



ACCREDITING BUREAU OF HEALTH EDUCATION SCHOOLS | ABHES

6116 Executive Boulevard, Suite 730 • North Bethesda, MD 20852

Tel: 301.291.7550 • Email: info@abhes.org

Transmitted by electronic mail only: [REDACTED]

February 14, 2024

[REDACTED]
President

Mid-America College of Health Sciences
10000 W 75th Street, Building A, Suite 241
Merriam, KS 66204

Dear [REDACTED]:

The Commission, at its January 2024 meeting, reviewed the record¹ of your application for an initial grant of institutional accreditation. Based on review and discussion, the Commission acted to **deny** the institution's application for initial accreditation based on the following areas of noncompliance with ABHES accreditation standards as listed in the *Accreditation Manual*.

Procedural History

According to the accreditation record, the institution's original Self-Evaluation Report (SER) submitted in June 2022 was incomplete, and thus, the institution was permitted to submit an updated SER in September 2022. The institution had an initial site visit in September 2022, which resulted in a significant number of violations. At its January 2023 meeting, the Commission deferred action on the application for an initial grant of accreditation and directed a comprehensive on-site evaluation visit. The February 2023 deferral letter noted that given the numerous areas of non-compliance identified in the September 2022 Visit Reports, the SER relied upon by the site evaluation team had not provided a completely accurate portrayal of the institution's compliance with ABHES accreditation standards. Therefore, the institution was provided an opportunity to submit a new SER to support its application for initial accreditation and explain how it comprehensively meets ABHES accreditation standards.

¹ The accreditation record includes the initial Application for Accreditation, the June 2022 and September 2022 Self-Evaluation Reports, the September 2022 visit reports, the institution's November 2022 response to the visit reports, the Commission's February 16, 2023 deferral letter, the institution's June 2023 Self-Evaluation Report, the October 2023 visit reports, the institution's December 2023 response to the visit reports, the institution's financial history, and other relevant correspondence and documentation.

The institution submitted a new SER in June 2023, and had a comprehensive on-site visit in October 2023. The visit reports again identified considerable areas of non-compliance. The Commission then reviewed the institution's December 2023 response to the visit reports at its January 2024 meeting.

Reasons for Denial of the Application for Initial Accreditation

1. [The institution] is properly licensed, chartered, or approved to provide education beyond the secondary level under the laws and regulations of the state(s) or territories in which it operates, including any regulatory oversight body approval (II.A.1.a.(5).); an institution complies with current applicable local, state, and federal laws (IV.D.1.); and, maintains documentation of ABHES and applicable local, state, and federal approvals for distance education delivery (IX.A.1. per the *Accreditation Manual* updated January 1, 2024; formerly IX.F.1.). (Medical Assistant, Medication Aide, and Nurse Aide programs)

The Commission found that the institution has not demonstrated compliance with the above standards because it did not provide evidence that it has the necessary approvals or exemptions to operate in the states where enrolled students and clinical sites are physically located.² At the time of the October 2023 site visit, there were four active clinical sites in Missouri where Medical Assistant students were completing clinical hours (i.e., Midwest Heart & Vascular Specialists, part of HCA Physician Services, Inc., CenterPoint Physicians, part of HCA Physician Services, Inc., Meritas Health Pediatrics, and Encompass Medical Group). The institution also had enrolled students in the Medication Aide and Nurse Aide blended programs who were physically located in the state of Missouri. In its response to the visit report, the institution did not provide evidence of approval or exemption from the Missouri Department of Higher Education (MDHE) or any other applicable Missouri regulatory body, for its practice of enrolling students, providing distance education, or offering clinical experiences in the state of Missouri.

2. An institution has and uniformly applies a published cancellation and refund policy that complies with all applicable state, federal, and accrediting agency requirements (IV.F.3.a.); and refunds are made within 45 days after the date of the institution's determination that the student has withdrawn (IV.F.3.b.) (Medical Assistant, Medication Aide, Nurse Aide, Phlebotomy, and Practical Nurse programs)

The Commission found that the institution has not demonstrated compliance with these standards because, although the refund policy is published in the catalog, the institution did not demonstrate the policy is consistently applied to students who drop prior to completion of a program. The institution did not provide evidence either during the October 2023 site visit, or in its response to the visit reports, that it uniformly applies its refund policy. In a review of withdrawn student files, the institution did not substantiate in its analysis that refunds were not due to [REDACTED] (Medical Assistant), [REDACTED] (Medical Assistant), [REDACTED] (Medication Aide), Phlebotomy ([REDACTED]), and

² In accordance with ABHES' [Attestation of State Authorization](#) form, the regulatory definition of "operate" varies by state, as do licensure and authorization requirements. Some states require approvals for any institution delivering educational programs within their state (including via distance education), regardless of on-ground presence; other states require approvals based upon on-ground triggers, such as student participation in clinical experiences, interest meetings, employment of local faculty, or placement of local advertising, among others. Lack of applicable state authorization may impact a student's ability to become credentialed in certain professions. It is the responsibility of the school to determine when it is necessary to obtain approvals from the states in which it is operating, as applicable.

██████████ (Phlebotomy). The institution did not provide documentation, such as the student's start date, last date of attendance, date of determination that the student was no longer in school, or the date when the institution conducted the evaluation to determine if a refund was due.

3. An institution's published Satisfactory Academic Progress policy complies with Appendix B: Standards of Satisfactory Academic Progress (IV.H.1.).

The Commission found that the institution has not demonstrated compliance with the above standard because the Satisfactory Academic Progress (SAP) policy in the catalog does not accurately calculate the Maximum Time Frame (MTF) in instructional weeks and/or clock hours for all programs. The institution's MTF calculations were consistently found to be in excess of 150% of the program's length in instructional weeks or clock hours (e.g., length x 1.5 = MTF or length x 150% = MTF). Although the institution's catalog correctly states the definition of MTF, the catalog also shows the actual calculation performed by the institution (e.g., (length x 150)/100, which yields an incorrect MTF calculation as indicated in the table below).

Program	Length in Weeks as Published in Catalog & SER	MTF in Weeks as Published in Catalog	Actual MTF in Weeks	Length in Hours as Published in Catalog & SER	MTF in Hours as Published in Catalog	Actual MTF in Hours
Medical Assistant	41	307.5	61.5	730	885 (without externship)	1095
Medication Aide	4 / 6	45	6 / 9	75	112.5	112.5
Nurse Aide	2 / 5	37.5	3 / 7.5	90	135	135
Phlebotomy	5 / 6 / 8	60	7.5 / 9 / 12	90	135	135
Practical Nurse	40	300	60	885	1327.50	1327.5

4. A program has an active advisory board of in-field specialists, current in the applicable specialty, representing its communities of interest, to assist administration and faculty in fulfilling stated educational objectives and improving program effectiveness (V.A.6.a.); and, a program is served by an advisory board of program-related specialists to assist administration and faculty in fulfilling stated educational objectives (MA.B.2.c.). (Medical Assistant, Medication Aide, Nurse Aide, and Practical Nurse programs)

The Commission found that the Institution has not demonstrated compliance with these standards as detailed below.

The Medical Assistant program's advisory board last met on September 6, 2023; however, it was held without the required in-field specialists representing the program's communities of interest. The board's composition was specifically missing a program graduate, a current medical assistant practitioner, and a licensed physician, physician assistant, or nurse practitioner. In its December 2023 response, the institution did not provide a narrative response or supporting documentation to this area of non-compliance for the Medical Assistant program.

The Medication Aide program is offered through blended delivery methods and the program's advisory board last met on October 19, 2023; while several communities of interest were present, a distance education specialist did not attend. The institution's response to the October 2023 visit report identified a newly appointed distance education specialist, [REDACTED] but did not evidence her qualifications to serve in this role.

The Nurse Aide program is offered through a blended delivery method and the institution noted that [REDACTED] was the distance education specialist on the advisory board but did not evidence her qualifications to serve in this her role.

The Practical Nurse program's advisory board last met on September 11, 2023, and October 9, 2023; neither meeting convened with three in-field specialists in attendance. The institution's response to the October 2023 visit report indicates an action plan to identify additional prospective members to comprise the board; however, the institution did not actually identify any new members or their qualifications for the role.

5. Current course syllabi comply with Appendix F: Course Syllabi Requirements (V.C.1.a.). (Practical Nurse program)

The Commission found that the institution has not demonstrated compliance with the above standard because the institution has not resolved discrepancies in how credits are awarded. The institution's response to the October 2023 team report included syllabi for PN102 Foundations of Nursing Clinical Nursing, PN202 Nursing Care of Adults I Clinical, PN302 Maternal Child Nursing Clinical, PN402 Nursing Care of Adults II Clinical, and PN404 IV Therapy for PNs (IV), which describe total clinical clock hours that are inclusive of hours in the skills lab. Hours completed in a skills lab are to be categorized as laboratory hours per the Glossary in the *Accreditation Manual*. Note, in a program awarding semester credit hours, laboratory hours convert to semester credits at a 30:1 ratio and clinical hours convert at a 45:1 ratio. Therefore, a misclassification of laboratory or clinical hours will alter the total credit award in a course and, ultimately, in a program.

6. Individual(s) responsible for program management are provided time, resources, and opportunities for professional development (V.E.1.c.). (Medication Aide program)

The Commission found that the institution has not demonstrated compliance with the above standard because the institution did not evidence that [REDACTED], program director, has participated in professional development activities. In the institution's response, it provided documentation that [REDACTED] completed an activity related to online teaching on October 24, 2023, but the content was not specific to the profession of medication aide or a related vocation as required by the standard. Although the institution's response described planned trainings for 2024, it did not provide evidence that individuals responsible for program management participate in professional development activities that are profession-specific.³

³ Standard V.E.1.c. requires "Professional development activities may include and are not limited to professional association seminars, industry conferences, profession-related meetings and workshops, and research and writing for profession-specific publications." ABHES *Accreditation Manual*, p. 80.

7. Individual(s) responsible for program management are provided annual training for the improvement of education-related management skills (V.E.1.d.). (Nurse Aide program)

The Commission found that the institution has not demonstrated compliance with the above standard because the institution did not evidence that [REDACTED], program director, has completed annual training for the improvement of education-related management skills (i.e., focused development on the managerial functions and administrative responsibilities of the educational product). In the institution's response, it provided documentation that [REDACTED] completed an activity on October 26, 2023, but the content was specific to online teaching and the institution did not demonstrate how that specific training met the requirement of training for the improvement of education-related management skills.

8. Faculty records for all full-time and part-time (including adjunct) faculty comply with Appendix E, Section B: Records Maintenance (V.E.2.b.); faculty participate in training with a focus on effective teaching at least twice annually (V.E.4.b.); and faculty participate in professional growth activities at least twice annually (V.E.4.c.). (Medication Aide, Nurse Aide, and Practical Nurse programs)

The Commission found that the institution has not demonstrated compliance with the above standards because the institution's response to the October 2023 visit report did not evidence that the following faculty file contents were being maintained: 1) signed job descriptions for the role of faculty for [REDACTED] (Nurse Aide and Practical Nurse programs) and [REDACTED] (Medication Aide and Practical Nurse programs) per (1) of Appendix E, Section B; 2) classroom evaluations conducted within 30 days of beginning instruction for [REDACTED] (Medication Aide and Practical Nurse programs), and [REDACTED] (Nurse Aide program) per (5) of Appendix E, Section B; 3) documentation of continued professional development for [REDACTED] (Medication Aide and Practical Nurse programs) per (6) of Appendix E, Section B; 4) documentation of two trainings with a focus on effective teaching with the last 12 months for [REDACTED] (Nurse Aide and Practical Nurse) and [REDACTED] (Medication Aide and Practical Nurse) per (7) of Appendix E, Section B; and, 5) fully completed, signed, and updated ABHES Faculty Data Sheets for [REDACTED] (Medication Aide and Practical Nurse) per (8) of Appendix E, Section B.

9. An institution discloses in writing, prior to enrollment, any material circumstance that may adversely impact an applicant's ability to complete a program or gain employment in the field for which they are trained (e.g., criminal record, credentialing requirements for employment) (V.H.3. per the *Accreditation Manual* updated January 1, 2024; formerly IX.H.4.); and all disclosures regarding educational requirements for specific state licensing or credentialing are clearly communicated (V.H.5. per the *Accreditation Manual* updated January 1, 2024; formerly V.H.4.) (Medical Assistant, Medication Aide, Nurse Aide, Phlebotomy, and Practical Nurse programs)

The Commission found that the institution has not demonstrated compliance with the above standards because the institution's website (<https://macohs.edu>) advertises that students are prepared for the credentialing or licensing exams listed in the below chart and did not provide evidence in its response to the October 2023 visit reports that the institution provided direct notice to 16 students (i.e., two in Medical Assistant, one in Medication Aide, two in Nurse Aide, one in Phlebotomy, and six in Practical Nurse) who were physically located in the state of Missouri.

Program	Credential or License
Medical Assistant	CCMA exam
Medication Aide	CMA exam and license
Nurse Aide	CNA exam
Phlebotomy	National Certification Exam for Phlebotomy (CPT) through the National Healthcare Association (NHA)
Practical Nurse	LPN exam

10. Publish the process for submitting complaints to the appropriate state authorities or state approval agencies where the institution is located and where enrolled students are physically located (V.H.6. per the *Accreditation Manual* updated January 1, 2024; formerly V.H.5.). (Medical Assistant, Medication Aide, Phlebotomy, and Practical Nurse programs)

The Commission found that the institution has not demonstrated compliance with the above standard because the institution enrolls students who are physically located in the state of Missouri but does not publish the process for submitting complaints to the Missouri state authority or approval agency. In its narrative response to the October 2023 visit reports, the institution asserted that it is not required to publish such information because it has no physical presence in the state of Missouri. The institution's response is inadequate because such disclosures are required by the ABHES standard irrespective of the state's physical presence requirements.

11. A program demonstrates that graduates are successfully employed in the field for which they were trained (V.I.1.d.). (Nurse Aide and Medical Assistant programs)

The Commission found that the institution has not demonstrated compliance with the above standard because the institution did not provide supporting evidence for the 2021-2022 ABHES Backup Documentation Form and the job placement of nine Nurse Aide graduates at Infinity Park and one Nurse Aide graduate at the Bickford Senior Living (now Trustwell). In its response to the team's report, the institution provided a revised 2021-2022 ABHES Backup Documentation Form with a placement rate of 8% (including the 10 placements that could not be verified).

Additionally, the institution did not demonstrate compliance with the above standard because it did not provide supporting documentation that [REDACTED] employment was verified after 15 days of employment at Midwest Heart and Vascular Specialists as a Medical Assistant. The form recorded a verification date of October 10, 2023, and an employment start date six days later, on October 16, 2023. Accordingly, the graduate had not worked the required minimum of 15 days before employment was verified.

12. A program demonstrates that its required constituencies participate in completing program surveys (V.I.1.e.). (Nurse Aide, Medical Assistant, Medication Aide, and Phlebotomy programs)

The Commission found that the institution has not demonstrated compliance with the above standard because the institution's survey tool for the Medical Assistant program's clinical affiliates and graduates did not contain any of the required elements as described in the standard.

The External Clinical Affiliate Survey form was missing required elements: a) a critique of student knowledge and skills, b) an assessment of the instructional activities, and c) responsiveness and support of the designated school representative.

The Graduate Survey form was missing required elements: a) an assessment of satisfaction with preparation for entry into the field, b) the training and education received, and c) career services offered by the institution.

Further, the institution's Program Effectiveness Plans for the Nurse Aide, Phlebotomy, Medical Assistant, and Medication Aide programs did not contain participation rates or the calculation of those rates.

13. A program demonstrates that each constituency satisfaction rate is determined based on program surveys (V.I.1.f.). (Nurse Aide, Medical Assistant, Medication Aide, and Phlebotomy programs)

The Commission found that the institution has not demonstrated compliance with the above standard because the institution's Program Effectiveness Plans for the Nurse Aide, Medical Assistant, Medication Aide, and Phlebotomy programs did not identify the number of survey respondents meeting the satisfaction level as defined by the institution or how it calculated the satisfaction rate for each constituency surveyed in each of the noted programs.

14. A program has an established documented plan for assessing its effectiveness annually as defined by specific outcomes (V.I.2.). (Nurse Aide program)

The Commission found that the institution has not demonstrated compliance with the above standard because the institution's Program Effective Plan (PEP) for the Nurse Aide program did not evidence that an annual assessment of the effectiveness of the instructional delivery method and curriculum had been completed as required in (f) and (g) of standard, V.I.2. According to the institution's response, it conducted its last curriculum review on July 31, 2020.

15. Ensure sufficient facilities, equipment, technology, budget, staffing, and other resources to support distance education offerings and their growth (IX.C.3. per the *Accreditation Manual* updated January 1, 2024; formerly IX.C.5.). (Medication Aide and Nurse Aide programs)

The Commission found that the institution has not demonstrated compliance with the above standard because the institution did not provide evidence of sufficient budgetary resources for the Medical Aide and Nurse Aide programs. The institution's narrative response indicated that budget changes had been made, but the supporting evidence referenced was not included in the response. The institution must maintain the resources necessary to support distance education offerings and their growth (e.g., facilities, equipment, technology, budget, staffing, etc.).

16. Distance education faculty engage students in timely, regular, and substantive interactions within the distance education environment (IX.B.2. per the *Accreditation Manual* updated January 1, 2024; formerly IX.E.2.b.). (Medication Aide and Nurse Aide programs)

The Commission found that the institution has not demonstrated compliance with this standard because the institution did not evidence that the distance education faculty in the Medication Aide and Nurse

Aide programs engage students in timely, regular and substantive interaction in the distance education environment. In its December 2023 response, the institution stated its plans to engage in more interactions within the discussion threads of the distance education courses; however, the institution did not provide evidence that this plan had been implemented. The documents reviewed during the visit and in the December 2023 response do not demonstrate academic engagement between faculty and students in the course materials (e.g., assessment of and feedback on coursework, informative response to questions about course content or competencies, or in a facilitated discussion of course content).

17. Publish the technology resources required for successful program or course completion (IX.H.3.). (Medication Aide and Nurse Aide programs)

The Commission found that the institution has not demonstrated compliance with this standard because the institution's technical requirements for students to succeed in the distance education programs, as published in the catalog, are limited to "a working computer, basic knowledge of Microsoft Office suite and a reliable Internet service." These requirements do not include any specific information about the technical hardware or software needed for students to connect to the institution's learning management system to support interaction and engagement in learning activities. The institution's narrative response indicates only "that it is unable to visit each student's home to verify the capabilities of a personal computer."

Appeal of Action, Notice of Intent to Appeal and Required Fees

If the institution wishes to appeal the action of the Commission, it may do so by filing its Notice of Intent to Appeal online via [DropBox Commission Responses](#) using file name, "**Mid-America_Intent_to_Appeal**" for receipt by **February 26, 2024** (within 10 days of the date of this letter). Upon receipt of the institution's intent to appeal, the institution will be assessed a non-refundable \$5,000 appeal fee plus an Appeal Hearing expense deposit of \$10,000, which must be remitted electronically within five business days. Failure to remit timely payment of the fees may hinder confirmation of the appeal.

Should the institution elect not to appeal, the decision to deny the application will be effective as of February 26, 2024, and the institution may not reapply to ABHES for accreditation within one year from that date.

Written Statement of Grounds for Appeal

The appeal materials, consisting of a complete written statement of the grounds for its appeal based on the Commission's findings and reasons, is due within **45 calendar days** from the date of the Commission's written decision in this letter dated February 14, 2024. The institution should review carefully all procedures governing its appeal, in accordance with the procedures found in III.E.3. of the *Accreditation Manual*. Note that the appeal is based upon the information available to the Commission at the time of its action. **Unless specifically provided for in III.E.3.g., the Appeals Panel has no authority to consider evidence outside of the record considered by the Commission at its January 2024 meeting. The institution has the burden of demonstrating that the action of the Commission was not supported by the record or was otherwise erroneous.**

Appeal Submission Requirements

Should the institution wish to appeal, the appeal document, including a cover letter, narrative, and exhibits, must be submitted to ABHES online via [DropBox Commission Responses](#) by **April 1, 2024** (within 45 calendar days of the date of this letter) in accordance with the instructions in [Preparing Your Response](#).

It is imperative that the institution use the name, Mid-America_RSP to Feb 2023 Denial APPEAL Letter_42024.

Required Submissions

The institution is directed to submit the following:

By **February 24, 2024**, the institution must submit, online via [DropBox Commission Responses](#) a student disclosure informing enrolled and prospective students of the Withdrawal/Denial action. Per III.C.8. of the *Accreditation Manual*, the institution must disclose this adverse action to deny the application for initial accreditation to all current and prospective students **within seven business days of receipt of this letter**.

The U.S. Department of Education, the appropriate State licensing or authorizing agency, the appropriate accrediting agency, and the public have been notified of this action to deny the institution's accreditation and that the action is subject to appeal.

If you have any questions concerning this correspondence, please contact me at (301) 291-7550.

Sincerely,



India Y. Tips
Executive Director

c: Crystal Puderbaugh, Kansas Board of Regents
Carol Moreland, Kansas Board of Nursing
Laura Howard, Kansas Department of Aging and Disability Services