**Non-Instructional Annual Review
Center for 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:**

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| Center for Continuing Healthcare Education |

1. **Department Purpose Statement:**

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| Creating educational opportunities in healthcare. |

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

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| 2014-2015 |

1. **Date of Submission:**

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| July 10, 2015 |

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

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| Name: Kim CrowleyTitle: Director – Continuing Healthcare EducationE-mail: kacrowley@actx.eduPhone Number: 806-354-6087 |

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

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| Melissa Burns – Professional Educational 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.)**

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| CNA Student Report |

1. **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.)**

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| **Data Reported/Collected** **(Include Most Important Data)** | **Needs Improvement** | **Meets Standards** | **Exceeds Standards** |
| 1. Students perceived value of Assistance with Resume writing during the course. 29 responses - one reported only a little value, 7 reported some value, 8 reported quite a bit of value and 13 reported it was very valuable.
 |  |  | X |
| 1. Number of times online materials were used each week by students: 29 students surveyed – 17 reported 4 or more times a week 6 reported 3 times per week, 4 reported 2 times per week and 2 reported once a week. None of the students reported zero.
 |  |  | X |
| 1. How much did SimMan prepare you for clinicals: 29 students were surveyed – 3 reported nine at all, 7 reported only a little, 11 reported some, 4 reported quite a bit and 4 reported very much.
 | X |  |  |
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1. **(If applicable) If any area “Needs Improvement,” please explain why (i.e. Analysis).**

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| AS we continue to work with SimMan and the CNA students we believe that the inherent value of the Simulation response is not being recognized by this level of students for several reasons the biggest being that the high fidelity responses and simulation that can be manipulated may be too far above these students function level - they get more use and respond better to the lower fidelity manikins and to the standardized patient simulations.  |

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

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| Since the CNA students focus is on geriatric care rather than emergent situational care. We are now considering changing from the use of sim man to the use of skill trainers and standardized patients exclusively to allow other groups more time for use of SimMan in all his capacities. We are trialing the exclusion of SimMan with our Summer cohort. |

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.)**

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

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

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| Based on our findings in the previous year we continued our review of the Massage therapy program. After the changes instituted during the last year we found that 100% of our students felt they were adequately prepared for the State Licensing exam. All our students agreed that the changes increased the rigor of the program. 6 of our students had recommendations that more focus be added to the Swedish massage sections and we have had 3 students who have returned to provide feedback after the Licensing exam and have expressed that we should spend more time on some of the nomenclature and vocabulary for the business course as well as more time on Swedish massage which would significantly improve their comfort level with the licensing exam. |

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

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| Based on this information we are creating vocabulary quizzes and activities for the business and ethics course and will be shortening the specialty areas in fundamentals two so that we can add time to the in-depth coverage of Swedish massage in the second semester. |

PART B:

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

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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.**

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| The CCHcE Department focuses intently on the no excuses goals and initiatives in almost every aspect of our programs. We have focused on customer service over the past year and are working to institute early warnings to our CNA students who are struggling. With the instructors help and the creation of the Patient Care Programs Coordinator we are better able to follow students closely and support them to stay on track with the programs and courses so that they can be successful. The implementation of additional hours for Access lab practice and tutorial support has been well received and improved student success in the CNA program.  |

1. **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.**

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| The most significant change that we have made that this year is to institute departmental change that will allow us to hire a departmental advisor on a full time basis to assist our students through the processes of entering our programs and of transitioning into other academic programs. In order to do this we had to delete another staff position and all staff had to take on additional clerical and support duties. The department believes however that this is the most significant assistance we can give to our students. This advisor will assist students with any and all barriers and road blocks they face and works closely with our CE faculty to keep students moving through the programs and improving their success from program entry through completion and latticing to academics if desired. |

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)?**

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| Customer service will be a priority for everyone rather than just the front desk person. |

1. **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.)

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| After implementing and conducting Instructor updates for AHA CPR instructors and redesigning the work flow for CPR instructors, 85% of rosters will have cards printed and issued to the instructors within the 20 day AHA regulated Time frame. |

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

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| The department created a spread sheet to track CPR instructor roster submissions and number of cards issued. As cards are issued to instructors they are added to the spreadsheet data so that we may track not only the cards but the instructors teaching records, types of courses taught and number of student contacts the Training Center sees. Our results showed we were able to achieve 82%.we discovered that we had to change and inforce policies regarding the roster submissions in a timely manner in order to achieve our goal – if the roster is not submitted by faculty with in the 20 day limit – it is impossible to issue cards in a timely manner. This is being addressed with faculty and we will continue to monitor and attempt to reach 90% during the next year.The transition into not having a frontline customer service staff assistant in our office was our biggest project this year and took a great deal of departmental redesign to accomplish. The department needed to remove the position in order to pave the way for a student advisor position and in order to do that frontline customer service and job duties had to change in order to ensure we remained attentive and customer focused.  |

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

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| We discovered that we have to change and inforce policies regarding the roster submissions in a timely manner in order to achieve our goal – if the roster is not submitted by faculty with in the 20 day limit – it is impossible to issue cards in a timely manner. This is being addressed with faculty and we will continue to monitor and attempt to reach 90% during the next year. |

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.**

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| From goal 2 number 2.1 expansion of services and offerings. We wrote a proposal that was accepted as a grant by the Texas Workforce commission to enable us to offer 18 certification review courses over this year and increase our work with Nursing CE to include over 200 licensed nurses attending courses this year. |

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

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| The Strategic plan needs to focus on breaking down walls and barriers internally – which can lead to breaking down more barriers for our students. If we can form inclusion groups and committees – that look at all areas – CE , academic, technical, community and all employee groups – Administrative, Faculty and Classified – we can unify the college and we will be able to move forward more quickly and advance the College to the overall goals that the President has set for us. We have to get everyone out of their silos and onto the playing field together. |

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?**

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| **Objective**  | **Yes(If Yes to Any Area, Respond and Proceed to Part D, Question #2)** | **No(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 |  |
| Note: May Insert other Objective/s |  |  |

1. **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](http://www.actx.edu/iea/filecabinet/425).

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| 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. Our Massage Therapy Program also includes these concepts and even includes a business and ethics course and the requirement to create a detailed business plan and resume. |

1. **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.**

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| **In Person** | **Web** | **Phone** | **E-mail** | **Live Chat** |
| **x** | **x** | **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?**

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| We have only just begun to include the web and email support to our students providing them with the promise of a web or email response within 24 hour. We are trialing – Text message support and our faculty are working with a cohort of students on this project currently since – texting seems to be our students – preferred method of communication. |

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)**

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| 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.  |

1. **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)?**

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| 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. We are making changes to this for Fall of 2015 with the official arrival of our full time advisor and will include our advisor in all student complaint processes. |

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

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| We are making changes to this for Fall of 2015 with the official arrival of our full time advisor and will include our advisor in all student complaint processes. This will allow for an impartial outside professional to assist with the resolution of all student problems and complaints. |

1. **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.**

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| We are currently making adjustments to the CNA program due to changes in how students register for the State exam this change goes into effect on July 20th of this year and will require significant changes in the testing application process. We have redesigning how this is incorporated from the application and registration process all the way through course completion and petition to test. The paper process ended on May 21 and we have been in a blackout period since then. When the new process begins this month they will be all electronic and students will be required to complete a multi-step online process which we must prepare them for. |

1. **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.**

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| 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.**

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| 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 understands 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.  |

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

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| 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.  |