

Medical Assisting Advisory Board Meeting

Thursday, June 6, 2019

Meeting Minutes

6:00 – 7:30 p.m.

Cañada College

Building 13, Room 217

Present: Leonor Cabrera, Jonathan Wax, Bernadette Newland, Ritu Malhorta, Helene Jernik, Lori Uhlig, Sandra Frojelin, Sella Rios, Robert Mabe

1. Introductions – Ritu Malhotra

2. Simulation's Lab Update

- a. We have ordered all of the equipment and are gearing up for Fall 2019 launch
- b. Helene (Stanford) following up on the suggestion from last time:
 - i. Venipuncture Workshops at Stanford, but they need to get their 10 hours, a space to do that is needed.
 - ii. Setting up education systems in their clinics, following the MA Scope (AVHIS vs. AKEB), and need for documentation that this requirement is being met.
 - iii. Having an additional resource for this training would be very beneficial to our community partners.
 1. People cannot find documentation from closed institutions often, there is a need for a local lab for people to use to get their hours and provide documentation
 - iv. Practice for individuals wanting to get back into clinical practice
 - v. *The board unanimously supports the creation of a class/curriculum based around using the simulations lab.*
 - vi. There is a need for injection practice in the simulations lab, this would be beneficial for the community.
 - vii. There is an entrance exam for people working at their clinics; critical thinking questions, situational questions, but there is a need for hands-on practice, this would also be beneficial for industry partners.

1. Hard to learn in the clinician setting, but in a simulation's lab there would be more room for practice.
- viii. Re: a simulations lab would help with the onboarding at Stanford
- c. Rob (Samaritan House)
 - i. There is a need for more practice.
 - ii. Notice there is a requirement at other places for Phlebotomy Experience for Medical Assistants.
- d. Injections, Venipuncture, Baby Vitals (pediatric needs), scribing, all would be useful for the simulation's lab to offer.
- e. Simulations Lab will also include billing and coding components, and using COWS/WOWS
- f. EPIC is the go-to scribing system
 - i. *The board unanimously notes the importance scribing and familiarity with notes and the systems used, supports the creation of classes/curriculum based around developing these skills further.*
 - g. *The board unanimously supports the creation of a course that would focus on English skills and soft-skills development, or hosting workshops for the community on soft skills necessary for Medical Assistants.*
- h. The hospitals use a behavioral guide for hiring, more important than technical skills, and also a sense of urgency is imperative for success in the job.
- i. Inter-Professional-Collaboration is used at Stanford for professional development: Communication, Teams/Team Work, Roles and Responsibilities, and Ethics.

3. Suggestions on piloting launch and operation of the sim's lab

- a. There isn't a need to vet users with previous school grades.
- b. Question: Suggested guidelines and collaborations for upcoming simulations lab?
 - i. Re: insurance, clinics are covered, and the school would have to cover this their own way.
 - ii. Possibly participants would sign an agreement, a separate liability process.
 - iii. The verbiage must be very specific on this issue.
 - iv. There should be CCUs, this would be great selling point for the program.
 - v. Some institutions have professional development funds, and those potentially could cover the cost of students attending the simulations lab.

4. Current Certificate/Degree Evaluation - approval for merging two courses MEDA 140 and MEDA 115

- a. The board reviewed the curriculum of these two courses.
- b. *The board unanimously supports the merge of these two courses by running these courses sequentially MEDA 140 and MEDA 115 by breaking them down into two (8) week sessions.*

5. Problems Facing the Medical Community – Suggestions on volunteering.

- a. Questions: How does the board feel about volunteering?
 - i. Could be a great situation, and a great way for students to network.
 - ii. Vetting would be important for locations we place students.
 - iii. Always ask what they want out of the experience, vital question.
 - iv. Volunteering with community centers would be a great opportunity, would also help establish a stronger presence in the community.

6. Discussion on Fast-Track Certificate/Degree - Suggestions on any additional stackable certifications

- a. *There is a need for Health Coaching in the industry. The advisory board unanimously supports the exploration of Health Coaching as future possible curriculum for students in our program.*
- b. *There is a need for exploring EKG Technician certification, and the advisory board unanimously supports the exploration of EKG Technician as future possible curriculum for students in our program.*
- c. *There is a need for exploring pediatric/lactation certification/curriculum, and the advisory board unanimously supports the exploration of this future possible curriculum for students in our program.*

7. Externships

- a. Alumni shared her externship experience:
 - i. Wanted a well-rounded experience with lots of exposure to different parts of the field
 - ii. The sites are small practices usually, was difficult to find the hours because it was hard to balance with a work schedule
 - iii. A variety of sites are needed
- b. The board supports helping network; both Rob and Helene offer helping find better externship sites.

- c. The board suggests having the students be more proactive about what students want out of their experience.
- d. The board advises using larger and public clinics rather than private practices
- e. San Mateo Medical Center was used in the past for medical billing/coding. 24 hour clinics and urgent care would be worth checking out. Federal contract would be possible with Vetern clinics.

8. Program Marketing/Outreach Opportunities

- a. Question: How can we promote our program?
 - i. Helene is offering to help build the pipeline.
- b. The board came across the information that we are number 2 in the Bay Area, number 6 in California according to US News: World Report
- c. More outreach events

9. Open Discussion

- a. The board came across the information that we are number 2 in the Bay Area, number 6 in California
- b. Question: Are there any other software re: best electronic record keeping platforms that are not cost-prohibitive?
 - i. EPIC is great, but it is expensive, but hospitals do offering training on it.
 - ii. The idea of how to use an electronic health record is more important than the specific type of platform you are using.
 - iii. Every institution uses different platforms, it is just more important to know the background information.
- c. The medical transcribing equipment may not be necessary anymore.