

MEDICAL ASSISTING



ANNUAL

REPORT OF PROGRAM DATA

2021



UNIVERSITY of HAWAII®
KAUA'I
COMMUNITY COLLEGE

1. Program or Unit Description

Program 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 community's health in ambulatory healthcare settings.

Program Goals

The MEDA program goals 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 workforce needs for medical assistants in ambulatory care.

Target Student Population

The MEDA programs target population is:

1. Traditional students who are under 25 of age and are enrolled in college for one or more years without graduating.
2. Returning students who have dropped out of college prior to graduating.
3. Nontraditional students who are also working part time while attending college.
4. Native Hawaiian and Filipino students.
5. Students who have no prior college-level qualification.

2. Analysis of the Program/Unit

MEDA program link to ARPD data

<https://uhcc.hawaii.edu/varpd/index.php?y=2021&c=KAU&t=CTE&p=2382>

Program Analysis

Overall Program Health: Healthy

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

The Medical Assisting program received initial CAAHEP accreditation in 2018. This is a mark of quality and a gold standard for Medical Assisting programs. This process entails rigorous ongoing annual program evaluation and comparison of program outcomes against set benchmarks. In Hawaii, many employers prefer to hire graduates from accredited programs and consequently graduates of accredited programs earn a higher salary compared to graduates from non-accredited programs.

Demand: Healthy

Demand for the program is good as there continues to be a critical workforce demand for Medical Assistants in both the county and state. The program coordinator holds student information sessions in fall and spring and pre-MEDA students are invited to meet with the program coordinator personally once they have had an offer of admission. In contrast to most Kaua'i CC students, 100% of the MEDA majors are full-time in both fall (16 credits) and spring (15 credits). The cohort size of 12 is limited by the number of full-time faculty for lab instruction.

Demand indicators 2018-2021

2018-2019	2019-2020	2020-2021
Healthy	Healthy	Healthy

Efficiency: Healthy

Program efficiency continues to be good. The program graduate to full-time faculty ratio ranges between 1:10 and 1:12 and is higher than comparable healthcare programs. 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 and high-quality skill attainment. Program class fill rate remains healthy at 85% or higher for all MEDA courses and there were no low enrolled classes in 2021.

Efficiency Indicators 2018-2021

2018-2019	2019-2020	2020-2021
Healthy	Healthy	Healthy

Effectiveness: Progressing

The MEDA CA program is very effective. Course completion remains 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 high credit load in the two-semester course sequence. This is significant as many of these students have an academic history of poor grades or failure in courses or other programs prior to entering MEDA. For most of these students the MEDA CA continues to be their first experience of success and subsequent college graduation at Kaua'i CC. Note: #18 is an error the number of withdrawals is 1.

Persistence rates from fall to spring are consistently good and ranged from 100% to 83% for the past two years. The MEDA program is highly structured and uses weekly block scheduling better enabling students to both work and attend classes. Block scheduling reduces a potentially major financial stressor as students have non-school class days during which they can work. In addition, the students receive considerable attention and counseling from program faculty whereby students gain capacity/skills to better cope with the rigors of the program and personal stressors.

Graduation rates are also consistently excellent: 80% or more of students who enter the program graduate and 100% of students who persist into spring semester graduate. 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. The small cohort model is a critical factor in high student graduation rates, in addition to a highly structured program with a high level of program faculty support. The MEDA program continues to have particularly high rates of graduates from low income, Native Hawaiian, and Filipino populations as a result of the small cohort model.

Certification exam results are consistently excellent. MEDA program students take a national 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. The exam is incorporated into a MEDA program required review course. This supportive format is highly effective in preparing students to pass the exam as demonstrated by a pass rate for the past 3 years of 100%.

Job placement is consistently excellent as more than 90% of program graduates are employed in their field 4-6 months after graduation. This is due in part to the high level of support and guidance students receive in job placement and partly due to the high demand for highly qualified MAs. 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. Consequently, students are well prepared for the job seeking process. In addition, they are well prepared for their new role as MA's and are therefore highly sought after by Kaua'i employers.

Program surveys evaluate program satisfaction from several major stakeholders. CAAHEP accreditation requires an annual evaluation of graduate and employer satisfaction. In addition, students evaluate clinical sites and program resources. Results continue to 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 at over 90%. Stakeholders' comments also indicate a high level of satisfaction with the program. Employers indicate 100% satisfaction with MEDA program graduates. The MEDA program continues to meet a critical workforce need on Kaua'i.

Effectiveness Indicators 2018-2021

2018-2019	2019-2020	2020-2021
Healthy	Healthy	Progressing

CAAHEP accredited Medical Assisting programs must annually track and report several program outcomes and publicly display a five-year weighted average for at least one of these outcomes. The MEDA program displays these outcomes on the program website <https://www.kauai.hawaii.edu/meda-accreditations-and-outcomes>. The benchmarks are set by CAAHEP, and the MEDA program continues to meet and exceed all benchmarks.

Perkins Core Indicators

All Perkins Core indicators were met.

The MEDA program advisory program committee consists of major program stakeholders and meets CAAHEP accreditation requirements for its composition. Meetings take place once a year in spring. Input from the MEDA advisory committee has been positive, and no major changes have been recommended.

Program Actions

In AY 2020-2021 some minor curriculum modifications were made. BIOL 100 was added an alternative option to HLTH 140. It is apparent that some students may benefit more from this course rather than a medical terminology course. Both these courses provide preparation for the Medical Assisting science course which builds on both medical terminology and human biology concepts. ANTH 200, ANTH 220, BOT 105, ECON 130, PSY 100, have been added to the selection of Social Science (DS) courses from which students must choose one. This change will provide all students in each cohort with a more unified preparation in social science prior to entry into the program without being overly restrictive.

Summary

The MEDA program continues to be a healthy program. Nationally, 41% of MAs have college-level education, 25% have associate degree level education and 9% have education at a bachelor's degree level.

The MEDA program continues to serve its target student population and most MEDA majors continue to be Native Hawaiian and Filipino. In addition, approximately 60-70% of MEDA program graduates each year are Pell grant recipients indicating that the MEDA program is meeting its target student population of low-income students. The MEDA program is cost effective and

efficient in its use of resources. SSH has remained high resulting in the MEDA program generating more revenue in tuition and fees than in comparable programs. The 28 semester hours per student compares favorably with similar larger healthcare programs.

The MEDA program has used creative strategies to construct a pathway that provides access to students on outer islands without any additional resources or cost. The unique student population and student needs on the outer islands can be best served by the Kaua'i CC program.

Program outcomes are excellent and remain above the national accreditation benchmarks in all areas e.g., persistence, graduation, certification exam passage and employment etc. Local employers on Kaua'i continue to hire MEDA graduates and remain highly satisfied with the quality and academic preparation of Kaua'i CC graduates. It is becoming increasingly common for employers to require a graduation from an accredited program as a condition of hire in addition to offering a higher hourly pay rate. MEDA graduates are meeting the critical workforce needs on Kaua'i.

3. Program Student Learning Outcomes or Unit/Service Outcomes

MEDA PSLO 1: Demonstrate effective communication skills with all members of the healthcare team (affective).

Benchmark: 100%

Assessment Results: Met: 100%

Changes that have been made as a result of the assessment results: None

MEDA PSLO 2: Demonstrate ethical and legal behavior to maintain patient safety and confidentiality (affective).

Benchmark: 100%

Assessment Results: Met: 100%

Changes that have been made as a result of the assessment results: None. Continue to annually assess.

MEDA PSLO 3: Apply medical office business, financial and administrative concepts, and practices (cognitive).

Benchmark: 100%

Assessment Results: Met:100%

Changes that have been made as a result of the assessment results: None. Continue to annually assess.

MEDA PSLO 4: Apply critical thinking skills and concepts of medical assisting to maintain quality patient care and efficient administrative procedures (cognitive).

Benchmark: 100%

Assessment Results: Met:100%

Changes that have been made as a result of the assessment results: None. Continue to annually assess.

All students must meet all program outcomes to graduate from the MEDA program. Therefore, the program benchmark must be 100%. Changes have not been made at the program level because of the assessment results as by that time there is no need to make program level changes. However, faculty make minor changes at the course level each semester, as needed, for students to continue to progress and meet the program outcomes and graduate. These changes might be related to sequencing of content, assessment tools, grading rubrics, revising content for lectures, revising in class activities. Other changes might be related to clinical skills e.g., four open labs for practice were added when it became apparent that students needed more practice with lab clinical scenarios. Individualized approaches to students with specific learning challenges are a usual part of the program and change based on the student or the cohort.

4. Action Plan

Evaluation of Program Goals

Program goals were met in AY 2020-2021

- 1. Action Plan:** Improve access to healthcare related programs for students on Kaua'i.
Anticipated Outcome: 80 % Fill rate
Actual Outcome 2012-2021: >90% fill rate
Plan: Continue to annually assess. To change the program goal to include Kauai CC students who live on Maui.
- 2. Action Plan:** Provide students with a college education that enables them to earn a living wage.
Anticipated Outcome: Desired Outcome: a) Parity of Native Hawaiian student graduation; Parity of targeted groups graduation: Filipino; Parity of targeted groups graduation: Pell recipients. b) 90% full-time students

Actual Outcome 2020-2021: a) 36% of graduates are Native Hawaiian and 45% of graduates are Filipino; 72% of graduates are Pell recipients. b) 100% of graduates are full-time students.

Plan: Continue to annually assess.

- 3. Action Plan:** Meet the Kaua'i community workforce needs for medical assistants in ambulatory care.

Anticipated Outcome: 60% Job placement rate

Actual Outcome 2020-2021: >90% job placement rate

Plan: Continue to annually assess.

- 4. Action Plan:** Maintain CAAHEP accreditation

Anticipated Outcome: Meet all CAAHEP program benchmarks.

Actual Outcome 2020-2021: All students met all CAAHEP benchmarks.

Plan: Continue to annually assess.

2022-2023 New Action Plan with Alignment with the College's Mission and Strategic Plan

The following goals will be implemented in AY 2022-2023. Due to cancellation of the MEDA program for AY 2021-2022.

Program Goal 1: Improve access to healthcare related programs for students on Kaua'i and Maui.

Strategic Goal/priority: Hawaii Graduation Initiative 1 *Increase the number of graduates*

Benchmark: a) 80 % Fill rate b) 5 clinical sites with affiliation agreement on Maui.

Desired Outcome: a) 80 % Fill rate b) 5 clinical sites with affiliation agreement on Maui.

Unit of Measure: Number of students who are admitted to the program. Number of clinical sites with affiliation agreements on Maui.

Program Goal 2: Provide students with a college education that enables them to earn a living wage.

Strategic Goal/priority: a) Hawaii Graduation Initiative 2 *Increase the number of native Hawaiian graduates;* Hawaii Graduation Initiative 5 *Eliminate access and success gaps*

b) Hawaii Graduation Initiative 7 *Reduce the time to degree: Increase student retention and credit accumulation*

Benchmark: a) Parity of Native Hawaiian student graduation; Parity of targeted groups graduation: Filipino; Parity of targeted groups graduation: Pell recipients b) 90% full-time students

Desired Outcome: a) Parity of Native Hawaiian student graduation; Parity of targeted groups graduation: Filipino; Parity of targeted groups graduation: Pell recipients. b) 90% full-time students

Unit of Measure: a) % of graduates who are native Hawaiian; % of graduates who are Filipino; % of graduates who are Pell recipients b) % of students who are full-time and graduate with 150% of the program length

Program Goal 3: Meet the community workforce needs for medical assistants in ambulatory care.

Strategic Goal/priority: Hawaii Innovation Initiative 8 *Increase job placement for Kaua'i CC students*

Benchmark: 60% Job placement

Desired Outcome: 60% Job placement

Unit of Measure: % graduates who obtain positive job placement

Program Goal 4: Maintain CAAHEP accreditation standards.

Strategic Goal/priority: Modern Teaching and Learning Environment 12

Benchmark: CAAHEP benchmarks

Desired Outcome: Meet all CAHEP benchmarks

Unit of Measure: Number of students who meet benchmarks. Number of program outcomes met.

MEDA was accredited by CAAHEP in 2018. The program will undergo the next comprehensive accreditation review in 2023. Therefore, no CPR is required.

There continues to be an unmet workforce need for MAs on Maui. A collaborative Perkins proposal with UHMC will be submitted by the MEDA program coordinator and UHMC division chair in spring 2022 to support the development of a sustainable Maui cohort of MEDA program students. The program coordinator will travel to Maui to expand the number of clinical sites available to students; obtain qualified MEDA lecturer support on Maui and student support personnel on Maui prior to implementation of the MEDA on Maui program.

5. Resource Implications

Currently the program has one faculty who provides direct sole instruction for four out of five of the MEDA courses each semester and serves as the program and clinical coordinator. This faculty remains consistently overloaded each academic year; a practice that is not sustainable.

Qualified lecturers are difficult to hire for anything other than 2-3 evening labs as they have full-time jobs until 5 pm each day. To sustain a quality program that will meet the needs of our community long-term; a second full-time faculty member is needed. This will allow the current faculty to reduce workload to 27 TE's per academic year and continue to develop the program both here and on Maui. As the Maui cohort become Kaua'i CC students upon admission to the program this model increases Kaua'i CC enrollment, increases tuition revenue and the number of Kaua'i CC graduates. This cross-campus collaboration with UHMC supports fiscal use of limited resources while ensuring students' needs are met and the UHCC system has identified this as a priority. In addition, the UHCC system has identified the MEDA program at Kaua'i CC as a hub for reaching students on outer islands. The MEDA advisory board has indicated ongoing support for the addition of a second FTE for the MEDA program.

Further cost effectiveness of adding a second MEDA faculty can also be realized in other ways. For example, if necessary, it will enable the current MEDA faculty member to provide instruction in health sciences support courses within the Health Education Division (HED) as needed. This will assist in reducing overload for faculty in other HED departments and reduce overload costs. In addition, MEDA faculty can be assigned health classes, as needed, which are currently taught by HED lecturers thereby reducing lecturer use and costs. Further cost effectiveness will also be realized by hiring a second MEDA FTE as this faculty will be non-nursing faculty and therefore salary and annual recurring costs will be lower. In fall of 2021, the current MEDA FTE had to take personal LWOP. As the MEDA program only has one FTE this required that the program be canceled for AY2021-2022. Thus, the planned program admission for the cohort of 12 students was severely impacted. If the MEDA program had a second full-time MEDA faculty member this negative impact on students could have been avoided.

Program Goal 1: Improve access to healthcare related programs for students on Kaua'i and Maui.

Strategic Goal/priority: Hawaii Graduation Initiative 1 *Increase the number of graduates*

Program Goal 3: Meet the community workforce needs for medical assistants in ambulatory care.

Strategic Goal/priority: Hawaii Innovation Initiative 8 *Increase job placement for Kaua'i CC students*

Resource Requested: 1 FTE MEDA faculty

Cost: Salary of a C2 instructor

Annual Recurring Cost: Salary and fringe benefits of an instructor

Useful Life of Resource: 15-25 years

Person Responsible and Collaborators: Victoria Mathis, MEDA Program Coordinator

Timeline: Fall 2022