

2/14/25 MN

Teri Gardner 2-14-25

APPLICATION FOR WSATC RECOGNITION OF AN APPRENTICESHIP PREPARATION PROGRAM

Recognized Apprenticeship Preparation Programs are education and training programs which maintain formal articulation agreement(s) with one or more registered apprenticeship program sponsors. The purpose of the recognized preparation programs is to prepare participants for successful entry into registered apprenticeship programs. Preparatory programs are designed to increase the participation of underrepresented populations in registered apprenticeship. (WSATC Policy 2012-03 Sec. I B).

An apprenticeship preparation program may apply for recognition or continuing recognition from the WSATC. The WSATC may grant initial recognition for a period of up to 18 months, and continuing recognition for a period of up to three years. To apply for initial recognition, programs must have participants enrolled in training at the time of application, and provide individualized demographic data for the first/current cohort of participants. The cost to program participants may be considered as a factor when evaluating for recognition and continued recognition. (WSATC Policy 2012-03 Sec. III).

SECTION 1: CONTACT INFORMATION AND PROGRAM SUMMARY

Name of Apprenticeship Preparation Program:

InReach Medical Assistant Pre-Apprenticeship Program

Name of parent organization/organization that will administer the program:

Washington Association for Community Health

Contact Information:

Individual Authorized to Represent the Program

Name: Alyssa Burgess

Organization: Washington Association for Community Health

Title: Director of Career Pathways

Phone: 360-542-4419

Email: aburgess@wacommunityhealth.org

Mailing Address: 101 Capitol Way N Suite 200, Olympia, WA 98501

Physical Address: 101 Capitol Way N Suite 200, Olympia, WA 98501

Point of Contact for Outreach and Enrollment

*Name: Sami Helsley
Organization: Washington Association for Community Health
Title: InReach Partnership Coordinator
Phone: 360-786-9723
Email: shelsley@wacommunityhealth.org
Mailing Address: 101 Capitol Way N Suite 200, Olympia, WA 98501
Physical Address: 101 Capitol Way N Suite 200, Olympia, WA 98501*

Primary User of Apprentice Registration and Tracking System (ARTS) Portal

*Name: Priyanka Khatri
Organization: Washington Association for Community Health
Title: Student Data Coordinator
Phone: 360-542-4443
Email: pkhatri@wacommunityhealth.org
Mailing Address: 101 Capitol Way N Suite 200, Olympia, WA 98501
Physical Address: 101 Capitol Way N Suite 200, Olympia, WA 98501*

Summary of Preparatory Program

Please briefly summarize the following in three pages or less within Appendix A.

1. *Describe the organization that will be operating the preparatory training. If this is an existing organization, briefly describe its history and mission, and why apprenticeship preparation is a good fit.*
2. *Describe how the program will be funded. If the program's start-up is grant funded, describe your sustainability plan once the grant ends.*
3. *Describe the primary needs you have identified in your service area the program will address.*
4. *Describe the target populations and geographical area.*
5. *Describe the program. Please include the following:*
 - a. *The structure of preparatory program including the anticipated number of participants/cohorts per year and approximate duration of the program;*
 - b. *How the program will be staffed (i.e., instructors, administration, etc);*
 - c. *Participant support/resources during program; and*

- d. Apprenticeship navigation and articulation plan.*
6. *Describe the program outcomes. Please include the following if applicable.*
- a. Successful completion (required)*
 - b. Industry recognized certificate(s)/certification(s)*
 - c. Educational credit*
 - d. Target articulation rate (required)*
7. *Please provide additional details, if any, you would like to share about your program (i.e. positives outcomes other than registered apprenticeship articulation, etc.)*

SECTION 2: PROGRAM PARTICIPANTS AND OUTCOMES - (WSATC Policy 2012-03 Sec. II B)-

A minimum apprenticeship articulation goal, which shall be at least 15% of graduates. Articulation shall be measured at six months following the date program participants graduate, with the following exceptions:

- a. Programs serving actively enrolled K-12 participants may request articulation be measured at 12 months following the date of apprenticeship preparation program graduation; OR*
- b. Programs serving currently incarcerated individuals may request articulation be measured at 18 months following the date of apprenticeship preparation program graduation.*

The anticipated number of participants who will enroll in the preparatory program annually.

The specific requirements to complete the program (i.e., attendance, grades, test scores, skill demonstrations, certificate attainment, etc.).

The specific apprenticeship, industries and/or occupations program graduates will be prepared to enter.

Please respond in full to the questions below regarding your program’s participants and outcomes.

1. Occupations Trained: *Please describe the specific apprenticeship, industries and/or occupations program graduates will be prepared to enter:*

The InReach Medical Assistant Pre-Apprenticeship Program will prepare high school students to enter the Washington Association for Community Health Medical Assistant Apprenticeship Program.

2. Target Articulation Rate: *Approximately what percentage of program graduates do you expect to enter into a registered apprenticeship following completion of your program?*

Our articulation rate goal is 15%.

3. Target Participant Population and Successful Articulation Timeframe: *Please select the option which best characterizes your program participant successful articulation timeframe. Please describe.*

6 Months

12 Months (*program serving actively enrolled K-12 participants*)

18 Months (*program serving currently incarcerated individuals*)

Since this program will serve k-12 students only, we anticipate having them join the Washington Association for Community Health Medical Assistant Apprenticeship program as soon as they are 18 years old after high school graduation. The Washington Association for Community Health Medical Assistant Apprenticeship program starts public cohorts quarterly in January, April, July, and October each year so pre-apprentice graduates will have multiple opportunities to join.

4. *How many participants do you anticipate enrolling in each cohort and how many cohorts per year?*

We anticipate enrolling up to 25 students per year with 1 cohort per school year.

5. *Please describe the requirements to complete the program (i.e., attendance, grades, test scores, skill demonstrations, certificate attainment, etc.).*

Program requirements for successful graduation include completing all curriculum modules and homework earning an overall grade of 70% or higher. Pre-apprentices must be present and participate in at least 70% of the hands-on learning portions of the class.

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SECTION 3: ARTICULATIONS AND PARTNERSHIPS - (WSATC Policy 2012-03 Sec. II E, Sec. I E)

Apprenticeship preparation programs training participants for a specific occupation must provide at least one articulation agreement at the time of application. Preparatory programs training individuals in multiple occupations must provide a minimum of two articulation agreements at the time of application. Articulation agreements must contain the following components:

The names of the organizations entering into the agreement (Apprenticeship Preparation Program and Registered Apprenticeship Program).

The specific apprenticeship program and occupation(s) that the apprenticeship prep program graduates will be prepared to enter.

One or more of the following considerations for graduates of the prep program:

- a. A preferred entry clause;*
- b. An advanced standing or credit clause;*
- c. Additional point(s) awarded in the application/interview process; or*
- d. Guaranteed interview with registered apprenticeship program.*

Be executed or renewed no more than three months prior to the date of application.

Please select the option which best characterizes your program.

Registered Apprenticeship Program specific apprenticeship preparation *(goal is preparation of apprentices for one specific registered apprenticeship)*

General apprenticeship preparation program *(goal is preparation and support to succeed in a variety of apprenticeships)*

Please complete the chart below with the requested information for each registered apprenticeship with which your program has a formal articulation agreement. A copy of each articulation agreement must be attached to this application. A Memorandum of Agreement/Understanding, a formal contract, or a signed letter of commitment are acceptable forms of articulation agreements.

Apprentice-ship Program Name	Articulating Occupation(s)	Articulation Type <i>(select all that apply)</i>			
		Preferred Entry	Advanced Standing or Credit	Additional Points on Application/Interview	Guaranteed Interview

Washington Association for Community Health in reach Career Pathways	Medical Assisting	X	X	X	

Please list any other organizations, if any, which have endorsed your program or otherwise partnered with you to develop or administer this program.

Program or Organization Name	Role(s) <i>(eg: training provider, Advisory Board member, industry consultant, supportive services provider, etc.)</i>
One Community Health	Training Agent
Sklyline Health	Training Agent
Klickitat Valley	Training Agent
ESD 112	Service Provider/Funder

SECTION 4: CURRICULUM - (WSATC Policy 2012-03 Sec. II C)

Curriculum should be developed in consultation with apprenticeship partners and subject matter experts to ensure it aligns with current industry standards and prepares graduates to meet or exceed the minimum qualifications for entry into an apprenticeship. To ensure recognized Apprenticeship Preparation Programs are adequately preparing participants to enter Registered Apprenticeship and be successful apprentices, preparatory training curriculum must meet the following requirements:

- a. Be a minimum of 80 hours in duration;*
- b. Employability skill development shall not exceed 50% of curriculum hours. Employability skill development shall be defined as general employment skills (communication, professionalism, work ethic, etc.);*
- c. Industry/trade specific skills and knowledge shall constitute at least 50% of curriculum hours. Industry/trade specific skills and knowledge shall be defined as hands-on training to develop manual, mechanical, or technical skills relevant to the occupation(s) the preparatory participant(s) are training to successfully enter, and which does not displace paid employees; and*
- d. Industry/occupation specific safety training and education.*

In one to two paragraphs, please provide a brief summary of the programs curriculum describing the total number of hours, topics covered, method of delivery, etc.

Pre-apprentices will complete hands-on simulation learning during lab days where a licensed healthcare professional will guide them through how to perform the skills. Medical equipment and supplies will be brought into the classroom to conduct simulation training. Pre-apprentices will also learn how to work in an electronic health record system using an online simulation environment called SimChart for the Medical Office. This will give them the opportunity to learn how to chart patient complaints and practice using their medical terminology skills in an electronic health record. Pre-apprentices will also complete 14 modules of curriculum that focus on the basics of Medical Assisting plus soft skills about the integrated care model. Most of these modules are based on content from the textbook, Clinical Procedures for Medical Assistants, and have been used in the Washington Association for Community Health Medical Assistant Apprenticeship program for many years. The pre-apprentices will also complete 4 modules of professionalism training that will give them the skills necessary to be successful in the workplace. Each module topic varies between 10-20 curriculum hours depending on the amount of content and number of skills they will learn and practice. All 18 modules total 180 curriculum hours. Pre-apprentices will spend half of this time completing the online coursework and the other half learning the clinical skills in the simulated classroom environment. The curriculum will be hosted on the online learning management system, Canvas. This will allow students to complete the coursework at any time throughout the school week. There will be an online instructor available to join students via web calls to answer questions and review curriculum content.

Please respond in full to the questions below.

1. *Please describe your program's working relationship with one or more registered apprenticeship programs in the development of elements such as curriculum, class activities, evaluation methods, and teaching techniques.*

The pre-apprenticeship curriculum is taken directly from the Washington Association for Community Health Medical Assistant Apprenticeship program. Pre-Apprentices will complete 14 modules of content on clinical skills, then complete an additional 4 modules of professionalism training. They will be taught by a veteran instructor with the Washington Association for Community Health Medical Assistant Apprenticeship program as well. Similar grading requirements and policies will also be enforced to help prepare them for articulation into the Washington Association for Community Health Medical Assistant Apprenticeship program.

2. *Please identify the program's instructor(s) and provide a brief summary of their qualifications.*

Tanya VanBuskirk will be the instructor and has been teaching the Washington Association for Community Health Medical Assistant Apprenticeship program cohorts with the Association since 2016. Tanya has most recently worked for the Washington Network for Innovative Careers (WANIC) Skill Center teaching MA classes to high school students in Lake Washington. Tanya holds a Certified Medical Assistant credential (AAMA). In the past, she worked at Lake Washington Institute of Technology for many years teaching community college level MA courses. In this role, she also served as an externship coordinator working to place students at clinical sites in the community. She has been hired by ESD 112 to be the pre-apprenticeship online instructor.

3. *What, if any, post-secondary credit do program participants receive?*
N/A

Please complete Appendix B – Curriculum Outline.

SECTION 5: PARTICIPANT RECRUITMENT AND RETENTION - (WSATC Policy 2012-03

Sec. II D)- Karenjeet D

Preparatory program recruitment and retention plans must contain the following elements:

The target demographics of the population their enrollees will be drawn from; and

The specific tools and activities used to recruit and retain participants, with an emphasis on recruitment of underrepresented populations.

Please respond to the following questions regarding your programs recruiting and retention plans.

- 1. Please describe the general demographics of the intended program participants (i.e., age, gender, race/ethnicity, geographic area, etc.). Is the program limited to a specific population (i.e., students at a particular high school, veterans, WIOA-eligible, etc.)? If so, explain:*

Intended program participants will be 16–18-year-olds enrolled in a public high school as a senior/12th grader. Targeted schools will be limited in the first year but will open up statewide as program sponsor’s capacity increases. Our intention is for our participants to model the local communities’ demographics when it comes to gender and race/ethnicity, however anyone is welcome to join and there isn’t any prescreening done on these demographics.

- 2. Please describe the tools and activities which will be utilized to recruit students, and describe how underrepresented populations will be encouraged to enroll in the program.*

Since the schools will be responsible for recruiting students, we intend to provide them with information on who apprenticeship is built for to ensure we reach out target audience who will have the most success and benefit being in an apprenticeship program. We will provide all schools and employers with an MA Recruitment Guide that includes a sample job description, interview questions, DEI tools, and describes in detail who they should target.

- 3. Please describe the tools, processes, and resources your program will utilize to retain participants through graduation.*

We have many student support resources to offer to participants. There is a dedicated full-time employee for student support who will connect with participants on a regular basis to see how they're progressing and offer support as needed. We also can make accommodation whenever a participant has a personal conflict that will impact their ability to complete program requirements. Some accommodations include free 1:1 tutoring with their instructor, late penalty waivers on homework, due date extensions, and loaner equipment.

4. *Please describe the services that will be provided to graduates and current participants to assist in their successful application and articulation into registered apprenticeship programs.*

We intend to promote the Washington Association for Community Health Medical Assistant Apprenticeship program's annual July Cohort to all pre-apprentices for articulation into the apprenticeship program since it aligns with the end of the traditional school year. If there's any reason students cannot articulate that quickly, they will also be welcome to join the Washington Association for Community Health Medical Assistant Apprenticeship program's October, January, or April Cohorts that start each year. We will host overview/Q&A sessions towards the end of the school year for the pre-apprentices and we will provide the employers with co-branded marketing tools to keep the students engaged throughout this transition period.

5. *Please describe the cost of the program to participants and describe how the program helps mitigate the cost to participants (i.e., scholarships, grants, financial aid, etc.), if applicable.*

There is no cost to participants. The program is funded by the schools and no extra fees are passed on to the pre-apprentices.

SECTION 6: ADMINISTRATIVE REQUIREMENTS - (WSATC Policy 2012-03 Sec. II A)

Recognized Apprenticeship preparation programs shall commit to reporting the following information to L&I via the Apprenticeship Registration Tracking System (ARTS) system on a semi-annual basis, unless granted an exception by the WSATC:*

New participant demographics

- a. First and Last Names*
- b. Birth Date*
- c. Gender*
- d. Race/ Ethnicity*
- e. Veteran Status*
- f. Social Security Number**

Outcome measures (Individual-level Information)

- a. Participant graduation(s)/ completions*
- b. Participant withdrawals*
- c. Graduates who have entered into Registered Apprenticeship*

Please describe the tools and processes your program will utilize to successfully meet the administrative requirements listed above.

We will promote equitable recruitment procedures for the participating schools. We also have a data management system set up to gather all student details and be able to report accurately and timely on their progress. The system is run through Salesforce we will be able to safely collect and store this data. We will be providing a spreadsheet to the school's contact to receive this data. We plan to use the Appendix C to collect student information as some schools have expressed concern over sharing social security numbers.

Please complete Appendix C – Administrative Requirements Spreadsheet.

SECTION 7: APPENDICES

**Please complete and submit appendices with the application packet as separate files.
Appendices include the following:**

Appendix A – Program Summary

Appendix B – Curriculum Outline

Appendix C – Administrative Requirements Spreadsheet

Appendix D – Articulation Agreement(s)

**Submitted by program as individual documents*

SUBMISSION INSTRUCTIONS

Applications are due no later than 45 days prior to the scheduled quarterly meeting of the Washington State Apprenticeship and Training Council. It is strongly recommended that you submit your application 2 weeks prior to the deadline for pre-review, to ensure that your application is complete. Contact Rio Frame for questions or assistance.

Please submit your completed application via email to:

*Rio Frame, Management Analyst
Dept. of Labor & Industries, Apprenticeship Section
Rio.Frame@Lni.wa.gov
509-426-0985*

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APPENDIX A – PROGRAM SUMMARY

The Washington Association for Community Health (“the Association”) is a private, 501(c)(3) membership association formed in 1985. We bring community health centers together to collaborate and expand access to high-quality health care statewide. Our services include workforce development programs, technical assistance and training, and policy advocacy. We help community health centers navigate state and federal policy, provide evidence-based health care, and problem solve as a group. The Association’s mission is to strengthen and advocate for Washington’s Community Health Centers as they build healthcare access, innovation and value.

The Association’s members deliver health care to more than 1.2 million Washingtonians each year at more than 450 clinic sites. Community Health Centers are directed by local consumers and respond to community needs, serving all regardless of economic or insurance status. They are vital providers in the state’s health care safety net, advancing health equity and providing whole-person care to our most vulnerable populations while addressing health disparities. The Association strengthens member health centers' work with the information, partnerships and tools that make high-quality care a reality for people across the state.

In 2013, the Washington State Department of Health edited the credential requirements for Medical Assistants, requiring them to go through a formal training program to work at the top of the license. It was because of this change that we developed the Washington Association for Community Health’s Medical Assistant Apprenticeship Program, now run by the Association’s InReach Career Pathways team. The program has gained tremendous traction since it was approved by LNI in 2014. To date, there have been 1,124 program completions. Currently, there are 427 apprentices enrolled in the program. The completion rate for the program holds right around 85% and has a 98% pass rate on apprentices’ first attempt at the Certified Clinical Medical Assistant national exam. InReach has a dedicated team of 9 full-time employees to support the programs. Aside from the MA Apprenticeship, InReach also runs a Dental Assisting Training Program. InReach’s mission is to cultivate an equitable and sustainable community health workforce through innovative education and training programs.

InReach has been piloting an MA Pre-Apprenticeship Program over the past two school years. The first two pilots were funded by a Career Connect Washington grant awarded to NEW Health in Colville, WA, a community health center and Training Agent of our registered apprenticeship program. Colville High School and Northport High School hosted students in the 2023-2024 school year but found interest in healthcare careers lacking so have decided to rule out a future cohort. We were approached by Educational Service District 112 (ESD 112) in February 2024 about launching a new program in their region. House Bill 1033 was passed and states that “the Office of the Superintendent of Public Instruction (OSPI) and the educational service districts (ESDs) are directed to establish the Regional Apprenticeship Preparation Pilot Program”. ESD 112 received a grant to execute this work and intends to establish three new career & technical education (CTE) apprenticeship preparation programs in their region, one of which will be in partnership with InReach for Medical Assisting.

Moving forward, the MA Pre-Apprenticeship Program will be funded with tuition paid by the Training Agents and schools. Tuition is set at \$1000 per pre-apprentice and will cover fees associated with their

online learning management system, curriculum maintenance, instructor, textbooks, and program support services. There is no cost for students. Our current MA Apprenticeship Program is also funded by tuition paid for by the Training Agents, so this is a similar model that we know can and will sustain the program moving forward. The Association will also seek additional funding sources through grants from state organizations like Career Connect Washington or the Department of Labor & Industries to help offset some of these costs or provide additional support to students and employers. Additionally, some of our FTE and development costs are currently being covered by a private grant through the Siemens Foundation, who awarded the Association a \$2.3 million grant in Fall of 2022 to help expand and sustain the InReach programs.

Medical Assistants play a vital role in the healthcare industry and are often a difficult role to recruit and retain. According to the US Bureau of Labor Statistics, MAs have a projected annual growth rate of 24% with an estimated 2,700 annual job openings in Washington alone. MAs are used in a variety of different healthcare settings, and they have been one of the most cited vacant positions in healthcare over the past few years according to findings by the Sentinel Network. Apprenticeship programs like ours have been a great option for students of diverse backgrounds to establish a career as an MA, but we believe we could be reaching a wider audience if we pursued students of a younger age, when they are making decisions about their career and educational futures, which is why we are pursuing pre-apprenticeship for K-12 students.

The target population will be high school seniors/12th graders who are at least 16 years old. The MA Apprenticeship Program is only a year long, so we feel students preparing to graduate will most likely be to articulate into the apprenticeship program. Our current MA Apprenticeship Program serves apprentices statewide, and that is our intent with the MA Pre-Apprenticeship. We will start small in the first year with ESD 112, then slowly expand to other rural districts that don't offer many healthcare training opportunities to youth. We will instruct the schools to identify students interested in the healthcare field but may not be on the traditional 4-year college track after graduation. We will work with the school counselors to promote apprenticeship as a viable educational pathway to healthcare careers by connecting them to local healthcare employers that can participate in mock interviews and clinic tours, and discuss potential career pathways. We will also give formal presentations about the registered apprenticeship program and how pre-apprentices can easily apply.

We also intend to establish recognition as a Career Prep program with Career Connect Washington (CCW). Our MA Apprenticeship Program is already established as a Career Launch program with CCW. We are also in the process of working on a Career & Technical Education (CTE) framework to be approved by the Office of Superintendent of Public Instruction (OSPI). This framework of our curriculum will allow schools to seek funding to help support the program and provide them with a clear understanding of the curriculum.

The MA Pre-Apprenticeship Program will be a 10-month program that spans the traditional school year, September through June. Students will complete 18 modules of online curriculum, several of which modules are focused on industry-related skills with hands-on simulation learning. The course will be overseen by an expert instructor who will meet regularly with the students in a virtual format. Simulation training in the classroom will be supported by school nurses too. Students will dedicate 5 weeks to

practicing all clinical skills in a simulated environment. Students will also have access to support from our internal staff, including a Student Support Coordinator, Program Coordinator, Program Manager, and Program Director. We have established policies that enable students to seek special accommodation to ensure success in the program despite common barriers or concerns like extended leave from work, financial need, or technological needs. Students will attend a kickoff orientation with our staff at the beginning of their cohort to review all program expectations, procedures, and supports.

We anticipate starting one to two cohorts per year depending on each school's schedule. Ideally, students will join in the fall and finish in the spring at the beginning and end of the traditional school year. Our goal is to enroll up to 25 students in the first year, increasing enrollment each year by continuing to market, adding new regions and school districts.

Once students complete the pre-apprenticeship, graduate high school, and turn 18 years old, they will be guided by our staff how to articulate into the MA Apprenticeship program. Program completion will occur once a student completes all assignments in the curriculum with the minimum passing grade of 70%. Students will also be trained and certified in CPR/BLS. While the pre-apprenticeship will not result in any specific industry credentials, it will prepare them to obtain a Medical Assistant Certified credential from the Washington State Department of Health after they complete the MA Apprenticeship Program. We are also working with Lower Columbia College to determine if dual credit is a possibility for the pre-apprentices so they can earn college credit.

We work with Training Agents in the ESD 112 region to provide students with work-based learning opportunities such as clinic tours, interviews, guest speakers, and shadowing opportunities. These Training Agents have agreed to give pre-apprentices preferred entry through an additional five points on their application/interview. We start an RAP cohort every July and will aim to articulate as many pre-apprentice graduates into this cohort as we can since it aligns with the end of the school year. However, if students need to postpone their articulation, we also offer cohorts every October, January, and April that they would be eligible to join within the allowable 12-month period.

Our target articulation rate is 15%. We are marketing this program to our current Training Agents to develop their pipeline of MAs. There is a mutual understanding that the goal is articulation and retention. We are also taking the time to explain this to the schools, so they know which students to recruit into the program. We recognize that this may not be the best option for a student preparing to go to a four-year university on a pre-med track. Apprenticeship is built for those who are unsure of the right education or career pathway and want an opportunity to start working in their community.

We have heard from many schools that healthcare CTE programs are lacking, especially in rural areas. We are confident that this pre-apprenticeship program will be successful and provide opportunities to students who wouldn't otherwise believe a career in healthcare was possible for them. We appreciate your consideration of this program.

Teri Gardner 2-14-25

APPENDIX B – CURRICULUM OUTLINE

Curriculum should be developed in consultation with apprenticeship partners and subject matter experts to ensure it aligns with current industry standards and prepares graduates to meet or exceed the minimum qualifications for entry into an apprenticeship. To ensure recognized Apprenticeship Preparation Programs are adequately preparing participants to enter Registered Apprenticeship and be successful apprentices, preparatory training curriculum must meet the following requirements:

- a. Be a minimum of 80 hours in duration;
- b. Employability skill development shall not exceed 50% of curriculum hours. Employability skill development shall be defined as general employment skills (communication, professionalism, work ethic, etc.);
- c. Industry/trade specific skills and knowledge shall constitute at least 50% of curriculum hours. Industry/trade specific skills and knowledge shall be defined as hands-on training to develop manual, mechanical, or technical skills relevant to the occupation(s) the preparatory participant(s) are training to successfully enter, and which does not displace paid employees; and
- d. Industry/occupation specific safety training and education. (WSATC Policy 2012-03 Sec. II C)

Please use the format below for the program’s curriculum outline. Identify all curriculum elements and provide primary learning objectives that apply to each course.

Please copy and paste the format below to add additional course sections and/or primary learning objectives as needed.

1. Module 1: Working as an MA, Patient Engagement, Healthcare Models & Care Teams

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Understand the scope of work for an MA-C
2. Know how to obtain and maintain national and/or state MA certification
3. Describe the healthcare settings where MAs work
4. Describe the core competencies and expanded roles of MAs
5. Describe how MAs function as part of a care team
6. Understand the other types of providers on a care team and their roles
7. Understand the importance of effective patient engagement

8. Know and use the AIDET system for patient engagement
9. Know and use other tips and techniques for effective patient engagement
10. Be introduced to the Patient Centered Medical Home (PCMH) model of care

2. Module 2: The Medical Record and Health History (Chapter 1)

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Understand the critical role of the medical record in delivering continuous and quality patient care.
2. Demonstrate the importance of reviewing the patient's medical record prior to each visit as part of clinical staff responsibilities.
3. Develop skills to accurately document patient encounters immediately after visits, including details such as lab tests and phone conversations.
4. Recognize the necessity of documenting every patient interaction with the healthcare system to ensure comprehensive care continuity.
5. Explain the potential consequences of incomplete or unclear documentation on patient safety and healthcare outcomes.
6. Acquire proficiency in maintaining clear, useful, and up-to-date medical records as a fundamental responsibility of a medical assistant.

3. Module 3: Medical Asepsis and OSHA Standard (Chapter 2)/Sterilization/Disinfection (Chapter 3)

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Understand microorganisms in the context of medical asepsis
2. Describe protective mechanisms of the body
3. Define medical asepsis and explain the infection process
4. Define OSHA bloodborne pathogen standards and terminology
5. Describe and define bloodborne diseases
6. Perform medical aseptic techniques in the medical office

7. Define control measures
8. Perform work practice controls
9. Utilize Personal Protective Equipment (PPE) guidelines
10. Take proper action to handling regulated medical waste
11. Understand the structural organization of the human body

4. Module 4: SimChart EHR for the Medical Office

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Understand the foundational concepts of Electronic Health Records (EHR) through hands-on simulations within a medical office environment.
2. Demonstrate proficiency in navigating and utilizing the clinic's EHR system effectively through practical application exercises.
3. Develop the ability to manage patient information comprehensively, from appointment scheduling to insurance billing, using simulated scenarios.
4. Acquire and apply skills necessary to maintain organized electronic records and utilize them efficiently in clinical and administrative tasks.
5. Integrate clinical and administrative medical assisting skills through practical hands-on learning with SIMCHARTS modules embedded in the Canvas learning platform.
6. Demonstrate the ability to read, interpret, and document patient encounters accurately within simulated EHR environments.
7. Establish a systematic approach to learning by actively participating in hands-on activities, such as reading and taking notes on EHR-related materials.
8. Organize electronic resources effectively by saving relevant files to a designated folder named SIMCHARTS for easy access and reference during simulated exercises.

5. Module 5: A&P/Medical Terminology/Body Systems

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Develop the ability to understand and utilize basic medical terminology for body parts and functions.
2. Explore the structures and functions of major body systems.
3. Understand human growth from conception to adulthood.
4. Learn about the body's defense mechanisms against diseases.
5. Attain comprehensive understanding of the skeletal, muscular, reproductive, cardiovascular, nervous, integumentary, endocrine, urinary, lymphatic, digestive, respiratory, and immune systems

6. Module 6: Vital Signs (Chapter 4)

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Define a vital sign
2. Explain the reason for taking vital signs
3. Explain how body temperature is maintained
4. List examples of how heat is produced and lost from the body
5. State the normal body temperature range
6. Explain some of the factors that can cause changes in body temperature
7. Describe the three stages of fever
8. List the sites that can be used to take a temperature
9. Describe the guidelines for using a tympanic membrane thermometer
10. Describe the mechanisms of a human pulse
11. List the factors that can change a pulse
12. Describe the use of the eight pulse sites
13. List the same of normal pulse for different age groups
14. Describe the difference between pulse rhythm and pulse volume
15. Determine the purpose of respiration
16. Describe what occurs when inhaling and exhaling
17. Describe the different respiratory rates for several age groups
18. Explain the factors that affect respiration
19. Describe the difference between rhythm and depth of respirations
20. Identify the character of select breath sounds
21. Define blood pressure
22. List the normal ranges of blood pressure
23. Describe what can change blood pressure

24. Identify the different parts of a stethoscope and a blood pressure cuff
25. Explain what Korotkoff sounds are
26. Discuss how to prevent errors when taking a blood pressure measurement
27. Demonstrate proficiency in vital sign procedures through hands-on and simulation activities in a controlled learning environment.

7. Module 7: Physical Agents to Promote Tissue Healing (Chapter 7)

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Give examples of moist and dry applications of heat and cold.
2. State factors to consider when applying heat and cold.
3. List effects of local application of heat and reasons for applying heat.
4. List the effects of local application of cold, and reasons for applying cold.
5. List the reasons for applying a cast.
6. Explain each step of cast application procedure.
7. Describe a splint and when to use it.
8. Explain the purpose of a brace.
9. List factors that are taken into consideration when ambulatory aids are prescribed.
10. Explain the difference between an axillary crutch and a forearm crutch.
11. State what can happen if axillary crutches are not fitted properly.
12. List guidelines that should be followed by the patient to ensure safe use of crutches.
13. State the use of the following gaits:
 - Four point gait
 - Two point gait
 - Three point gait
 - Swing-to gait
 - Swing-through gait
14. List and describe the three types of canes.
15. Identify the patient conditions that warrant the use of a cane or walker.
16. Demonstrate proficiency in tissue healing and wound care procedures through hands-on and simulation activities in a controlled learning environment.

8. Module 8: Assist with Exams and Procedures (Chapters 5, 6, 8, 9)

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. List the components of the well-child visit.
2. State the usual schedule for well-child visits.
3. Explain the purpose of the sick-child visit.
4. List the procedures performed by the medical assistant during pediatric visits.
5. Explain why it is important to develop a rapport with the pediatric patient.
6. State the importance of measuring the child's weight and height or length, and head circumference during each office visit.
7. State the functions of the growth chart.
8. State the importance of measuring a child's blood pressure.
9. List the three factors that determine if a child has hypertension.
10. List the reasons for collecting a urine specimen.
11. Describe the schedule for immunization of infants and children recommended by the American Academy of Pediatrics
12. State the information that must be provided to parents as required by the National Childhood Vaccine Injury Act.
13. List the information that must be documented in the medical record after administering an immunization.
14. State the range for the gauge and length of needles used for intramuscular and subcutaneous pediatric injections.
15. Explain the use of each of the pediatric injection sites: vastus lateralis, and deltoid.
16. Explain the purpose of a newborn screening test.
17. List the symptoms of phenylketonuria.
18. State what occurs if phenylketonuria is left untreated.
19. Demonstrate proficiency in necessary skills for assisting with exams and procedures through hands-on and simulation activities in a controlled learning environment.

9. Module 9: Minor Office Surgery (Chapter 10)

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. State the characteristics of a minor surgical procedure
2. Identify procedures that require the use of surgical asepsis
3. Describe the medical assistant's responsibilities during a minor surgical procedure
4. List the guidelines to follow to maintain surgical asepsis during a sterile procedure
5. Identify surgical instruments commonly used in the medical office and explain the use and care of each instrument
6. Explain the differences between a closed and an open wound, and give examples
7. List and explain the three phases of the healing process
8. List and describe the different types of wound exudates
9. List the functions of a dressing
10. Explain the method used to measure the diameter of suturing material
11. Describe the two types of sutures (absorbable and non-absorbable), and give examples of their uses
12. Categorize suturing needles according to type of point and shape
13. Explain the purpose of and procedure for each of the following minor surgical operations:
 - Sebaceous cyst removal
 - Incision and drainage of a localized infection
 - Mole removal
 - Needle biopsy
 - Ingrown toenail removal
 - Colposcopy
 - Cervical punch biopsy
 - Cryosurgery
14. Explain the principles underlying each step in the minor office surgery procedures
15. State the functions of a bandage, and list the guidelines for applying a bandage
16. Identify the common types of bandages used in the medical office
17. Demonstrate proficiency in necessary skills for assisting with minor surgeries through hands-on and simulation activities in a controlled learning environment.

10. Module 10: Administration of Medication (Chapter 11)

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Explain the difference between administering, prescribing and dispensing medication.
2. State the common routes for administration of medication.
3. List and describe the categories of information in a drug package insert.
4. Describe the FDA's responsibilities with respect to drugs.
5. List and define the four names of drugs.
6. Classify drugs according to their preparation.
 1. Classify drugs according to the action they have on the body.
 2. List the guidelines for writing metric notations.
 3. List and describe the five schedules of controlled drugs.
 4. List and explain the parts of a prescription.
 5. Explain the purpose of a medication record.
 6. Describe the factors that affect the action of drugs in the body.
 7. List and describe the possible effects of medication.
 8. List the guidelines for preparing and administering drugs.
 9. Explain why the oral route is most frequently used to administer medication.
 10. State where the absorption of most oral medications take place.
 11. State the advantages and disadvantages of the parenteral route of administration.
 12. Demonstrate proficiency in medication administration procedures through hands-on and simulation activities in a controlled learning environment.

11. Module 11: Introduction to the Clinical Laboratory (Chapter 15) and Urinalysis (Chapter 16)

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Describe the structures that form the urinary system and state the function of each.
2. List the conditions that may cause polyuria and oliguria.
3. Define the terms used to describe the symptoms of the urinary tract.
4. List why the first-voided morning specimen is often preferred for urinalysis.
5. Explain the purpose of collecting a clean-catch midstream specimen and a first-catch urine specimen.
6. Explain the purpose of a 24-hour urine collection.
7. List the changes that may occur if urine is allowed to remain standing for more than an hour.
8. List the factors that may cause urine to have an unusual color and become cloudy.

9. Identify various tests that are included in the physical and chemical examination of urine.
10. List the structures that may be found in a microscopic examination of urine.
11. Explain the basis for urine pregnancy testing.
12. List the guidelines that must be followed in a urine pregnancy test to ensure accurate test results.
13. Demonstrate proficiency in urinalysis procedures through hands-on and simulation activities in a controlled learning environment.

12. Module 12: Cardiopulmonary (Chapter 12) and Radiology (Chapter 14)

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Describe the pathophysiologies of COPD and of asthma
2. Examine the presenting complaints of COPD and of asthma and their risk factors
3. Review drug and non-drug therapy for managing COPD
4. Review drug therapy and self-management care for managing asthma
5. Demonstrate proficiency in cardiopulmonary procedures and radiology techniques through hands-on and simulation activities in a controlled learning environment.

13. Module 13: Phlebotomy (Chapter 17)

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. List and describe the guidelines that should be followed when performing a venipuncture.
2. Explain how each of the following blood specimens is obtained:
 - Clotted blood
 - Serum
 - Whole blood
 - Plasma

3. List the layers into which the blood separates when an anticoagulant is added to the specimen.
4. List the layers into which the blood separates when an anticoagulant is not added to the specimen.
5. List the OSHA safety precautions that must be followed during venipuncture.
6. State the additive content of the following vacuum tubes and list the type of specimens that can be obtained from each: red, lavender, gray, light blue, green, royal blue.
7. Identify and explain the order of draw for Vacutainer and butterfly methods of venipuncture.
8. List and describe the guidelines for use of blood collection tubes.
9. Identify problems that may occur during a venipuncture.
10. List four ways to prevent a blood specimen from becoming hemolyzed.
11. Explain how the serum separator tube functions in the collection of a serum specimen.
12. Explain when a skin puncture would be preferred over a venipuncture.
13. Identify skin puncture sites for adults and infants.
14. List and describe guidelines for performing a finger puncture.
15. Demonstrate proficiency in phlebotomy procedures through hands-on and simulation activities in a controlled learning environment.

14. Module 14: Colon and Male Reproductive Health (Chapter 13) Hematology (Chapter 18) Blood Chemistry & Immunology (Chapter 19) Medical Microbiology (Chapter 20)

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. List the symptoms of colorectal cancer.
2. Explain the purpose of a guaiac fecal occult blood test.
3. Describe the patient preparation for a gFOBT.
4. Describe the quality control measures that should be used with a gFOBT.
5. Explain the purpose of sigmoidoscopy.
6. Explain the purpose of a digital rectal examination (DRE) before a sigmoidoscopy.
7. Explain the importance of proper bowel preparation prior to a sigmoidoscopy.
8. List the symptoms of prostate cancer.
9. Explain how the digital rectal examination is used to screen for prostate cancer.
10. Explain the purpose of the prostate-specific antigen (PSA) test.

11. Demonstrate proficiency in microbiology, hematology, and blood chemistry analysis through hands-on and simulation activities in a controlled learning environment.

15. Module 15: Personal Workplace Etiquette

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Define professionalism.
2. Recognize appearance/dress code policies.
3. Identify ways to maintain a professional appearance.
4. Explain why language and grammar are essential components of effective communication.
5. State ways to maintain professionalism outside of work.
6. Determine how your personal health and wellness can impact your work performance.
7. Apply strategies for effective time management.
8. Identify personal finance tips.
9. Recall resources and strategies for stress relief and resiliency.
10. Summarize 4 Stages of Change and how to move through each stage.

16. Module 16: Work Ethic & Performance

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Define interdependence, self-awareness, and critical thinking.
2. State some of your personal strengths and weaknesses.
3. Recognize critical thinking skills and how to improve them.
4. Describe why punctuality and attendance are important responsibilities.
5. Demonstrate accountability at work and describe its benefit.
6. Demonstrate how to have a positive attitude in the workplace and understand its
7. Understand the importance of compliance at work.

8. Identify different types of inappropriate behavior in the workplace, including harassment.
9. Summarize positive ways to evaluate your own work performance.

17. Module 17: Relationships, Teamwork, & Communication Skills

Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Describe why it can be beneficial to treat your coworkers as customers
2. Understand the Incivility Spiral
3. Name ways to build trust with your coworkers
4. Define what it means to be an ally
5. Recall ways that marginalized groups can succeed at work
6. Classify the different types of teams
7. Describe how to avoid teamwork conflicts/disasters
8. Understand how to communicate properly in public speaking and in written formats
9. Identify your communication style
10. Summarize different communication technologies including virtual meeting tips

18. Module 18: Employment & Professional Development


Learning hours: 10

Curriculum Elements:

- Industry/occupation specific safety training and education
- Employability skill development
- Industry/trade specific skills and knowledge

Learning Objectives:

1. Create a working resume that can be used to apply for jobs
2. Understand how to collect professional and personal references
3. Name ways to prepare for a job interview
4. Prepare a post-interview written follow up to an employer
5. Recall important considerations to make before accepting a job offer
6. Indicate the importance of professional development
7. Identify potential career pathways for Medical Assistants

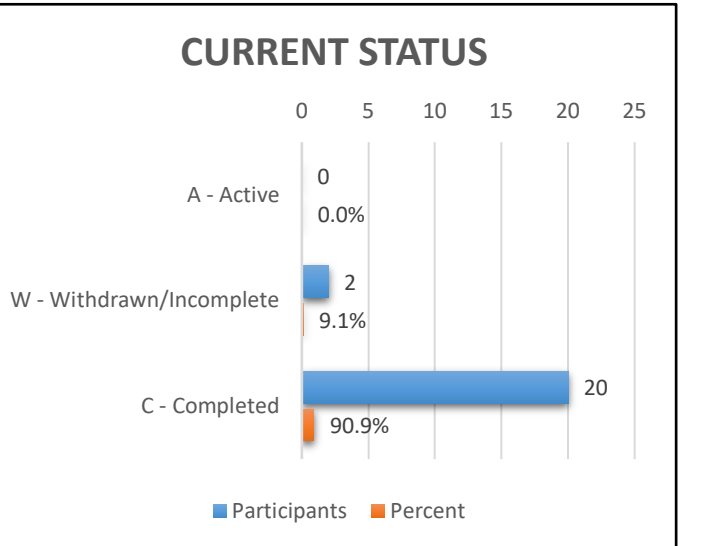
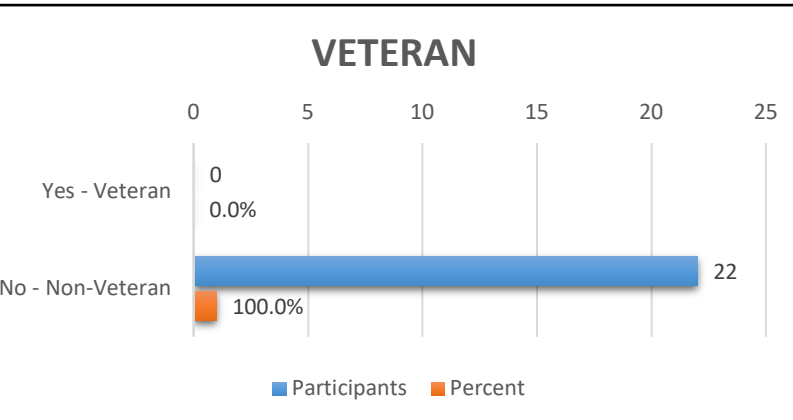
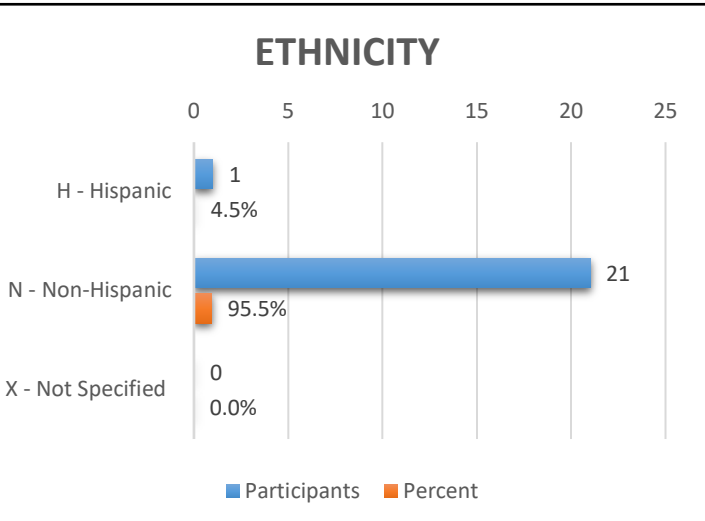
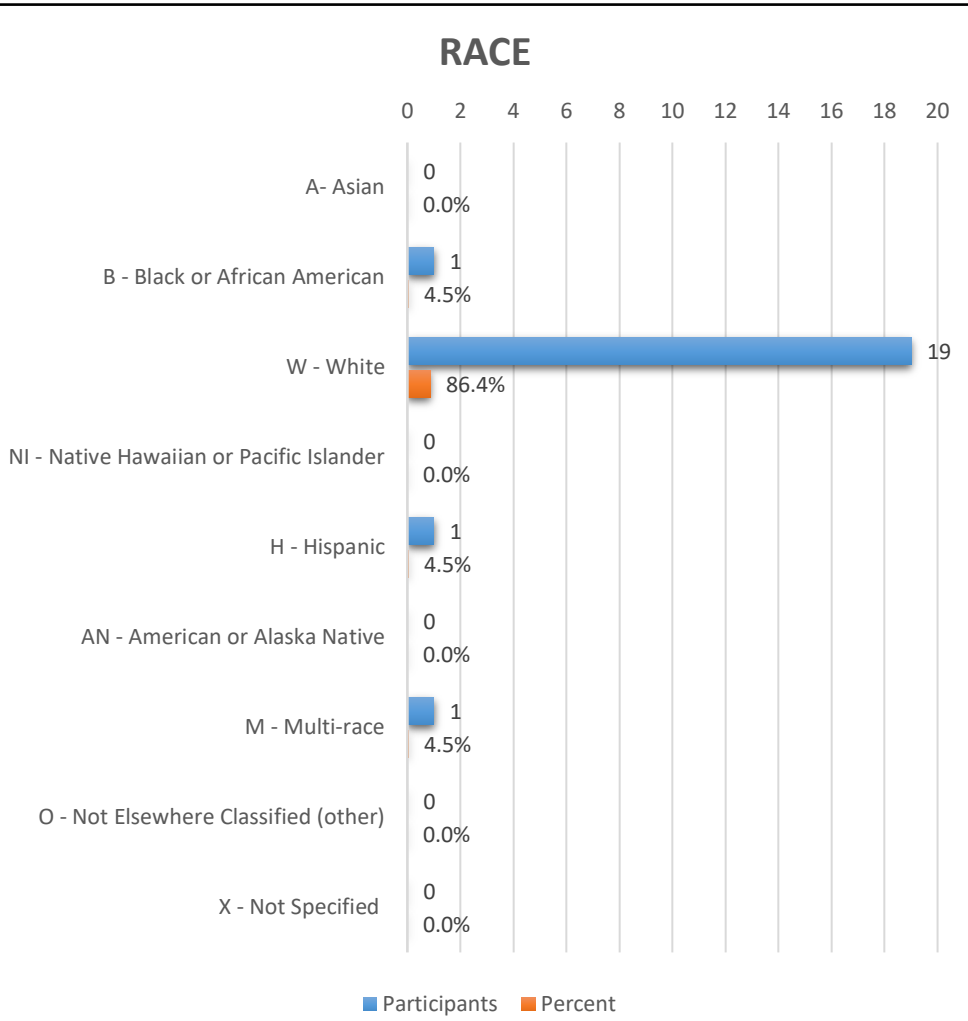
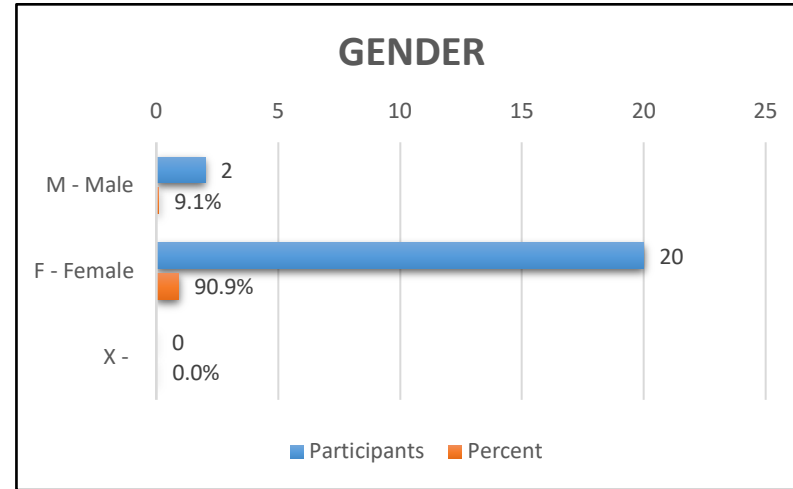
Preparatory Program Name:	InReach Medical Assistant Pre-Apprenticeship Program	Total Number of Participants:	22	
Reporting Period, Earliest Date:	8/30/2022	Total Participant Graduates:	20	
Reporting Period, Latest Date:	6/16/2025	Total Withdrawals/Incomplete:	2	
		Total Grad's Articulated into Reg' Apprenticeship:	1	

*Please refer to the instructions tab for information on how to properly complete this document.

Participant Information - Total of Cohorts										Registered Apprenticeship Articulation Information			
Last Name	First Name	Birth Date	Gender	Race	Ethnicity	Veteran	Cohort Start Date	Current Status	Graduation Date	Registered Apprenticeship Name	Occupation	Date of Registration	Apprentice ID Number
22	22	22	22	22	22	22	22	22	22	1	1	1	1

Articulation Rate
4.55%

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Washington
Association for
Community Health
Community Health Centers
Advancing Quality Care for All

2/14/25 MN



Teri Gardner 2-14-25

November 5, 2024

To Whom It May Concern,

The Washington Association for Community Health's Medical Assistant Apprenticeship Program (Program ID 1940) formally agrees to accept articulated apprentices from the InReach Medical Assistant Pre-Apprenticeship Program.

We agree to give articulated pre-apprentices advanced standing for completion of 180 RSI Hours during the pre-apprenticeship.

We agree to enforce preferred entry through the Training Agents by requiring pre-apprentices be given five additional points on interviews/applications to the MA Apprenticeship Program.

We agree to provide a minimum of four opportunities per year for the pre-apprentice graduates to join the Washington Association for Community Health MA Apprenticeship Program.

Sincerely,

Alyssa Burgess

Alyssa Burgess
Director of Career Pathways
Training Director
Washington Association for Community Health

