of Certificates: Filipino	60%	55%
Number of Certificates: Pacific Islander	0	0
Number of Pell Recipients	70%	64%

In the MEDA CA program 90% of students complete and graduate from one or more targeted populations. Students in the MEDA program take 12-15 credits for both fall and spring semesters. In the academic year prior to admission they complete 12-15 credits of prerequisite courses. This course scheduling significantly reduces time to graduation and credit accumulation but retains students from spring to spring. The MEDA program through the above measures also contributes to the performance funding Kaua'i CC receives as these measures are also performance measures. The chart below illustrates the ethnicities of MEDA CA graduates. The comparison to the CO ethnicities demonstrates the MEDA program consistently attracts underserved population and target groups.

Chart 1: MEDA Program Graduate Ethnicities

MEDA CA Graduate Ethnicities

	2016	2017
■ Filipino	6	6
■ Native Hawaiian or Part-Hawn	3	4
■ Japanese	0	1
■ Mixed Asian	1	0
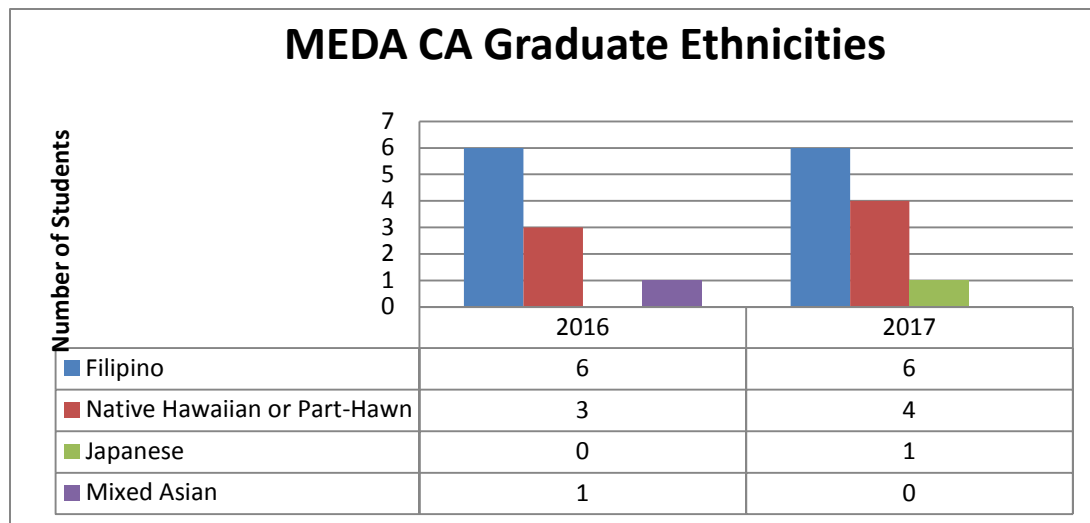
Chart 2: MEDA CO graduates by Ethnicities

MEDA CO Graduates Ethnicites

	Filipino	Native Hawaiian or Part-Hawn	Japanese	Mixed Asian	Caucasian	Total
■ 2013-2015	10	6	0	3	3	21
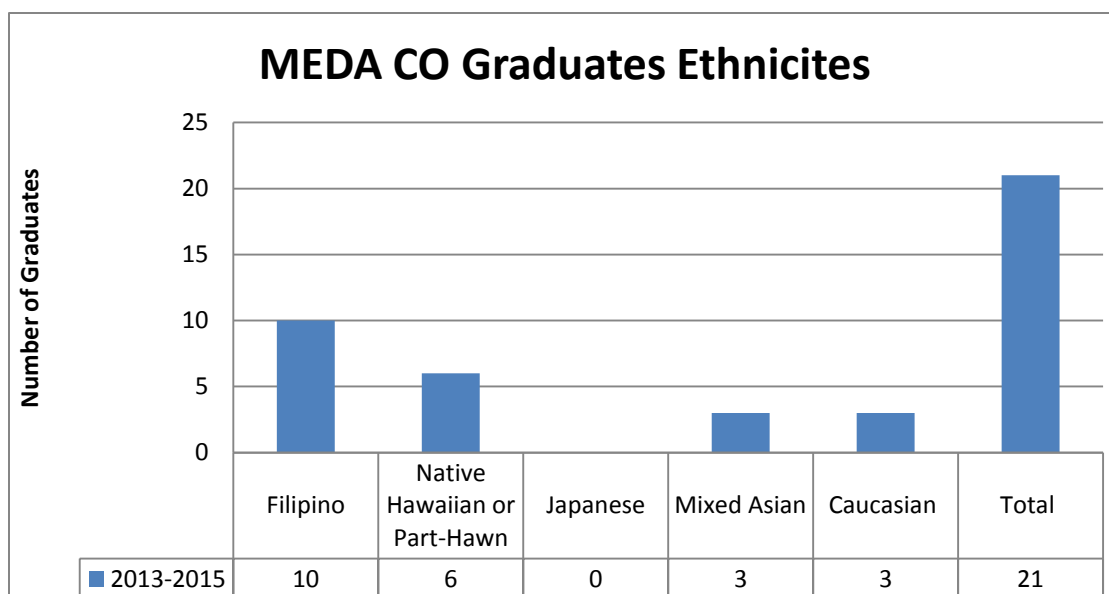
Workforce development linked to developing emerging sectors in Hawaii's economy while simultaneously providing a stable workforce for the traditional employment sectors.

The table below illustrates the projected state and national job openings for medical assistants. Medical Assisting is an emerging sector in the existing healthcare employment sector in Hawaii. The comparison to Licensed Practical Nurses (LPN's) is provided as an aide in evaluating the data. In ambulatory care sector of the healthcare market LPN's and MA's perform the same duties.

Table 1: State and National job openings

United States	Employment		Percent Change	**Projected Annual Job Openings** *
	2014	**2024**		
Medical Assistants	591,300	730,200	+24%	26,210

| Hawaii	Employment		Percent Change	**Projected Annual Job Openings** *
	2014	**2024**		
Medical Assistants	2,910	3,230	+11%	90

* Projected Annual Job Openings refers to the average annual job openings due to growth and net replacement.

National Data Source: Bureau of Labor Statistics, Office of Occupational Statistics and Employment Projections
State Data Source: State of Department of Labor and Industrial Relations, Research and Statistics Office

The MEDA program coordinator tracks job openings for MA's on Kauaʻi. This data supports the need for 10-12 graduates each year to meet the ongoing and critical need on Kauaʻi without causing market saturation. The chart below illustrates the number of MA new and replacement positions advertised on Kauaʻi. A needs assessment conducted in 2016 indicated the sustained need for medical assistants on Kauaʻi which is supported by the number of advertised positions. There is a significant discrepancy between ARPD new and replacement positions and actual advertised jobs. Manual tracking of advertised jobs by MEDA program coordinator ensures accurate data for Kauaʻi.

Chart 1: Medical Assistant Jobs advertised on Kaua'i

Medical Assistant Jobs on Kaua'i

■ MA jobs on Kaua'i

Year	Jobs
2013	11
2014	16
2015	18
2016	24
2017	24
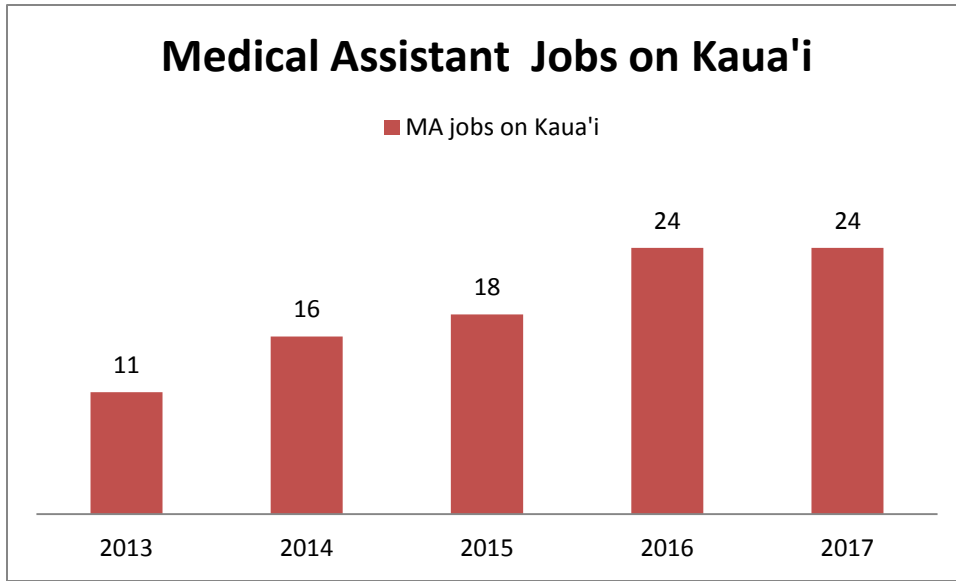
Modern Teaching and Learning Environments

Ensuring that students and faculty have the learning and teaching environments appropriate for the 21st century and the sustainability practices to maintain those environments.

The current teaching and learning laboratory environment needs modernizing. This CIP request for a minor renovation was submitted by Kaua'i CC VCSA Shimokawa in the supplemental budget request to the legislature. If funded, the projected start date is 2019.

High Performance Mission-Driven System

Practices and policies that capitalize on the University of Hawai'i being a single system of higher education in the state that can provide students with smooth transitions from K-12 through the community colleges to the baccalaureate institutions in the most productive, cost-effective, and results-oriented manner possible.

The MEDA program is a small agile program that performs at a high level. The MEDA program aligns with and makes significant contribution towards the following goals.

1. Improving time to degree
2. Eliminate cost as a barrier to education

The MEDA program graduates students after completion of a three semester CA. This is well within the three years IPEDS measure and therefore the MEDA program contributes to the IPEDS goal of 60%. The majority of students in the MEDA program has either returned to campus after completing some college credits without

graduation or has persisted in talking college credits each semester for a number of years without graduation. The MEDA program gives these students a clear academic goal and a structured pathway to achieve that goal thus improving time to degree.

Cost as a barrier to education is eliminated in the MEDA program through a number of ways. First high persistence and graduation rates reduce credit accumulation and time to degree. The number of prerequisite and general education courses is comparatively small. These courses have to be completed prior to entry into the program which provides students with an incentive to timely completion. The block scheduling and afternoon and evening classes also enable students to continue to work and continue to meet their financial obligations outside of college. The majority of MEDA students are Pell grant recipients which largely eliminates the tuition costs as a barrier. Other scholarships through community organizations like Workwise Kauai also eliminate tuition costs for some students.
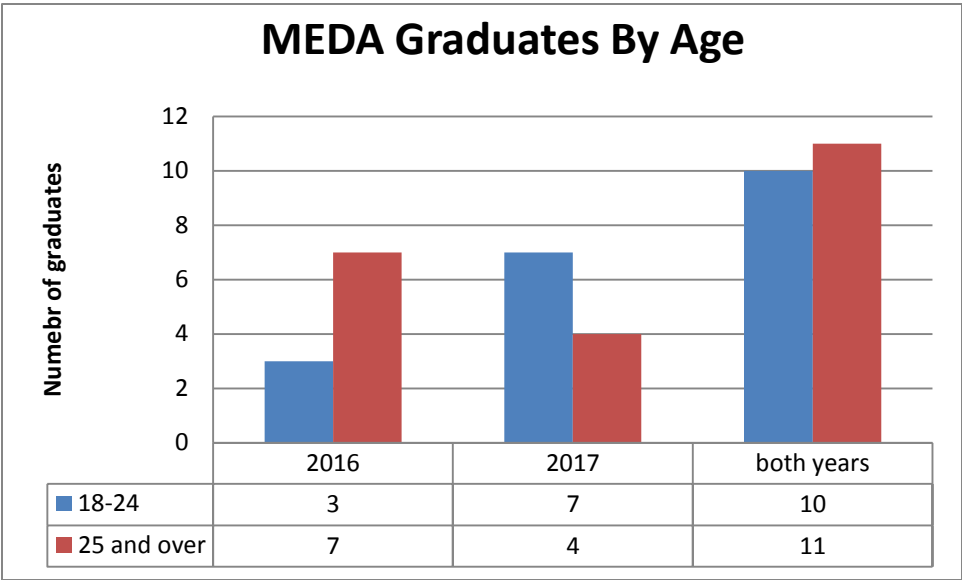
Enrollment

The identification and goals for targeted currently underserved populations.

The MEDA program aligns with and makes significant contribution towards the following goals.

1. Working Age Adults
2. Persistence

Chart 3: MEDA graduates by Age

MEDA Graduates By Age

	2016	2017	both years
■ 18-24	3	7	10
■ 25 and over	7	4	11

UH System defines working adults as those 25 and over who work. However, in Hawaii most adults under 25 also work. In addition, those MEDA graduates in the 18-24 range work part time while in the program and have

spent at least two years working full time since graduating from high school. The age of the youngest graduate was 20 and there has only been one graduate at that age. In fact, of those students 25 or under and many are them are 23 – 24. This is significant as the program has to meet the need of its working adults even though many do not meet the current UH classification. The community employers also value working adults; as a recent comment on the needs survey indicated" more slots, particularly for mature working adults". The MEDA program also contributes to overall college enrollment as many of its graduates have reenrolled in college in order to complete the MEDA program.

Learning Outcomes

The MEDA program uses both direct and indirect methods to collect data on student learning. Examples can also be found listed under measuring program quality outcomes.

The variety of course level assessment methods assess student learning and accommodate different student learning styles and ways of knowing. They also incorporate both individual and group based assessments which support the wide range of student cultures and ethnic backgrounds. In addition, development of student assessment methods considers age, and gender. These methods provide meaningful information to enable the program to support student achievement of learning outcomes.

Table 2: Examples of Assessment Methods

Classroom		Laboratory/Clinical
Social ; Aural; Visual ;Verbal; Physical	Solitary ; Read /write	Solitary & Social; Verbal; Physical; Visual
Oral Presentations (Group & Individual)	Written papers (Individual)	Laboratory Practical Exams (Individual)
Case Studies (Group)	Tests & Quizzes(Individual)	Clinical Rotations (Individual)
Skill Teaching(Individual)	External exam (Individual)	Laboratory Demonstrations (Group)
		Laboratory Peer evaluations(Group)

Methods to assess student-learning outcomes (SLOs) for each course in the MEDA program are included in all course syllabi. Course level SLOs (CSLOs) for each course link with the MEDA program learning outcomes (PSLOs). Within each course syllabus, specific assessment methods used in a course are embedded within each course and specified in each course syllabus. These methods may be formative or summative in nature. Rubrics ensure that students know what they will be expected to learn, how they will be assessed, and how they will be evaluated for their overall performance. This assessment process allows students to monitor and understand their

own development, and receive feedback from program faculty. Accreditation competencies are linked to CSLO's and cross walked for students.

Students in the MEDA program consistently meet the student learning outcomes assessed in each course using a variety of the above methods. Most courses include both solitary and social assessment methods as well as indirect and direct methods of assessment. A benchmark of 70% or higher indicates that students have met the CSLO expectation.

Part V. Program Learning Outcomes and Assessment

MEDA Program Outcomes	Course	Data Source	Benchmark	Timeline	Method	2016-2017
Demonstrate effective communication skills with all members of the healthcare team *(affective)*.	MEDA 220	Clinical evaluation	Meets expectations ≥ 3	Annually in spring	Direct	100%
		Graduate survey		Annually in fall	Indirect	100%
		Employer survey		Annually in fall	Indirect	100%
Demonstrate ethical and legal behavior to maintain patient safety and confidentiality *(affective)*.	HLTH 240	Role play evaluation	Meets expectations ≥ 3	Annually in spring	Direct	100%
		Graduate survey		Annually in fall	Indirect	100%
		Employer survey		Annually in fall	Indirect	
Apply medical office business, financial and administrative concepts and practices *(cognitive)*.	MEDA 165	Practical exam	≥ 70%	Annually in spring	Direct	92%
		Graduate survey	Meets expectations ≥ 3	Annually in fall	Indirect	100%
		Employer survey		Annually in fall	Indirect	100%
Apply critical thinking skills and concepts of medical assisting to maintain quality patient care and efficient administrative procedures *(cognitive)*.	MEDA 210	Certification exam passage result	Meets expectations ≥ 3	Annually in spring	Direct	100%
		Graduate survey		Annually in fall	Indirect	100%
		Employer survey		Annually in fall	Indirect	
Perform clinical and administrative medical assisting skills appropriate for entry-level practice in an ambulatory care setting *(psychomotor)*.	MEDA 220	Clinical evaluation	Meets expectations ≥ 3	Annually in spring	Direct	100%
		Graduate survey		Annually in fall	Indirect	100%
		Employer survey		Annually in fall	Indirect	100%

Part IV. Resource Implications

Resource Assessment

Program Resources

Program Coordinator

The MEDA program coordinator is qualified to manage the program and meets the CAAHEP accreditation requirements. Assigned time of 1.5 credits per semester is currently provided for program coordination. In addition to program coordination duties the program coordinator also provides clinical coordination for the MEDA program and students.

Faculty

Currently one faculty member teaches fulltime in the MEDA program and one lecturer teaches part time in the MEDA program. A second MEDA lecturer was hired into the MEDA lecturer pool this semester. . All faculties meet the minimum qualifications (MQ's) for Medical Assisting which were revised in 2016 to align with and meet national accreditation standards.

Facilities and Equipment

Current laboratory and classroom facilities are used by the MEDA program. Renovation and modernization of the laboratory space, which was previously used by the nursing program, is scheduled as a CIP project for 2019. A renovated and flexible laboratory space will enable the learning environment to adapt to future needs of students. Classroom space is adequate to meet current and future needs of the MEDA program.

Laboratory equipment and supplies have been purchased through professional fees, and program allocated budget funds of $3000 per year. In addition some equipment has been obtained through community donations of used equipment. These sources of funding are adequate to meet the programs needs for equipment and supplies.

Part III. Action Plan

The MEDA program has not undergone a comprehensive program review. The MEDA CA underwent a comprehensive program review during the CAHEP national accreditation process in spring 2017.

Table 6 below illustrates the action plan

Table 6 Action Plan(s)

UHCC/Campus Strategic Priority or Goal & MEDA program objective alignment	Program Action Item	Program Performance Indicator	Person(s) Responsible	Timeline	Resources Needed	Status 2017
Hawaii Graduation Initiative						
<u>Goal alignment</u> 1. Increase the number of graduates 2. Increase the number of native Hawaiian graduates 3. Increase the number of low income student graduates 4. Eliminate access and success gaps for targeted populations 5. Reduction in time to degree *MEDA Program Objective: Improve access to healthcare related programs for students on Kaua'i.*	Promote program sustainability Articulate program with stakeholder needs	80% fill rate in MEDA program courses Parity of Native Hawaiian student graduation Parity of targeted groups graduation 90% persistence fall to spring	MEDA program coordinator MEDA Faculty	annually annually	MEDA program Coordinator assigned time MEDA faculty	Met Met Met Met
Hawaii Innovation Initiative						
<u>Goal alignment</u> • Increase job placement for Kauai CC students *MEDA program objective: Provide students with a college education that enables them to earn a living wage.*	**Program Action Item**	**Program Indicator of Improvement**	**Person(s) Responsible**	**Timeline**	**Resources Needed**	**Status 2017**
	Articulate programs with workforce needs Maintain rates of student certification, licensure, and job placement.	CAHEP Accreditation CAAHEP program benchmarks Institution set standards	MEDA program coordinator MEDA faculty	annually annually	MEDA Program Coordinator assigned time. MEDA faculty	Pending Met
High Performance Mission Driven System						
<u>Goal alignment</u> • Reduce the cost of education	**Program Action Item**	**Program Indicator of Improvement**	**Person(s) Responsible**	**Timeline**	**Resources Needed**	**Status 2017**
	Articulate programs with	Graduation rates	MEDA Program	annually	MEDA Program	Met

MEDA Program Objective: Meet the Kaua'i community work force needs for medical assistants in ambulatory care.	stakeholder needs		Coordinator		Coordinator	
		Increase number of Pell grant and scholarship recipients			Assigned time	Met

Modern Teaching and Learning Environment						
Goal alignment • Facility support of 21st century learning and teaching environments *MEDA Program Objective: Improve access to healthcare related programs for students on Kaua'i.*	**Program Action Item**	**Program Indicator of Improvement**	**Person(s) Responsible**	**Timeline**	**Resources Needed**	**Status**
	Remodel laboratory environment.	Student and faculty satisfaction	MEDA Program Coordinator	Spring 2019	Campus allocation and prioritization of funds	Pending

Enrollment						
Goal 1. Increase enrollment for working adults *MEDA Program Objective: Improve access to healthcare related programs for students on Kaua'i* *MEDA Program Objective: Meet the Kaua'i community work force needs for medical assistants in ambulatory care.*	**Program Action Item**	**Program Indicator of Improvement**	**Person(s) Responsible**	**Timeline**	**Resources Needed**	**Status**
	Promote program sustainability	50% or greater Enrollment of 25- 49 years olds in MEDA program	MEDA Program Coordinator	annually	MEDA program Coordinator assigned time	Not met