

## CHCF CHIP Summary

**Name, Degree:** Karen Jazmin, RN

**Professional Title, Organization:** Director – Ambulatory Care & Service Lines, Stanford Health Care

**CHIP Title:** Promotional Ladder for Ambulatory Care Medical Assistants at Stanford Health Care

**Project Description:** I wanted to encourage professional growth, increase operational contributions, and improve staff retention for the medical assistants in ambulatory care across the organization. This project was personally important to me because 90% (525 out of 584) of the medical assistants in Stanford Health Care are women and women of color. The goal of the project was to develop a fair, realistic, and inclusive promotional ladder to incentivize medical assistants in the ambulatory care setting at Stanford Health Care.

### Key Findings and Lessons Learned:

- The current Medical Assistant promotional ladder is a job description, not a professional development ladder
- Medical assistant turnover rate at Stanford Health Care is at 18%
- My CHIP worked on creating a ladder modeled to the successful existing clinical nurse ladder with the focus on operational contribution rather than clinical expertise
- I quickly learned that I needed to form a taskforce consisting of leaders and medical assistants of all levels in different departments to help develop the promotional ladder
- I also learned that keys to the success of my CHIP are having a sponsor in the organization who can support my CHIP and the buy-in of the medical assistants to initiate this change
- The new draft of the medical assistant promotional ladder has been shared to the ambulatory care leadership for approval

### Next Steps:

- Collaborate with HR for discussion on medical assistant job description, promotional ladder, and compensation analysis findings
- A post implementation of the ladder turnover rate assessment to show if rate decreases from the current 18% and quantify organizational savings in \$ for the reduction in turnover
- I have already received requests to do similar work for other roles in the organization – patient administrative specialist (PAS) and patient flow coordinators (PFC). Ultimately, would like to scale this project into those roles as well