

**PHLEBOTOMY ADVISORY COMMITTEE MEETING MINUTES**

**Wednesday, April 24, 2019**

**5:30-7:30pm \* Clark College at WSUV, Room 105**

**Members Present:** Lisa Parkman (Committee Chair), The Vancouver Clinic; Michael Pitts, OHSU; Svetlana Senchuk, Providence Medical Center Milwaukee;

**Members Absent:** Robin Conomos, (Vice Chair) PeaceHealth SW Medical Center; Theetea Fell, OHSU; Hollie Foltz, Legacy Salmon Creek; Heather Harris, Legacy Salmon Creek;

**Guests:** Roberta Hankins, Torissa Weaver, Tina Duc, Ulyana Karaseva – Students in the program

**Clark College:** Dr. Amy Castellano, Lead Phlebotomy Instructor; Carmen Roman, Educational Planner – HEOC; Cathy Sherick, Associate Director of Instructional Planning & Innovation; SueAnn McWatters, Program Specialist – Advisory Committees

Committee Chair Lisa Parkman called the meeting to order at 5:40pm and introductions were made.

**MINUTES OF PREVIOUS MEETING**

The minutes of October 10th, 2018 were presented: as quorum was not present, the minutes were sent out via electronic approval. *As of June 11, 2019 the minutes have been approved.*

**NEXT MEETING DATE**

The committee will next meet on **Wednesday, October 9th, 2019 at 5:30pm**

**OFFICE OF INSTRUCTION ANNOUNCEMENTS**

Cathy Sherick made the following announcements:

She gave a brief update about what is happening on campus with Pathways work and pending budget decisions.

Due to low enrollment the campus will see a significant budget reduction in 2019-20, with programs being eliminated. This will incur additional faculty and staff cuts. Cathy’s position is one that will be eliminated, ending June 30, 2019, so this will be her final advisory meeting.

Amy stated that the program is revamping the phlebotomy brochure. Hopefully it will be more simplistic and comprehensive.

Amy spoke on the financial aid pathway for phlebotomy that will be finalized by Fall 2020. Students will be able to receive financial aid for the standalone and also for the Associate in Applied Technology. Phlebotomy has been placed in the 5th or 6th quarter of the Medical Assisting pathway. There will also be a separate phlebotomy internship from the Medical Assisting internship, so students can apply for both licenses.

Amy was approved for tenure. Congratulations to Amy!

**ENROLLMENT UPDATE**

Carmen Roman spoke about current enrollments for fall 2019:

* 9 students are fully qualified
* 13 students are enrolled for spring quarter
* 20 students are enrolled to qualify for summer quarter
* There is currently a full cohort of 24 right now with a waitlist of about 6 students.

**ENGL CHANGES AND SKILLS VALUED**

BIO 164 and BIO 165 are no longer required for the Phlebotomy CA. Students will only need to take the HEOC 100 course. CMST&210 will replace CMST&230.

HEOC 100, HEOC 104, BMED 110, BMED 111 are a part of the healthcare core where the prefixes will change. HEOC will change to AH (Applied Health). HEOC 100 will become AH 100 and AH 101. Hopefully the medical terminology will align better.

Phlebotomy students will only take AH 100 to make sure they have all the necessary chapters required as well as the proper medical terminology. They will be cutting the pathway by 3 credits or 1 terminology course.

Students will have to take ENGL 098 and pass with an equivalent grade of C or better or by placement (by a writing placement test) into ENGL&101. If a student cannot place at ENGL 098 or ENGL&101, then they will need to take ENGL 097. However, ENGL 097 and 098 will be going away.

Carmen Roman spoke about a self-assessment. The respective departments own the prospective tests however they’ve evolved to be what they want. They can be subject to change every couple of years. Amy stated that the other programs aren’t requiring the ENGL portion and those students are getting hired. So we have to think about how this will apply for the students.

Michael Pitts posed the question that even with the rigorous coursework, Clark is not struggling with the enrollment. Amy explained the cohort is full right now for this year, however the program hasn’t been full since she started in 2014.

Lisa Parkman agreed that the MA students should take the ENGL course because employees have to do a lot of charting. If an incident occurs and the employee can’t follow the thought process to be able to write it down, that is a significant barrier. There needs to be a baseline of requirement. Michael explained that at OHSU, the workers have had to become savvier in their work to be able to do more across multiple departments.

BTEC 107 is a Business English course. It has a lower eligibility for ENGL 098 or passing ENGL 097. This would be the most ideal course for our program. Roberta Hankins explained that she would rather be able to test into the course and then have it transfer over as she would like to go further in her education. The suggestion is that students will have to take an ENGL class, however if they can test into it or are already eligible for ENGL&101, then they will not have to take any more ENGL classes. PTWR 135 is also an equivalent of ENGL&101.

Currently, if students are already ENGL&101 eligible, then they do not have to take any ENGL to get into the program. But as English changes their curriculum and with the program’s student level (not high), there does need to be some sort of ENGL coursework.

**Action Item:**

* Bring in the ENGL faculty for conversation
* Speak with the HEOC 104 Instructor and get input

The committee brought up a phlebotomist’s skill level using English and why it’s important.

* Document reports
  + What happened
  + Chronologically
  + How to prevent incidents in the future
* Thought processes
* Grammar
* Providing feedback to peers
* Using vocabulary appropriately to a given audience

Amy continued that they are leaning towards BTEC 107 or having them take ENGL&101 to move forward in the program.

**PHLEBOTOMY STUDENT CLINICAL EVALUATION FORM**

Amy developed a booklet (handed out to the committee)

* 1st page: letter for the preceptor
  + What we are requiring
  + Where we’re at in the program
  + Facility might not be up to date but be supportive
* 2nd page: clinical site verification
* 3rd page: timesheets
  + Have added supervisor initials on each day
* New form
  + Scaled changed
    - Needs improvement
    - Developed
    - Proficient
    - Not applicable
  + Split into 3 categories
  + Can collect the data and use it towards course outcomes
* Last page – student fills out evaluation of the site

Michael and Svetlana stated that the form and booklet is much improved.

**INDUSTRY UPDATES**

Torissa Weaver questioned if phlebotomists can get in trouble for not sending a professional email or coming to check with a supervisor. Michael stated that being a manager is also about employee development and advocating for the employee to find a pathway for success. It should never be punitive. Lisa explained that she still goes to her manager to make sure that there isn’t any emotion in her write ups.

Tina Duc asked how large teams are in their departments.

* Michael Pitts from OHSU
  + 6-7 full time phlebotomists (630am-630pm, Mon-Fri)
  + 2 part-time PAF positions
  + 22 employees with about 17 FTE with 2 reliefs and 20 full times
  + No per diem
  + It is about 40 employees with 34 FTE, not counting management
  + Phlebotomists don’t do processing
* Lisa Parkman from The Vancouver Clinic
  + Similar to OHSU’s count
* Svetlana Senchuk at Providence
  + 10 phlebotomists (both inpatient and outpatient)

Lisa discussed hosting a student that is performing exceptionally on draws, if they should start focusing on processing. Amy confirmed that it would be ideal and helpful.

Ulyana Karaseva stated that she understands that quality is more important than quantity.

The meeting adjourned at 7:32pm

Prepared by SueAnn McWatters