Academic Program Review Recommendations:
2025-26 Annual Progress Report

The purpose of the Annual Progress Report is to facilitate the tracking of progress made on program recommendations/goals and to identify and explain the addition of any new program goals not listed in the most recent Review.

1. Name of Program: Medical Assisting

2021 Medical Assisting Program Review

2022-23 Medical Assisting Update

2023-24 Medical Assisting Update

2024-25 Medical Assisting Update

2. List goals from most recent Program Review and report on progress for each goal. For goals that have not yet been met, please describe your department's plans for moving those goals towards completion. (Label each goal as Completed, Ongoing, Canceled, or Postponed [include anticipated term/year for resuming activity]): 2021 goals:

1. For the 2021-2022 year we are increasing our enrollment cap to 24. Marketing strategies to be discussed with the marketing dept and Dean for recommendations and suggestions.

2022-23 Update – This is an ongoing effort. We have a new marketing person, new marketing material, and reduced prerequisites to encourage enrollment.

2023-24 Update - Ongoing: Efforts were made to simplify the admission process by reducing prerequisite requirements, removing program director interviews, and implementing open enrollment for all interested students. While enrollment has increased slightly, outreach efforts should extend beyond high schools to engage the broader community. Additionally, staff responsible for providing program information and developing outreach materials need a stronger understanding of the medical assistant's role in the workplace. Hosting an information session with the program director would help ensure they can accurately convey up-to-date details to prospective students and provide feedback on the effectiveness of general advertising efforts.

2024-25 Update -Ongoing: As of yet there has been no information session, but more communication with staff on a case-by-case basis has improved. The program director has been fielding more emails from interested students personally to clarify what students can expect from

the program and the medical assisting position in general. A review was done by the program director and the department director regarding the effects of a more lax admissions process. While it did increase enrollment, that benefit was quickly shadowed by a significantly reduced retention rate.

2025-26 Update - Ongoing: 2025-26 was the first year back at the program's original length. Of the 11 students who started in Fall 2025, 6 completed in June 2026 (55%), up slightly from 6 of 13 (46%) in 2024-25 under the condensed format. One student who had stopped out of the 2024-25 cohort re-entered in Winter 2026 and graduated with this cohort. Of the five 2025-26 drops, one was non-academic in the first week of Fall term and four were academic (two in MA 117 at the end of Fall term, two in MA 125 at the end of Winter term). Interest in the program remains strong: the 2026-27 cohort filled all 12 seats and has a waitlist. Cohorts are capped at 12 because of skills lab capacity and the instructor-to-student ratio needed for student success. Now that MP111 Medical Terminology is being reinstated as a prerequisite (see below), the program will watch whether retention improves while enrollment stays at capacity.

2. Determine what other College Now opportunities are available for student recruitment,

2022-23 Update – Completed - With the removal of the biology prerequisite there are significantly fewer barriers. At this time there are no classes that would be appropriate other than the, already offered, Medical terminology.

3. Discuss how to increase high school outreach. Considering annual "Medical Office Careers" presentations at local schools.

2022-23 Update – We continue to work with the Outreach Dept to find more opportunities.

2023-24 Update – Ongoing, need to update brochures and have an information session with those doing the outreach so they better understand the roles and responsibilities of an MA in the work environment and the rigor of the program when informing students about the program.

2024-25 Update - Ongoing: We continue to work with the Outreach Dept to find more opportunities. There have been few opportunities to pursue further due to instructor shortages and the program director taking on additional classes.

2025-26 Update - Ongoing: In early September 2026 the program director met with Jessica Griffin Conner and Lety Breckterfield to discuss tours of the MA lab for visiting students and a basic flyer or brochure explaining the differences between the healthcare career pathways. Over the summer, the program director and Jessica also came up with several hands-on activities for visiting students, such as glow-in-the-dark germ kits and comparing oxygen levels with and without exercise. Next steps are to develop the pathways flyer and schedule tours and activities.

4. The Program Coordinator should review the budget with the Dean to gain further understanding. Along those lines, would also suggest further education on grant information avenues.

2022-23 Update – No progress due to many faculty and program changes

2023-24 Update – Ongoing, need to schedule a meeting with the Dean of Nursing & Health Occupations to review needs and budget concerns before the 2025-2026 budget is approved. Need to discuss funding additional part time help in the lab with potential increased student enrollment.

2024-25 Update -- Ongoing: No progress due to ongoing program changes & the program director taking on an additional class.

2025-26 Update - Postponed: Due to the new Dean of Nursing & Health Occupations vacating their position just before the start of the Fall 2026 term. This goal will resume once a new Dean is fully established.

5. Revisit becoming an Approved AAMA chapter, to be able to offer CEUs, based on program growth and staffing.

2022-23 Update – Canceled - The amount of volunteer and time requirements are not realistic at this time.

6. All Intended Outcomes and Core Content will need to be updated to reflect the MAERB 2015 Objectives more clearly.

2022-23 Update – Completed 2023

7. MA180 should be assessed as to its necessity and consider whether it should continue to be offered or replaced with something more pertinent to the changing areas of focus in clinical and administrative settings.

2022-23 Update – Canceled: This classes has been removed from the program and objectives absorbed into other classes.

8. A tracking system should be put in place to track each student's objective in a way that encourages them to be accountable for tracking them. It preferably would also be electronic and include a method for documenting corresponding grades. Elsevier has some pdfs with fill-in portions that have potential.

2022-23 Update – With the program update of 2023 objectives have been better outlined. For electronic tracking to be efficient an entire walk-through, possibly at orientation, will be necessary. for the sake of speed in the skills lab, the publisher pdf checklists are not feasible at this time.

2023-24 Update – Ongoing -Changes in the curriculum to all online classes in the first term has improved tracking of grades and progress built into the course book resources and Moodle has improved grade tracking and grade availability to the students. Second term face to face skills performance is documented manually on skills sheets but when a skill is completed and the grade is shared with the student. All course final grades are recorded and sent to the office of admissions. Program is investigating how to track skills achievement in Moodle or through the book resources as publishers update their teacher assessment tools.

2024-25 Update -Ongoing: A recent partnership with the National Healthcareer Association has opened an opportunity to utilize their tracking system that would include opportunities for practice

testing a periodic review testing to allow students an idea of how they might do on the NHA exam specifically. The cost-benefit analysis is still in progress with hopes to have a decision by Summer 2026.

2025-26 Update - Completed: Student progress continues to be tracked through Moodle gradebooks, publisher resources, and skills check-off sheets, and this has worked well since the program aligned with the NHA in 2023. After reviewing the NHA tracking system, the program decided not to adopt it (see New Goal for 2025-2026 below).

9. Create a brief practicum training video for preceptors to review prior to externs to refresh them on expectations, the process, and the documentation requirements.

2022-23 Update – The paper training binder has been updated with newer and more applicable to Medical Assisting.

2023-24 Update – Canceled, no video is needed with the sharing of updated preceptor training binder. This is provided to all preceptors when students are assigned their approved preceptor.

10. Advisory Committee meeting attendance and tracking need to be addressed. Switching to Zoom for meetings should help with attendance. Consider delivering some kind of snack with a reminder the morning of the meeting. To meet MAERB standards without question their Meeting Agenda form should be utilized in the future.

2022-23 Update – This continues to be an area of concern with less and less people attending meetings. Prior to continuing this effort a the following representatives are needed:

- New Student
- Old student
- Provider
- Nonmedical personnel

2023-24 Update – Ongoing: With the evolving landscape of healthcare delivery since COVID, community partners face challenges in committing to advisory board meetings. However, they have actively responded to program requests and shared concerns individually rather than in a scheduled group setting. Additionally, MA students, with fewer on-campus requirements due to online learning and personal commitments, are less inclined to participate in advisory boards. To enhance engagement, alternative venues, times, and formats should be explored.

2024-25 Update - Ongoing: Even with the decision to move meetings to Zoom, there has been a steady decline in attendees. Breaking from the MAERB has removed the representative requirements but the goal is still to include as many diverse representatives as possible. A majority of our local partners continue to complete program surveys and happily give feedback and suggestions via email when asked specifically. Timely notice of meetings and follow-up reminders will be the next point of focus.

2025-26 Update - Ongoing: An Advisory Committee meeting was held in June 2026, with minimal attendance and minimal feedback. Annual surveys were sent to community partners,

and three were returned. Clinics continue to give useful feedback informally, however. This month, while setting up externship placements, the program director received feedback directly from sites. The program will keep supplementing formal meetings with one-on-one conversations with clinic partners.

11. Any assignment that specifically addresses a MAERB objective should be flagged and clearly marked as such.

    2022-23 Update – Since the Program Update of 2023 the program has been moved online with most assignments that had been flagged and market have been revised so this will need to be address again from the top.

    2023-24 Update – Ongoing: The program withdrew from the accreditation with the American Association of Medical Assistants (AAMA) and is now affiliated with the National Healthcareer Association (NAH) which has a few different curriculum requirements and practice hours so the curriculum was revised significantly to meet those recommendations as well as the community partners recommendations. The program objectives have not changed but tracking of the assignments and expected performance outcomes and student success will need to be tracked and changes evaluated as the program progresses.

    2024-25 Update – Ongoing: A recent partnership with the National Healthcareer Association has opened an opportunity to utilize their tracking system that would include opportunities for practice testing a periodic review testing to allow students an idea of how they might do on the NHA exam specifically. The cost-benefit analysis is still in progress with hopes to have a decision by Summer 2026. Possible alternatives: Binder system managed by the student, Online tracking document accessible to the instructor(s), student, and possibly their externship site.

    2025-26 Update - Canceled: Flagging assignments by MAERB objective no longer applies, since the program withdrew from AAMA/MAERB and is now aligned with the NHA. Assignments are being mapped to updated course outcomes as part of the current program restructure (see goals 13 and 14 in Section 3).

12. There continues to be difficulty following up with students after they graduate to complete their survey which determines which employers are then sent surveys. Consider more aggressive ways of tracking students as well as a set timetable for send out and follow updates

    2022-23 Update – Completed -Sending survey's out mid summer with more frequent reminders have improved as well as telephone calls to students as reminders.

Additional goals added from previous Program Review Updates:
2022-23 Update:

1. Successful integration of class lectures, homework, and tests with Moodle.

   Rationale: this is at the demand of the bulk of local area clinics in an effort to get more MA's in the field as quickly as possible by removing face-to-face burden on student's time and ability to work.

   2023-24 Update – Ongoing: In response to community recommendations, the program revised its curriculum and prerequisite requirements to facilitate easier enrollment and allow for more self-directed learning. The consolidation of courses reduced the time required for completion, enabling quicker entry into the workforce. All didactic courses were offered online, with face-to-face skills labs held on campus only in the second term.

   Students who began the program in Fall 2023 were introduced to these changes. Course materials and virtual sessions were accessed through Moodle and publisher tools. Of the eight students enrolled, six successfully completed the program. Moving forward, the online format and course load will be evaluated throughout the second cohort of students enrolling in 2024–2025 to determine if further adjustments are needed.

   2024-25 Update – Ongoing: 2024-25 cohort did not respond half as well to the online format. Complications included limited computer skills, Moodle confusion, and students having difficulty getting their textbooks in their desired format in a timely manner. Students expressed feeling overwhelmed trying to adjust to online learning with such a heavy course load. For the 2025-26 year, the program has returned to its original length to allow for a more reasonable course load for the average student. As well as changing the core class for the Spring term to a hybrid class with a face-to-face component to encourage students to come to campus where they can build a rapport with instructors and increase their likelihood to ask questions. Will continue to monitor the need for face-to-face instruction over online learning.

   2025-26 Update - Ongoing: 2025-26 was the first year back at the original program length, with the Spring core class run as a hybrid. Retention improved modestly (see Goal 1). Going forward, the clinical courses will be hybrid, with lecture online and lab face-to-face. MP111 is being reinstated as a prerequisite so students arrive already familiar with Moodle and online learning. The program has also added AI-assisted role-play activities to online coursework so students get realistic, interactive practice outside the classroom.

2. Address the merits of continuing AAMA credentialing vs going with a cheaper-at-the-time accreditor and how this will affect students

   Rationale: When the new curriculum was created it was done in such a way that students are eligible to take the "Medical Administrative Assistant" certification exam through the National Healthcareer Association (NHA) after the first term. The NHA also offers a full Medical Assistant Certification that students have utilized in the past as an alternative to the American Association of Medical Assistants (AAMA).

   2023-24 Update - Completed: The program withdrew from the affiliation with AAMA and now is aligned with the requirements from the National Healthcareer Association. Upon completion of the program students are eligible to the NHA certification exam for Medical Assistants.

Additional goals added from previous Program Review Updates:
2023-24 Update:

1) **Goal**: **To create an application process for the program that will encourage the student to consider closely the roles and responsibilities of an Medical Assistant, and course requirements to complete the program.**

   Rationale:: Students enrolling in the program often lacked a clear understanding of the roles and responsibilities of a medical assistant, as well as the coursework required for success and passing a national certification exam. Implementing an application process that includes an interview with the program director would give students a better opportunity to discuss the program's demands and determine if a career as a medical assistant aligns with their goals.

   2024-25 Update - Ongoing: No progress due to ongoing program changes & the program director taking on an additional class.

   2025-26 Update - Postponed: The program director has researched past CGCC MA applications and applications used by other schools. Because MP111 is being reinstated as a prerequisite, a formal application may not be needed. This will be decided once the program sees how the prerequisite affects enrollment and retention for the first cohort admitted under it.

2) **Goal: To reduce the first-term credit load and improve student readiness for online coursework in Moodle, Medical Terminology (MP111) will be required as a prerequisite for the program.**

   Rationale: With the first term being fully online, many students may be unfamiliar with the Moodle platform. Completing Medical Terminology as a prerequisite will enhance their understanding of medical terms while also building proficiency in using Moodle for online learning. This will ensure a smoother transition into the program and set students up for success.

   2024-25 Update – Ongoing: Progress made in returning Medical Terminolgy back to a prereq has been placed in holding until an assessment of the effectiveness of the reduced course load can be made pending the 2025-26 cohorts retention rates.

   2025-26 Update - Ongoing: The program reviewed the 2025-26 retention data (see Goal 1) and decided to reinstate MP111 Medical Terminology as a true prerequisite, as part of a larger program restructure. Besides reducing the first-term credit load, MP111 introduces students to college coursework, online learning, and Moodle before they start the program, and it is expected to reduce Fall-term attrition. MP111 is offered every term, so students have several chances to complete it in advance. The curriculum change is in progress.

3) **Goal: Enhance student learning for the Medical Assistant lab, (MA).**

Rationale: To enhance the learning environment for the skills lab, old chemistry lab tables and hood vent and excess cabinets need to removed creating more working space and increased wall space to allow for additional exam tables.

2024-25 Update - Ongoing: Despite the program director having met with multiple parties to discuss the necessary changes, there has been no progress by official staff. The program director did come in and moved what shelving units they could in an effort to create more usable space. The effect was minimal.

2025-26 Update - Ongoing: No changes have been made to the MA lab. The MA lab changes included in the college's EDA grant proposal (a $1.2 million CARES Act Recovery Assistance grant awarded in April 2022, matched with $300,000 in local investment, to renovate facilities for healthcare training) have not been made. Because of high enrollment and lack of space, the program will use the classroom across the hall in addition to the lab. The program has also been offered exam tables from a closing medical practice, but space is still the limiting factor.

New Goals for 2025-2026

1. Complete a cost-benefit analysis regarding utilizing the NHA's tracking system over a low-tech, free- cheaper alternative.

   2025-26 Update - Completed: The program has determined that the NHA tracking system is not necessary or cost-effective at this time. The program has done well without it since aligning with the NHA in 2023. For example, all five 2025 graduates who sat for the CCMA exam passed. Rather than adding a cost to students for tracking, the program would prefer that any additional student costs go toward more hands-on learning.

3. List any additional goals added since the most recent Program Review, include the rationale for each new goal, and describe any actions taken or planned to be taken in the pursuit of each new goal. (Label each goal as Completed, Ongoing, Canceled, or Postponed [include anticipated term/year for resuming activity]):

2021 Program Review recommendations #13–15 (listed in Section Four of the 2021 review but not carried into this update template):

13. MA136 Medications needs lab hours added so the medication administration section from MA124 can be moved over, allowing more time to focus on office procedures as requested by Advisory Committee members.

Rationale: Carried forward from the 2021 Program Review. Local clinics have consistently asked for stronger medication knowledge and medication name pronunciation.

2025-26 Update - Ongoing: MA136 no longer exists; its content was condensed into MA 130 Body Systems, Diseases, and Drug Treatments in 2023. MA 130 now covers anatomy and physiology, pathophysiology, and medications in a single 4-credit course. The program is proposing to split MA 130 into MA 120 (Body Structure and Function) and MA 121 (Pathophysiology and Drug Treatments), with stronger medication content, including medication name pronunciation. Clinical procedures will also be split into three labs (General Clinic, Specialty, and Diagnostics), and medication administration and dosage would move into the General Clinic lab. The science department will be consulted as part of evaluating the proposal.

14. Telephone confidence continues to be an area of concern based on extern site surveys. Consider semi-scripted practice conversations and how best to get a realistic simulation.

Rationale: Carried forward from the 2021 Program Review. Phone skills remain one of the most consistent pieces of feedback from local clinics.

2025-26 Update - Ongoing: The program has built AI-assisted role-play activities that provide realistic, semi-scripted practice conversations, which is the approach recommended in 2021. In MA 117, these include telephone procedures, patient interviews (history of present illness), requesting payment on an outstanding balance, tactful communication with providers about coding and insurance denials, insurance preauthorization, and job interview practice. Role plays focused on phone skills and medication pronunciation are planned for MA 110 and MA 130. In addition, MA 110 and MA 115 will be replaced by a new course, MA 112 Communications and Digital Health.

15. Consideration should be given to Related Instruction outcomes, communication, and computation, to determine if it's feasible to change to stand-alone courses considering the high workload already given to students.

Rationale: Carried forward from the 2021 Program Review.

2025-26 Update - Postponed: Related Instruction will be reviewed as part of the program restructure. A need in computation has been identified: incoming students struggle with unit conversions, Roman numerals, and basic dosage math. The program is considering a small math course, weighed against concerns about student credit load.