

Success Through Remediation:

A Guide to Helping Medical Assisting Students
From **ADMISSION TO GRADUATION**

Prepare your students for licensing and certification exam success with a solid remediation strategy.



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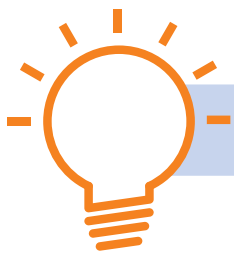
Conclusion and Defining Success

Introduction

Remediation is key to student success.

The complexity of the roles in today's healthcare environment, as well as the varied educational preparation of students, requires educators to develop a strategic remediation plan that addresses multiple facets of their students' experiences.

While every program has different remediation needs, this guide serves as an overview of the multiple processes that may influence student success rates.



For a program to succeed, a strategic remediation plan that addresses multiple facets of the students' experience must be developed.

Part One: The Strategic Process

There are a number of academic processes that support medical assisting student success throughout their course of study.

These include:

- Establishing an admission criteria
- Medical assisting program orientation
- Curriculum based on successful completion of all competencies
- Testing policies
- Academic honesty policy
- Active learning strategies

01: Establishing an Admission Criteria

Admission Criteria

Each student who is admitted to a medical assisting program requires a large amount of human and financial support. In order to choose candidates that will make the best use of available resources, your admission criteria must be as focused as possible.

The goal is, of course, to pick those students who will be successful. However, **determining who the successful students will be is often problematic, because there isn't one single admission criteria that will consistently predict which students will become the best medical assistants.**

Standardized Admission Tests

Results of standardized admission tests, such as the **HESI Admission Assessment Exam**, are reliable for assessing prospective student competence in math, reading comprehension, and other basic academic skills. Students who fall below the minimum criteria established for success ("at-risk" students) can be given additional support despite their scores.

For example, a group of students may be admitted despite having poor math scores because they have excellent skills in other areas. Giving them the support necessary to pass allows students to overcome hurdles before they fail, so they can progress through the program in a timely manner.

Going Beyond Standards

Rather than relying on one single assessment test, an array of admission criteria can provide a framework to identify those students who are most likely to do well and ultimately, achieve success in the medical assisting program.

Student Assessment Variables

Each program must determine the admission criteria that best reflects its own mission and vision. Components that are often included are:

- High school GPA
- GPA in selected courses taken in college
- Reference letters
- Interviews
- Standardized entrance examinations that include:
 - Math competency
 - Vocabulary
 - Reading competency
 - Science
 - Critical thinking assessment

Developing a Database

One of the most effective ways to predict student success is to develop and maintain a database of students admitted to the program. As data is collected, it will be possible to correlate specific admission variables with the possibility of successful graduation and passage of a certification exam.

Over time, this analysis will point to the admission criteria most indicative of the students that typically apply to the program. As students' progress through the program, the database can be expanded to include grades in courses, which can then be analyzed to show how those courses correlated with graduation and success on a certification exam.

Provide Students with a Clear Understanding

This preemptive approach to remediation must be handled carefully in order to avoid appearing to “single out” students for failure. **Students must clearly understand why they're labeled “at risk” and the validity and reliability of the tests used to make these judgments.** Students should also be given the freedom to decline the remediation activities offered if they choose.

02: Medical Assisting Program Orientation

Preparation for the Start of an Educational Journey

Regardless of their level of preparation, new students typically react to their admission into a health professions program with a mixture of excitement and fear. After all, they're about to embark on an educational adventure unlike any they have experienced before.

To prepare all students for the rigor of these programs, faculty should conduct a program orientation activity that focuses on development of:

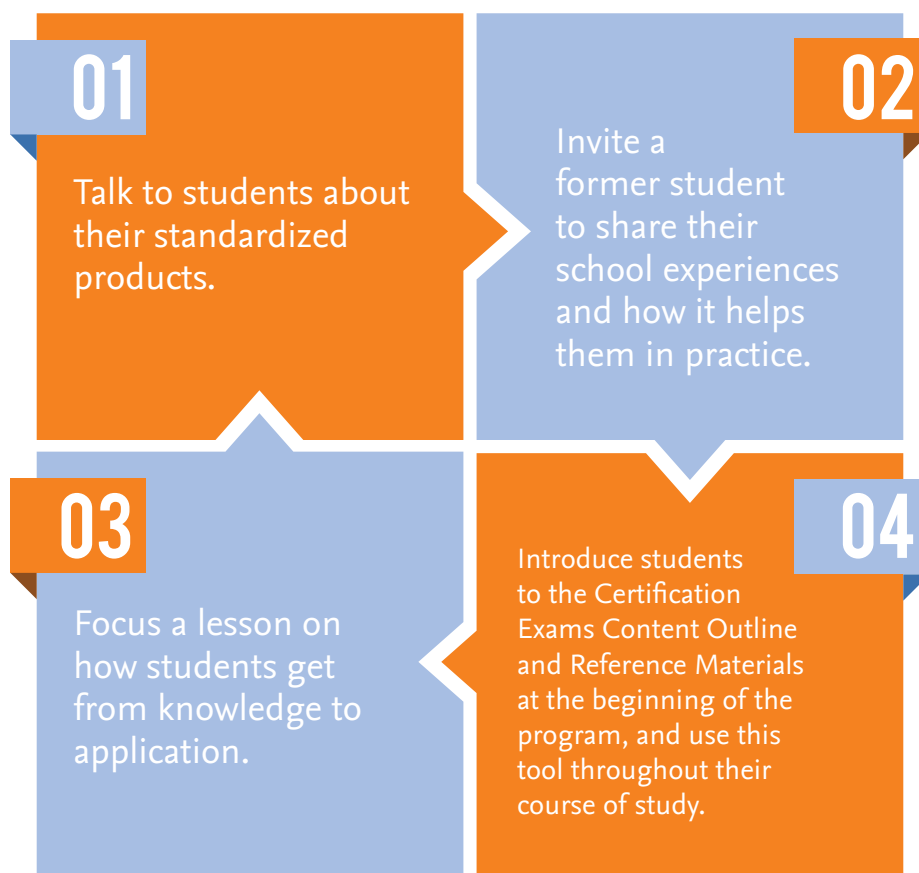
- Critical-thinking skills
- Study skills (emphasizing the application of knowledge to clinical scenarios)
- Managing test anxiety
- Test-taking skills (demonstrating the application and analysis of knowledge)
- Discussion of expectations of participation
- Navigation of the learning management system
- Externship site-specific policies and procedures

After the first exam, medical assistant students become aware that they must spend an appropriate amount of time preparing for their formative assessments.

Introduce students to the notion that in medical assisting they must be able to transfer the knowledge and skills they learn in class into actual practice in a short amount of time. It helps to present this reality to students during orientation, and continue to reinforce it over the course of the program.

Remediation Strategies

There are a number of ways you can help students learn with remediation including:



03: Curriculum Based on Standardized Certification Exams

Curriculum Based on Standardized Certification Exams

Does the way in which the curriculum is developed and implemented affect student success? You bet it does.

The certification exams for the Certified Medical Assistant (CMA[®]) offered by the American Association of Medical Assistants (AAMA); the Registered Medical Assistant (RMA[®]) offered by the American Medical Technologists (AMT); the National Certified Medical Assistant (NCMA[®]) offered by the National Center for Competency Testing (NCCT); and the Certified Clinical Medical Assistant (CCMA[®]) offered by the National Healthcareer Association (NHA) provide detailed content outlines that identify the entry-level medical assistant's competencies. These content outlines show the percentage of areas that are tested to identify the skills and competencies required for safe and successful performance as a healthcare worker based on a job analysis study in the medical assistant arena.

All of the certification exams identify the required competencies for an entry-level medical assistant. For example, the CMA exam offered by the AAMA is changed approximately every five years and is based on findings from an occupational analysis. This exam measures students' knowledge and skills by confirming that they meet professional standards. The content outline for the CMA exam provides the program with clear direction as to the areas of the curriculum that should be emphasized. Each certification exam will provide detailed content outlines that can be used to guide the curriculum.

Using the Content Outlines

Practically speaking, the content outlines can be used to evaluate the extent to which content, skills, and competencies representing the identified categories are included in the curriculum. It's wise to write up a test plan that incorporates the certification exam categories when developing questions. Determining the certification exam that you will recommend to your students will allow you to determine the curriculum that will best prepare them for success.

04: Consider Creating Testing Policies

Proper assessment is required to ensure that students receive the best possible education in their health care profession, become excellent practitioners, and ultimately provide a worthwhile service to the community. A testing policy promotes consistency in student and curriculum evaluation.

A testing policy enables faculty to provide a systematic method of deriving curricular data which, in turn, drives the curriculum and promotes curricular excellence. The testing policy should address both internal and external curriculum evaluation. Internal curriculum evaluation will cover how test questions are written and how the teacher-made tests compare to certification exam content outlines. External curriculum evaluation will compare their students with like populations on standardized exam test data (Ambrose, Mee, 2014).

Expert Advice

A testing policy that clearly defines student roles and responsibility in the testing process, criteria for effective faculty made tests, standards for student behavior for test review, and processes for using standardized tests are critical to providing consistency in the testing process (Mee, Schreiner, 2016).

If your program does not have a testing policy, it is strongly recommended that one be developed. On the next page, you'll find a list of items that should be used to develop such a policy.

Testing Policy Checklist

01

Develop a Testing Committee – The Testing Committee is made up of qualified faculty that oversee exam development.

Establish a protocol for examination development – This should include a list of questions the committee can use to develop and implement exams. (i.e., Will exams be administered using an exam administration software program? What formats will be used? What's the length of the exam? What criteria should be used to insure that test items require students to use critical thinking skills to correctly answer the questions?)

02

03

It's also best to establish guidelines for test items, including:

- Will present or past tense be used for test items?
- Will all options begin with a capital letter?
- When stressing a word in the stem, will it be highlighted, boldfaced, italicized or underlined?

Establish appropriate statistical targets for the test items – This ensures the test is valid and internally consistent. (i.e., What is the acceptable number of mastery items to include? What is the minimum acceptable difficulty level for a test item? What is an acceptable reliability coefficient for the exam?)

04

05

Test Review – Determine appropriate options for test review:

- Individual or small group review by faculty
- Review in class
- Collaborative testing

In addition, all students should be given the opportunity to review the test and have the opportunity to discuss incorrect responses.

A Personal Checklist

In addition to developing testing policies, there are a number of questions to ask yourself to ensure your teaching methods are successful and beneficial to your students:

- Are you writing the exam items correctly?
- Are you giving students a fair chance in order to progress and pass?
- Are you keeping up good communication between faculty and students? This involves plenty of preparation, and no surprises.
- Are you telling your students what you already know about test-taking?
- Are you helping students remediate in their weak areas?

Does the Core Curriculum Guide Your Program?

For example, graduates should be able to demonstrate mastery of the following elements in the following patient delivery settings:

- General
- Administrative
- Clinical
- Managerial

The graduate will show proficiency in the cognitive, psychomotor, and affective domains of all the patient care experiences.

You Should Encourage Your Students to Think About:

- What is the safest answer for the patient? (Practical, not theory.)
- What is the safest thing they can do?
- These safety terms right from the start.

Remember: It is vital that you let your students know what you know.

05: Academic Honesty Policy

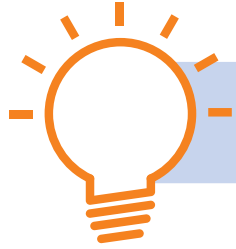
The Academic Honesty Policy

Given the impact of academic dishonesty upon the success of medical assisting students, this issue is important in planning remediation strategies to support success. Students who feel they do not have the competencies expected for success in any given task may be tempted to cheat in some way, particularly given the high-stakes nature of health professions. While academic dishonesty has always been a concern, ensuring ethical behaviors for medical assisting students is especially important as they prepare to enter the field and their integrity will be vital to their success (*Keener, et al., 2019*).

Stoneypher and Willson (2014) reviewed the literature to determine the types of academic dishonesty prevalent in health professions programs. They then explored strategies to reduce the likelihood of such behaviors.

The Authors Found that the Major Examples of Academic Dishonesty Included:

- Plagiarism and dual submission of work
- Acquisition of examination or test questions
- Misrepresentation
- Alterations in documents
- Forgery



To address the problem of academic dishonesty, faculty should develop a culture which focuses on competency rather than grades and socialize students in the role of self-enforcement of honor codes.

Strategies You Can Use to Address Cheating

(*Stonecypther and Wilson, 2014*):

- **Development and use of an honor code.** Students must be actively involved in the development and ongoing support of the code.
- **Policies to support the use of the code,** including frequent discussion by student and faculty.
- **Development and enforcement of well-defined consequences for cheating,** including processes to support student rights.
- Development of **easy-to-use procedures** for reporting misconduct.
- Publishing **clear expectations regarding academic honesty** in student/faculty handbook.

Stopping Academic Dishonesty Before Graduation

Although there is ample evidence that there is a great deal of cheating in nursing and health professions education (*Keener, et al., 2019; Stonecypther & Wilson, 2014*), there is also proof that both students and faculty feel academic dishonesty can have very severe consequences in health professions (*Keener, et al., 2019*).

Research suggest individuals who engage in academic dishonesty may continue to exhibit unethical behaviors in professional practice. In addition, even if those who cheat while in school adamantly say they will practice in an ethical manner following graduation. Academic dishonesty is not a strategy that ensures honesty in the workforce.

06: Active-Learning Strategies Based on Content

Integrated Active Learning

A lot has been written about the ineffectiveness of the lecture format for classes. One of the limitations of lecturing is that it makes it nearly impossible to “tell” students everything that they need to know to safely practice at the time of graduation and throughout their career. Instead, students should be given the opportunity to apply important concepts consistently in class, in the laboratory/simulation experiences, and in the clinical externship setting.

In addition, Benner, et al. (2009) emphasizes the need to bring the clinical experience into the classroom. Both of these ideas are central to effective teaching that may reduce the need for specialized remediation for specific students and reinforce the idea that application of content in a variety of clinical contexts is the most important teaching-learning strategies for clinical disciplines.

Elsevier Adaptive Quizzing (EAQ) can also provide an opportunity for students to engage in active learning. Insightful data and analytics help guide student learning through the utilization of custom adaptive quizzes based on their areas of weakness. By creating custom adaptive quizzing with EAQ and incorporating it into a student's remediation strategy, students will be able to focus their remediation efforts and close knowledge gaps.

How to Bring Active and Collaborative Learning Strategies to Your Class

Here are some ideas to encourage engagement and help prepare your students to become safe, effective healthcare professionals:



Think-pair-share: Give students a few minutes to think and write several points about a particular topic, then turn to a partner and discuss. Share points from the discussion with the class.



Minute papers: At the end of class, ask students to anonymously answer the following questions: “What was the most important thing you learned today?” and “What questions remain unanswered?” Answer the most frequently asked question(s) during the next class.



Games: For example, bandage wrapping relays, or games of bingo developed to cover a variety of concepts.



Challenging questions: Ask a particularly challenging question in class (or prior to the class if online) and give students an opportunity to debate.



In-class partnerships: During class, ask students to turn to a partner to complete a mini assignment together or compare notes to be sure both have all the content.



Subject summaries: Ask students to summarize similarities and differences between methodologies, theories, opinions, or other issues.



Technology: Use web activities and “clickers” for answering questions, simulations, EHRs/EMRs designed for students, and other technology to give students an opportunity to “act like a healthcare professional.”



At the end of the class, ask “**What are your questions?**” rather than “Does anyone have questions?” to indicate that you expect some.

07: Maximize Remediation Impact

As educators, we often look for ways to help students focus on their own personal gaps and grow from them. Remediation gives you incredible insight into the knowledge retention and the knowledge gaps of your students.

Below are some ways to use remediation to help students improve their skills and bolster their testing results.

Make Remediation Part of Your Testing Policy

Faculty can establish remediation expectations based on teacher-made and HESI Exam scores and should consider including this in a testing policy and syllabus. The policy should be specific and consistently enforced. Share this policy with students as they enter the program.

Have Students Take Ownership of Their Remediation

Consider having students develop and take ownership of a personal remediation plan. Some faculty put this in the form of a “student contract” for remediation.

Emphasize the Benefits of Remediation

Teach students the value of remediation early so they understand the benefits. Be sure they are aware that **HESI Exams** provide online remediation that is tailored to their unique weaknesses after a proctored exam.

Coach At-Risk Students

Identify “at-risk” students and assign them faculty mentors to encourage, monitor, and coach their remediation efforts and educational growth.

Conduct a Live Remediation Class

Develop a live remediation review class after an exam based on the group’s weaknesses. This two- to three-hour session can be a supplement to individualized student remediation to reinforce key concepts that the group might have missed.

Award Bonus Points for Remediation

Assign points or a grade percentage to remediation (such as Pass/Fail or bonus points) and specify how completion of the remediation will be evaluated.

Build a Study Packet

Encourage students to use the study packet area of their online remediation to compile content and information they need to review a second or third time. This study packet will help students better manage their remediation content.

- Tim Bristol, PhD, RN, CNE, ANEF (from "Top Ten Tips for Effective HESI Remediation")

Part Two:

Using Data-Driven Remediation to Optimize Your Program

01: Remediation for Individual Students

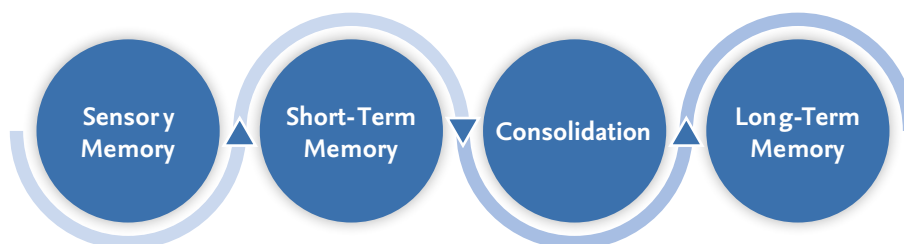
As students move through the medical assisting program, their strengths and weaknesses become clear. At this point, meeting their individual needs becomes a priority, requiring a personalized approach to critical remediation.

Evidence suggests that there is no one remediation approach that is most effective. Instead, using a variety of approaches has proven to be more successful. However, **the primary underlying factor for effective remediation is to implement a structured process.**

Additional Components of Successful Remediation Include:

- **Ensuring students understand the remediation rationale.** Does the student fully grasp the remediation plan and its impact on their success in coursework, licensing/certification examinations, and ultimately in practice? Explaining the physiology of learning, as outlined in the figure below, can help students learn to prioritize remediation activities over other school, work, or family obligations.
- **Pinpointing individual weaknesses.** Remediation works best when activities are focused on the specific areas of weakness for each student. These weaknesses can be identified by analyzing the results of standardized tests, adaptive learning approaches, or faculty-generated tests.

Figure 1



- **Faculty accountability.** Individual faculty or staff members should be held accountable for supporting each student during the remediation process. This may be the student's academic success coach, counselor, or someone who has the responsibility for the remediation of a cohort of students. Regardless of the approach, there needs to be a specific, solid relationship between the student and their supporter.

02: Data-Driven Curriculum Revision

When one student does not understand an important concept presented in the curriculum, there may be intellectual and psychosocial factors that influence their lack of success. However, when a group of students can not apply the concept, the major factors may be related to the curriculum or teaching and learning processes.

Results from standardized tests can provide information that is helpful for faculty to determine areas where a significant number of students did not demonstrate competence. For example, overall class results from a **HESI Exit Exam** is an excellent way to collect data to help evaluate the curriculum.

The reports for the HESI Exit Exams provide scores on items that reflect the certification content outline categories. Once the areas of limitations are identified, the faculty should consider the following:

- Does this score represent a trend over several cohorts or is this a new situation?
- Can the faculty explain the reason for the dip in score? (i.e., Changes in curriculum? Changes in faculty? Unexpected event(s)?)
- Were there teaching-learning strategies that may have impacted the content under consideration?

Answers to these questions can direct the approaches to revise the curriculum, the teaching-learning processes used, or both.

Part Three:

Conclusion and Defining Success

How Do You Measure Success?

Student success in medical assisting programs is measured by success on the certification exam and in job placement. Without adequate support through their medical assisting program, many students won't get the chance to reach this endpoint.

Student progression should be guided in the development of test-taking and study skills – much in the same way they are guided by their progression into more difficult courses in the curriculum. Social support of medical assisting students is necessary to ensure student success. Guiding students in remediation of content is a form of social support that helps students be successful.

What Interventions Offer the Best Opportunity for Success?

The path to success for students makes it unlikely that one intervention will be effective in addressing the multiple barriers to program completion, certification, and job placement. Recognizing that sticking to a process from admission to graduation is important in supporting the remediation of students who may struggle with a fast-paced medical assistant program.

It's up to administrators and faculty to pay attention to each of the processes outlined, implementing best practice approaches in each area, and holding administrators, faculty and students all accountable for their role in the remediation process.

Useful Links

- The Certified Medical Assistant — <https://www.aama-ntl.org/cma-aama-exam/about>
- The Registered Medical Assistant American Medical Technologists — <http://www.americanmedtech.org/Portals/0/PDF/Get%20Cert/Prepare%20for%20Exam/RMA-Content.pdf>
- The National Center for Competency Testing (NCCT) — <https://www.ncctinc.com/Documents/MA%20Detailed%20Test%20Plan.pdf>
- The National Healthcareer Association — <https://www.nhanow.com/certifications/clinical-medical-assistant>
- American Society Podiatric Medical Assistants — <https://aspma.org/>
- Joint Commission on Allied Health Personnel in Ophthalmology Certified Ophthalmic Assistant (COA) — <https://www.jcahpo.org/certification-recertification/>

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