September 21, 2015

Samuel Munnerlyn, MA
President
H. Councill Trenholm State Community College
1225 Air Base Blvd, PO Box 10048
Montgomery, AL 36108

Dear President Munnerlyn:

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) is pleased to inform you of its vote on September 18, 2015 to award continuing accreditation to the Medical Assisting Associate degree program at H. Councill Trenholm State Community College, Montgomery, AL.

The recent peer review conducted by the Medical Assisting Education Review Board (MAERB) and CAAHEP’s Board of Directors recognizes the program’s substantial compliance with the nationally established accreditation Standards. The next comprehensive evaluation of the program, including an on-site review, is scheduled to occur no later than Fall 2023.

The MAERB will regularly monitor the program’s compliance with the outcomes assessment thresholds through the program’s Annual Report as well as other documentation that may be requested (Standard IV.B.).

The following citations merit your institution’s attention and resolution in order to strengthen the program’s compliance with the Standards (for a complete copy of the Standards, check the CAAHEP website at www.caahep.org, or call the office at 727-210-2350):

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.

There was no sponsor administrative representative or physician (or equivalent) member attending the Advisory Committee meeting in 2013 or 2014. The Advisory Committee rosters for the last three years had no public member listed.

There was no record of an Advisory Committee meeting in 2014, and that omission was confirmed by the Program Director.

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)
Minutes of advisory committee meetings for 2015 and 2016 that show active participation by sponsoring administration, physician, and public members, or documentation, such as an email showing the minutes sent, copy of letter indicating minutes were mailed, link to a videorecording 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 these absent members.

III.C. Resources - Curriculum
The curriculum must ensure the achievement of program goals and learning domains. Instruction must be an appropriate sequence of classroom, laboratory, and clinical activities. Instruction must be based on clearly written course syllabi that include course description, course objectives, methods of evaluation, topic outline, and competencies required for graduation, which must be provided prior to implementation of each segment of the curriculum.

A number of the cognitive objectives, such as I.3, III.3, III.9, V.1, V.3, VII.9, are not included on any of the syllabi. In addition, a number of the psychomotor competencies, such as VII.3, IX.1, IX.3, IX.6, are also not indicated on the syllabi.

Submit the following:
Syllabus for any courses that contain the above-listed objectives and competencies indicating their inclusion in the course.

III.C.1. Resources - Content and Competencies
The program must demonstrate that the content and competencies included in the program’s curriculum meet or exceed those stated in the latest edition of the MAERB Core Curriculum (Appendix B).

COGNITIVE DOMAIN (KNOWLEDGE BASE)

I. ANATOMY & PHYSIOLOGY-Cognitive
12. Describe the relationship between anatomy and physiology of all body systems and medications used for treatment in each

II. APPLIED MATHEMATICS-Cognitive
6. Identify both abbreviations and symbols used in calculating medication dosages

VII. MANAGED CARE/INSURANCE-Cognitive
6. Discuss referral process for patients in a managed care program
12. Define Diagnosis-Related Groups (DRGs)

VIII. PROCEDURAL AND DIAGNOSTIC CODING-Cognitive
3. Describe how to use the most current diagnostic coding classification system

X. ETHICAL CONSIDERATIONS-Cognitive
3. Discuss the role of cultural, social and ethnic diversity in ethical performance of medical assisting practice

XI. PROTECTIVE PRACTICES-Cognitive
6. Describe basic principles of first aid
12. Identify emergency preparedness plans in your community

The cognitive domain objectives listed above were not taught and/or achievement not measured.

The important elements were not appropriately highlighted, so they could not be identified.
Submit the following:
Current syllabi/course outlines for the courses in which any of the above-listed cognitive objectives are taught and assessed. The above-listed cognitive objectives need to be highlighted.

Grading policy, grading scale, and pass score applied for the cognitive objectives need to be highlighted on each syllabus.

Official roster of the most recently assessed group of students who took the particular course(s) in which the specific objectives listed above are taught.

Copy of the blank examinations and/or other required assessment tools covering the listed objectives, highlighting which specific question covers the objective in question. Indicate the course number and course title on the particular assessment tool.

Copy of gradebooks (containing grades of tests and other academic projects focused on the cognitive objectives) covering the most recently assessed students who took the course, along with either the official or unofficial transcripts for those students that document the final grade for the course.

PSYCHOMOTOR DOMAIN (SKILLS)

II. APPLIED MATHEMATICS-Psychomotor
3. Maintain growth charts

III. APPLIED MICROBIOLOGY/INFECTION CONTROL-Psychomotor
1. Participate in training on Standard Precautions

VII. MANAGED CARE/INSURANCE-Psychomotor
6. Verify eligibility for managed care services

X. ETHICAL CONSIDERATIONS-Psychomotor
1. Report illegal and/or unsafe activities and behaviors that affect health, safety and welfare of others to proper authorities

AFFECTIVE DOMAIN (BEHAVIOR)

I. ANATOMY & PHYSIOLOGY-Affective
3. Demonstrate respect for diversity in approaching patients and families

VI. BASIC PRACTICE FINANCES-Affective
1. Demonstrate sensitivity and professionalism in handling accounts receivable activities with clients

IX. LEGAL IMPLICATIONS-Affective
3. Recognize the importance of local, state and federal legislation and regulations in the practice setting

X. ETHICAL CONSIDERATIONS-Affective
3. Demonstrate awareness of diversity in providing patient care

The psychomotor and affective domain objectives listed above were not taught and/or achievement not measured.

The important elements were not appropriately highlighted, so they could not be identified.
Submit the following for psychomotor and affective competencies:
Current syllabi for courses in which any of the above-listed psychomotor and/or affective competencies are taught and assessed. The above-listed competencies need to be highlighted.

Grading policy, scale, and pass score for the competencies, including the requirement for successful completion of all psychomotor and affective competencies.

Official roster of the most recently assessed group of students who completed the specific class in which the competencies outlined above were taught.

Copy of blank skill assessment tool used to assess student achievement on each competency, with the particular step highlighted if the tool assesses more than one competency, and the course number and name indicated on the tool.

Master competency checklist or detailed gradebook covering the most recently assessed group of students who took the course, documenting successful completion of each psychomotor and affective competency by all students who passed the course, along with either the official or unofficial transcripts for those students that document the final grade for the course. Highlight on the checklist or the detailed gradebook the competencies that are outlined above.

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.

There was no evidence that the resource assessment was completed annually, as the new Program Director did not have any of the previous assessments.

Submit the following:
Provide the 2016 Resource Assessment to demonstrate that the resources have been assessed.

V.A.1. Fair Practices - Publications and Disclosure
Announcements, catalogs, publications, and advertising must accurately reflect the program offered.

The 2014-2015 college catalog (pp. 212) states that the Medical Assisting program is accredited by the Medical Assisting Education Review Board (MAERB) a committee on accreditation of CAAHEP, which functions as an autonomous body within the AMA Endowment; however, only the Associate Degree in Applied Technology Medical Assisting Technology is accredited, and not the short-term Certificate award option that is also listed.

The documentation provided to the students is inconsistent regarding the number of practicum hours required to complete that segment of the program. The agreement signed by the student states 200 hours, but the course syllabus given to the students in the MAT 229 Medical Assistant Practicum states 180 hours. The Practicum Coordinator verified that the correct hours are 180, as recommended by the Advisory Committee meeting minutes on November 15, 2013.

Submit the following:
The current college catalog that accurately states which program is accredited by CAAHEP.

Copies of information supplied to student and Practicum sites, including student agreements, the course syllabus, and any other publications in which the Practicum hours are mentioned, that consistently show the correct number of hours required to successfully complete the Practicum experience.
V.F. Fair Practices - Agreements

There must be a formal affiliation agreement or memorandum of understanding between the sponsor and all other entities that participate in the education of the students describing the relationship, roles, and responsibilities of the sponsor and that entity. Practicum agreements must include a statement that students must be supervised and must not receive compensation for services provided as a part of the Practicum.

Not all of the site agreements provided had the statement that "practicum students must be supervised."

Submit the following:
A roster of the most recently assessed practicum students, along with the names of the sites at which they are placed and the type of site (clinic, type of office, and so on).

Copies of the formal, signed agreements with the sites for those students that includes details, appropriately highlighted, about the following: statement that the practicum student must be supervised.

CAAHEP requests that two copies of a progress report be sent to the MAERB by November 1, 2016 indicating the manner in which these citations are being resolved. The program must submit the progress report via one of the following: 1) Send two (2) USB thumb drives with all requested information to MAERB at 20 North Wacker Drive, Suite 1575, Chicago, IL 60606 or 2) scan the cover letter (on institution letterhead with appropriate signatures) and documentation into a PDF file and e-mail it to MAERB at maerb@maerb.org.

Failure to respond satisfactorily to the citations above may result in a withdrawal of accreditation.

The accreditation standards are established by CAAHEP, MAERB, American Association of Medical Assistants (AAMA) and American Medical Association (AMA).

The commission commends you and your colleagues for your commitment to continuous quality improvement in education, as demonstrated by your participation in program accreditation. Questions concerning the submission or content of the progress report should be directed to the MAERB Executive Office.

Sincerely,

Thomas K. Skalko, PhD, LRT/CTRS
President

cc: Tracie M. Carter, DDS, MPA, BS, Director of Health Services Technology
    Miriam Diamond-Akwuba, CCMA, MBBS, Medical Assisting Program Coordinator
    Jennifer L. Spegal, MT, MEd, CMA (AAMA), Chair, MAERB
    Mary L. Dey, CMA-AC (AAMA), BS, Co-Vice Chair, MAERB
    Rebecca Walker, CMA (AAMA), BS, CPC, Co-Vice Chair, MAERB
    Sarah R. Marino, PhD, Executive Director, MAERB