

## Non-Instructional Annual Review Continuing Healthcare Education

This document addresses the following SACSCOC requirements: CR 2.5, CS 3.3.1, and CS 3.5.1, CR 3.9.2, CR 3.13.3, and FR 4.5

### Purpose

Amarillo College non-instructional areas consistently review data and strive for improvement. The purpose of this review is to demonstrate how AC non-instructional areas support AC's mission by "...enriching the lives of our students and our community."

On an annual basis, the Program Review process will capture a holistic snapshot of strengths, weaknesses, and improvement plans based on institutional data and assessment information.

The information collected on this form will also serve to help your division complete the information required by SACSCOC for Amarillo College's continued reaffirmation efforts.

**Response Length Suggestion: Most responses should be 2-3 sentences. If available, you may also provide a link to other documentation that answers each question.**

### I: Identification

**1. Department Title:**

Continuing Healthcare Education

**2. Department Purpose Statement:**

Creating educational opportunities in healthcare.

**3. Department Review Year (i.e. Most Recent Academic Year)**

2013-2014

**4. Date of Submission:**

July 25, 2014

**5. Lead Person Responsible for this Department Review:**

Name: Kim Crowley  
Title: Director of Continuing Healthcare Education  
E-mail: kacrowley@actx.edu  
Phone Number: 806-354-6087

**6. Additional Individuals (Name and Title) Responsible for Completing this Department Review:**

Melissa Burns – Education Coordinator and Sherrie Nunn Administrative Systems Specialist

**II: Existing Data (Not Survey, Focus Groups, and/or Interviews)**

AC staff/administrators collect and evaluate data related to people served.

1. What significant AC, state, federal, or other reports do you complete on an annual basis and/or what significant quantitative data do you collect or review on an annual basis? (Please provide links to data/report information or a succinct summary of your data findings.)

CNA Student report

2. Based on the past year’s data (referenced in Question #1), please evaluate your data and/or department. (Place an ‘X’ in each text box that corresponds to your evaluation. You may delete or add rows.)

Data Reported/Collected (Include Most Important Data)	Needs Improvement	Meets Standards	Exceeds Standards
1. Number of CNA students who would recommend our program to others 35 responses – 30 yes			X
2. Number of times online materials were used each week by students 34 responses – 8 said 4 or more but 6 said 0 and 4 said 1 and 7 said 2	X		
3. How much did Simman help to prepare you for clinicals 9 out of 35 said none at all.	X		

3. (If applicable) If any area “Needs Improvement,” please explain why (i.e. Analysis).

The additions of online component and the Simman simulation were not well understood or utilized by faculty during this first cohort. This was partially due to lack of understanding and experience on the part of the administrator and the faculty.

4. (If applicable) Based on the data above, what changes do you recommend (i.e. Action Plan)?

Based on our data and our analysis of the need for improvement – the online components were revised, and additional training on Simman use is being started as well as a revision of the syllabus which will place more emphasis on these two pieces of the course. Faculty are being asked to devise Simulation exercises to utilize the Simman more fully appropriately to specifically address educational goals and objectives..

**III: Existing Data (Based on Surveys, Focus Groups, and Interviews)**

In this section, provide examples of ways you used survey data or qualitative research (interviews, focus groups, etc.) to make decisions.

**PART A:**

1. Over the past year, did your area collect and/or review any survey data or qualitative (focus group, interview, etc.) information?

(Place an 'X' in the text box that corresponds to your response.)

Yes (If Yes, Proceed to PART A, Question #2)	No (If No, Proceed to PART B)
X	

2. Summarize the most important information that was collected and/or reviewed and the results.

The most important data we used this year came from our Massage Therapy students and the student interview performed at the end of the program. The majority of our students felt that the courses were designed so that all students would pass and it didn't matter if they excelled or not. 100% of the students felt we needed a much more clear educational program and a higher level of rigor in the program in order to prepare the students for the licensing exam. 12 of our 14 students felt that they were not adequately prepared and would not be successful on the exam

3. (If applicable) Based on the data above, what changes do you recommend (i.e. Action Plan)?

Based on this data – faculty meetings were held to review the data and action plans were developed which included. A more detailed syllabus for each course within the program including grading rubrics and testing assignments that addressed specific program objectives. Revisions to the overall grading scheme and to the course assignments are being finalized at this time.

**PART B:**

Additional Comments Related to Surveys and Qualitative Research (Not Required):

#### IV: Institutional Initiatives

##### PART A –No Excuses:

Each department is expected to support student success initiatives.

1. List 1 or more ways your department most focuses on any of the No Excuses goals/initiatives.

The CCHcE department focuses on the No Excuses goals and initiatives in many ways – Through our work on the DOL grant we are developing programs with imbedded student support and tutoring as well as re-aligning courses to provide the most flexibility to students including options for moving quickly through programs or slowly through them based on student’s needs. A referral system through the faculty is allowing students to more easily and quickly access social and educational support systems. Many of the departmental programs are going through a re-design process at this time in order to remove barriers for students and to stack the programs to allow a more seamless flow into academic programs.

2. Are there any changes your department has made over this past year to remove barriers to students and further the No Excuses goals OR to move the needle toward fulfillment of the No Excuses goals?

- If so, please explain.
- If not, but you plan to make changes that aid students success, please provide a few sentences explaining how you can better support No Excuses.

Yes – many changes virtually everything the department does has changed – we have an advisor now to assist students, we have helped change TPEG awarding processes to assist more students with funding, peer assistance and tutoring has been implemented, an ongoing revision in the registration process for healthcare CE is underway to make the process easier and less time consuming.

##### PART B –Institutional Outcomes:

Each department is expected to provide quality student, customer, and/or client services.

1. For this review year, what is/were your department’s most important goals (i.e. broad things you would like to accomplish)?

To successfully implement the revised CNA program and new Regional Testing Center

2. For this review year, what is/were your department’s most important outcome/s that can be specifically measured and help you achieve your goals? Provide examples of 1-3 outcomes. (An outcome provides observable evidence that your student’s or client’s knowledge, skill, ability, attitude, or behavior has changed as a result of your efforts.)

After being taught the CNA skills needed for successful course and program completion, 90% of CNA students will pass the State exam.

3. How does your department assess the above outcome/s? What were the results of your outcome assessment? What do your results tell you?

The department tracks the number of testing candidates and the number of passing candidates with each test group and compiles this information on a yearly basis.

CNA Certification Testing numbers and pass rates were a significant outcome and process change for us this year. The State changed the testing method and process on November

1<sup>st</sup> of 2013. Prior to this change our average pass rate on any given testing session was 90% Upon completion of the first testing under the new model – only one tester out of 10 passed. The second testing session 0 out of 7 passed the skills. On our most recent testing session 8 out of 9 passed the certification exam. The exam tests – on a written knowledge based scale as well as a skills demonstration application based scale.

Our results showed a significant drop in the pass rates with the new testing method. This was attributed to several changes – A time limit was added to the skills portion, the minimum criteria was changed - students given 5 random skills were allowed to fail one skill – In the new design they must pass all 5 skills and stay within the time limit.

Our results told us we were not pushing the students hard enough to stay within the time frame and were being too lax on the steps of the skills. The testing results specifically identified range of motion as a skill we needed to teach differently.

**4. What change/s has your department made in the past year or do you plan to make based on your assessment of any outcome?**

The department is continuing to adapt our teaching methods to accommodate the new testing and assessment criteria of the state. Implementation of an internal classroom skills competency testing patterned after the State exam will be ready for the fall courses.

**PART C –Strategic Planning:**

Each department is expected to support AC’s Strategic Planning initiatives.

**1. Identify at least one strategy or task from the Strategic Plan your area currently addresses/evaluates.**

From goal 2 Number 2.1 expansion of services and offerings. We are currently developing new programs for students – residential assistant, Patient Care Technician, and EKG technician.

**2. (If applicable) What additional item/s should AC’s Strategic Plan address?**

The strategic plan needs to address the implementation of a plan to specifically bring the college into alignment within itself – breaking down silos and ensuring we all work together for the benefit of the whole on every level. Academic and CE and the services that are not directly linked to students.

**PART D – Core Objectives (CR 2.10):**

SACSOC guidelines require non-instructional areas to provide student support programs, services, and activities that are consistent with its mission and that promote student learning and enhance the development of its students.

At Amarillo College, a component of student learning is found present in the existence of AC’s General Education Competencies. Due to recent mandate changes set forth by the Texas Higher Education Coordinating Board (THECB), AC has adopted the following General Education Competencies: Communication Skills, Critical Thinking Skills, Empirical and Quantitative Skills, Teamwork, Social Responsibility, and Personal Responsibility.

Although these competencies obviously relate to academia, many non-instructional areas also support some or all of these objectives.

**Some Examples of Ways Non-Instructional Areas Can Support Student Learning:**

Personal Responsibility: Any service that provides materials/information related to financial literacy, life planning, etc. to students could relate to personal responsibility. Also any measure of student personal responsibility (e.g. percent of students not dropped for non-pay, percent of students who pay their rent to AC housing on time, etc.) relates to this topic.

Social Responsibility: If students are able to serve or learn about ways to serve their community or world, this could relate to social responsibility.

Communication, Critical Thinking, and Empirical and Quantitative Skills: If a department teaches a skill/topic within the classroom or through a published document geared toward students, this skill/topic could relate to communication, critical thinking, or any of the other objectives—depending on the skill/topic being taught.

Teamwork: Any student organization/framework where students must work successfully within a group could equate to teamwork.

**1. Does your area work (in-person, through publications, or through some other means) with students to learn/accomplish any of the following objectives?**

<b>Objective</b>	<b>Yes</b> (If Yes to Any Area, Respond and Proceed to Part D, Question #2)	<b>No</b> (If No to All Areas, Proceed to Part D, Question #3)
Communication Skills	X	
Critical Thinking Skills	X	
Empirical & Quantitative Skills	X	
Teamwork	X	
Personal Responsibility	X	
Social Responsibility	X	

**2. For each objective that received a “Yes” response, provide a bulleted list identifying how your department addresses each particular objective with AC students, any assessments related to your objective (if applicable), and any results related to your assessment (if applicable).**

- Assessments can be indirect (e.g. surveys, focus groups, etc.) or [direct](#).

Each of the programs within our department have components of all of the listed objectives within them:

CNA, PCT, EKG, HUC and Phlebotomy include: Resume writing, Mock interviews, Group activities, Case Studies to improve critical thinking and public/community impact lessons based on public and community health being everyone’s responsibility.

3. Please indicate (place an X in the corresponding box/es) the mode of delivery by which you offer any support programs, services, and activities, to students.

In Person	Web	Phone	E-mail	Live Chat
X		X		

4. Do you have plans to expand your learning objectives and/or modes of delivery? If so, how do you plan to expand these objectives/delivery modes? If not, why not?

Yes the department is struggling to develop a web and email system to serve the students in the online environment. Many of our younger students are very technology savvy and our faculty are struggling to keep up with that.

***V: Policies and Procedures***

Amarillo College’s non-instructional areas consistently have procedures in place that promote student confidentiality, staff efficiency, student success, and accountability.

Each non-instructional area will respond to the Core 5 (first 5) “Policies and Procedures” questions if they are pertinent to their area. If a department has additional questions they would like to include for accountability or some other purpose, they will also include those questions on this section of the form.

1. Please explain how your area supports the security, confidentiality, and integrity of student records and maintains special security measures to protect and back up data (CR 3.9.2)

The department maintains required hard copy documentation of class and student activities in locked file cabinets which are also locked in the office area. No student documentation is allowed to be taken home with a staff member. Discussions during staff meetings address ways to maintain confidentiality and improve processes to improve security of data. Discussions include review of FERPA rules and discussions of how to improve our compliance. – computer screens in open areas are equipped with privacy screens and Staff are trained not to release information to anyone other than the student.

2. How do you ensure that all of your employees are aware of student complaint procedures and that the procedures are handled in a way that is in accordance with the institutional policy of complaint procedures being reasonable, fairly administered, and well-publicized (CR 3.13.3)?

Student complaint procedures are addressed with faculty and staff at the beginning of each semester and staff and faculty are encouraged to bring any questions or concerns to the Director as soon as possible.

All student complaints are reviewed and may be sent up the chain of command as needed.

3. Has your area made any departmental changes based on student complaints? If so, what changes did you make (FR 4.5)?

Yes - This semester a student complained that they felt they could not be honest on the course evaluation since the instructor would be the one reading it. Because of this we changed the way we implement the evaluations at the end of each course to ensure the faculty are not able to review them at that time but only after they are summarized and the course is complete.

4. Have you addressed any local, state, audit, or federal compliance issues that have caused you to make an adjustment to your department and/or a policy change? If so, please explain.

The State Changed the minimum number of hours for the CNA program and added a required 24 hour CE component which required us to make changes to our program.

5. Have you made any changes to your department's policy or procedures over the past year that are otherwise not addressed in this review? If so, please explain.

no

## *VI: Conclusions*

1. What is the biggest issue/obstacle that your department currently faces?

Please explain the issue, point to evidence supporting why your issue is important (addressed in this document or elsewhere), explain how you would like to fix the issue, and explain any budgetary constraints.

The biggest obstacle the department faces is the tremendous workload that continually keeps both faculty and staff rushing just to stay even with the onslaught which doesn't leave any time for simply stopping and assessing and making improvements. Because we are CE our department is often - left out or completely misrepresented and misunderstood within the college as a whole. Specific evidence of this is the lack of understanding of how and if CE can use blackboard and the impact that has on AC, the lack of linked courses and crossover of programs when the crossover would be natural and should be happening. AC could realize some significant budget savings and improve student success if these two sides could come together as one with respect and understanding. Neither side really knows or understand what the other side does - this needs to change - how can we work together and move forward if we don't know anything about each other. We are in the business of education - we need to educate ourselves.

2. Additional Comments Pertinent to this Annual Review Evaluation (Not Required):

Thank you for allowing us to have some input. We are a great institution but like all we can make improvements that will improve us all.