Amarillo College Radiography

Business Leadership Meeting Agenda

Date: 4/30/2024

Call to Order- Chairperson: Mary Booth

- I. Approval of Previous Minutes
- II. Health Sciences Advisor Amanda Mckee
- III. Student Report: Austin Harper, Emma Tow
- IV. Jordan Ramos Perkins Community Liaison,
- V. Imelda Saavedra Coordinator Employer Relations HSI STEM
- VI. Ryan Francis Coordinator Perkins Activities
- VII. Becky Burton Associate Vice President of Academic Affairs
- VIII. John Smoot Executive Director of Healthcare Simulation
- IX. Melissa Burns Director of Continuing Healthcare Edu.
- X. Affiliation Reports:
 - a. Community Representative Debi Schmidt
 - b. Advanced Imaging Lori Lockridge
 - c. Amarillo Bone & Joint Clinic Dana Hockaday
 - d. Amarillo Diagnostic Clinic Lynda Williams
 - e. Baptist St. Anthony's Hospital Kassidy Underwood
 - f. BSA Urgent Care Center Karen Chavez
 - g. Golden Plains Hospital Michelle Ahlden
 - h. Hereford Regional Medical Center Amanda Rodriguez
 - i. Moore County Hospital Zane Pratt
 - j. Northwest Texas Hospital Anita Steinmaier
 - k. Open Air MRI Ashley Hanks
 - I. Pampa Regional Medical Center Mary Booth
 - m. VA Hospital Ashley Conger
 - n. Northwest Texas Hospital Physician's Group LeeAnn Taylor
- XI. Director's Report: Michael Hart
 - a. Mission Statement/ AC 2025 Strategic Plan
 - b. Resource availability
 - c. Current Students
 - d. AC Radiography Program
 - i. Annual Report (JRCERT)
 - ii. Program Effectiveness (JRCERT)
 - iii. ASRT Radiography Curriculum; ARRT Didactic and Clinical Competency Requirements, Exam Content Specifications, Task Inventory 2022
 - e. Radiography Outcomes Assessment Committee/Outcomes Assessment Data
 - i. Follow up-Radiography Outcomes Assessment Committee meeting
 - ii. Discussion
 - f. Application Process
- XII. Amarillo College Faculty, Staff Reports
 - a. Jamie Smith
 - b. Jim Huse
- XIII. Dean of Health Science-Kim Boyd
- XIV. Adjournment

Advisory Committee Minutes

PROGRAM COMMITTEE NAME:		Radiography	Radiography					
CHAIRPERSON: Mary Booth		ooth						
М	EETING DATE: 4-30-203	24 MEETING TIME: 7:00 AM	MEETING PLACE:	Amarillo Colleg	e West Campus			
RE	CORDER: Janet Ba	rton	PREVIOUS MEETING:	2024				
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			MEMBERS PRESENT					
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	NAME	TITLE	EMPLOYER INFO	PHONE	EMAIL			
	Ashley Conger	R.T.(R)	VA	355-9703	ashley.conger@va.gov			
	Dana Hockaday	R.T.(R)	ABJC	341-6674	dhockaday@abjc.net			
Х	Anita Steinmaier	R.T.(R)	NWTH	351-5717	asteinmaier@gmail.com			
	Zane Pratt	R.T.(R)	Moore County Hospital	935-7171	zpratt@mchd.net			
	Mary Booth	R.T.(R)	Pampa Regional Hospital	663-5770	mbooth@primehealthcare.com			
Χ	Kassidy Underwood	R.T.(R)	BSA	212-2065	kassidy.underwood@yahoo.com			
	Michelle Ahlden	R.T.(R)	Golden Plains Community	467-5700	michelle.ahlden@goldenplains.org			
Х	Lynda Williams	R.T.(R)	ADC	358-0200	lynda.williams@bsahs.org			
	Karen Chavez	R.T.(R)	BSA Urgent Care	212-4835	Karen.chavez@bsahs.org			
Х	Amanda Rodriguez	R.T(R)	Hereford Regional Medical	364-2141	amanda.rodriguez@dschd.org			
Х	Alex Ocampo / Ashley Hanks	R.T.(R)	Open Air MRI	353-8333	bigalouno1@yahoo.com			
Х	Lori Lockridge	R.T.(R)	Advanced Imaging	351-8480	lolock85@gmail.com			
Х	Leeann Taylor	RPA	NWTH Physicians Group	806-681-2264	leeann.taylor@yahoo.com			
	BSA Imaging Management	Mgmt.	BSA	212-2062	kristy.reynosa@bsahs.org			
Х	NWTH Imaging Management	Mgmt.	NWTH	351-5715	shelly.price@nwths.com			
Х	Debi Schmidt	Community Rep.		236-3872	d.schmidt@thewellhealthcenter.org			
		E	X-OFFICIO'S PRESENT					
Х	Kim Boyd	Dean of Health Professions	AC	806-354-6060	kmboyd@actx.edu			
Х	Melissa Burns	Director CCHCE	AC	806-356-3650	mdburns@actx.edu			
Х	Ryan Francis	Coordinator Perkins Activities	AC	806-335-4229	rfrancis@actx.edu			
Х	Linda Munoz	Dean of Employer Engagement and	AC		lmunoz@actx.edu			
Х	Amanda Mckee	Advisor	AC	806-354-6007	agmckee@actx.edu			
Х	John Smoot	Director of Simulation Center	AC		jcsmoot@actx.edu			

AGENDA ITEM	ACTION D	ISCUSSION INFORMATION	<u> </u>	RESPONSIBILITY
Call to Order	Meeting was called to order		-	Mary Booth
				,
Approval of Minutes	Mary asked for approval of prev	vious minutes		Lynda Williams 1 st , Lori Lockridge 2 nd All approved
Health Science Advisor Report	Amanda Mckee – Amanda state students, making sure everythin		•	
Student Report	Austin Harper 2 nd year – Austin stwo when a family member pass of days. Emma Tow 1 st year-Emma stated was caught off guard. Emma ask evaluations. Jamie stated CIs do with the techs. Emma also broug policy is by facility and dress cod stringent rule.			
Director's Report	Michael Hart – Michael reviewed Strategic Plan. Michael talked ab students: Tutoring, Library, the Laccess to computers, counseling student capacity is 52. They have sent on 10-5-23. Interim report i 3 rd quarter of 2029. Program Effe always a year behind. Job Placen 95.7%, Grad Rate is 90.2% 5-year 96.3%. ASRT Curriculum/ ARRT u Assessment Committee met on 3 Continue using capstone for ARR pocket for this. Look at adding to *Reviewed and discussed Program PowerPoint and Program Effectional 1: Monitory Program Effectional 2: Graduate will be clinically Goal 3: Graduate will display con Goal 4: Graduate will display crit Goal 5: Graduate will exhibit pro	out the resources that are a Underground for students to center, the ARC. Michael state 22 students Completing. Are side 3rd quarter of 2025. Note tiveness five-year avg. is 88 ment 2022 about 95.5%, Progravg. Employment and gradusing 2022 on five-year cycle. 3-6-24 — reviewed program extra prep exams. Students currol fees. The am Effectiveness Data (see a siveness Data Sheet) iveness Data. The competent of the complete of the competent of th	vailable to study and have ated that the nual Report was ext site visit will be 3.3. Reporting is gram Completion is uation rate is affectiveness. Ently pay out of attached	

	Overall Analysis: program staff continue to work as a group and with the	
	Radiography Outcomes Assessment committee to strengthen/adapt	
	measurement tools and related benchmarks to ensure a strong assessment plan.	
	Striving for Student/Graduate success: Discussed some changes that were	
	implemented with Goal 1, 2, & 4	
	, , ,	
Affiliation Reports	Debi Schmidt – Community Representative –	
	Lori Lockridge – Advanced Imaging - Lori stated her student is great.	
	Dana Hockaday – Amarillo Bone and Joint - Things are good	
	Kassidy Underwood-BSAHS- Kassidy stated ER moved. Students go to	
	Ware Tower	
	Karen Chavez – BSA Urgent Care- Everything is good	
	Amanda Rodriguez – Hereford Regional Medical Center – Amanda stated things	
	are good.	
	Zane Pratt – Moore County Hospital – Zane stated the students are doing	
	really good.	
	Anita Steinmaier – NWTHS- Anita stated the students are struggling with	
	sterile precautions. For the most part, they are doing good.	
	Shelly Price – NWTHS- Shelly mentioned we need to take more students.	
	Also, students would get more exposure going to other facilities. Have	
	students at clinicals days and evenings. Shelly asked if the program could accept	
	28 students. Michael stated JCERT caps at 52. Shelly mentioned she lost	
	three first year students over the holiday. Can regional facilities help purchase	
	equipment? Kim Boyd stated that these are conversations we need to	
	have. Look at our admissions process. House Bill 8 gives funding for	
	completers now (complete 3 years). We are working on a Periop 101 for	
	Surgical Tech to help with the shortages. Nursing and Surge Tech students	
	can be hired by the facilities. Kim stated the simulation center might help	
	with the situation. Ryan Francis stated this is the perfect example of how BLCs	
	should work. Good discussion.	
	Ashley Hanks - Open Air MRI – Everything is good.	
	Mary Booth - Pampa Regional Hospital — no issues, students are doing good	
	LeeAnn Taylor -NWTXHS Physicians Group — LeeAnn stated she had a good	
	group of students.	
	Lynda Williams – Amarillo Diagnostic Clinic- No issues	
Director of CCHCE	Melissa Burns – Melissa mentioned the Radiography Symposium. She stated if	
	the members are interested having the event, let her know and she will get it set	
	up. When the simulation center is finished, they can have events there.	
Dean of Health Sciences Report	Kim Boyd - talked about the Standardized patients for the Sim Center. Student	
Dean of ficultif sciences report	tained about the Standardized patients for the Sim Center. Stadent	

	thought this was a good idea. New funding plan from the state will be on	
	completers. We need to work on retention. Currently we have a 70% completion	
	rate. Kim mentioned that we get funding from Perkins Grant. We have to ensure	
	programs are teaching student competencies. Kim handed out the QR Code for	
	the members to vote on competencies. Another meeting needs to be scheduled	
	in the fall to discuss the vote.	
Executive Director of Simulation	John Smoot – AC is creating our own simulation center on west campus Building	
	B. Radiography might be able to hold inter-professional events once it is built.	
	State of the Art facility. Immersive rooms, VR Room. When students apply for	
	programs, we can give them a tour of the facility. Equipment is being purchased	
	with Perkins Grant funds. Michael asked about C-arm and portable machine.	
	John stated they are looking into this. Question was asked if facilities can donate	
	equipment.	
Perkins Community Liaison	Jordan Ramos – Men in Healthcare event on West Campus. High School Juniors	
	and Seniors interested in Healthcare.	
Coordinator Perkins Activity	Ryan Francis - Ryan explained the purpose of the Perkins Grant – it is to help	
	buy equipment for the Health Sciences programs. We need feedback from the	
	committee members to ensure the curriculum is being followed and using	
	proper tools and technologies. The members will receive voting sheet about the	
	competencies and then then the group will meet again in person to talk about	
	the scores. Supported by house Bill 8.	
Dean of Employer Engagement &	Linda Munoz- Linda stated the Perkins grant is one of the longest running federal	
Experiential Learning	grants supporting high school and college technical education. 70% goes to TEA	
	to distribute to high schools statewide and 30% goes to the higher ed board to	
	distribute to all community colleges in Texas. Perkins is evaluated by the state	
	through three measures: one is non-traditional enrollment. For example, men	
	and women in nontraditional fields. In the future, it is possible that colleges will	
	be funded on our success in three evaluation points. We do not do well on	
	genders in nontraditional fields. What are we doing to ensure that more men	
	are engaged in radiography?	
Adjournment	Meeting Adjourned : 8:25 AM	
Date: 6-25-2024	Executive Secretary Signature: Qanst Barton	Next Meeting: Spring 2025

Radiography Spring 2024 (4/30/2024) BLC (Advisory Board) Meeting



Welcome



CALL TO ORDER

Chairperson: Mary Booth

APPROVAL OF MINUTES

Distributed before start of meeting.

REPORTS

AC Reports

- Health Sciences Advisor Amanda Mckee
- Student Report Austin Harper, Emma Tow
- Jordan Ramos Perkins Community Liaison
- Imelda Saavedra Coordinator Employer Relations HSI STEM
- Ryan Francis Coordinator Perkins Activities
- Becky Burton Associate Vice President of Academic Affairs
- John Smoot Executive Director of Healthcare Simulation
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Affiliation Reports

- Community Representative
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- Hereford Regional Medical Center

- Moore County Hospital
- Northwest Texas Hospital
- Open Air MRI
- Pampa Regional Medical Center
- VA Hospital
- NWTH Physician's Group

DIRECTOR REPORT

Radiography Program Mission Statement/AC 2025 Strategic Plan

Radiography Program Mission Statement

To provide a comprehensive educational environment that will prepare the radiography graduate to effectively engage in the daily challenges and responsibilities required of an competent and professional entry level radiographer

AC 2025 Strategic Plan

- Completion
- Align degrees and certificates with Labor Market Demand
- Learning
- Love Your Neighbor
- Financial Effectiveness

Resource Availability

- Advocacy & Resources Center
 - Multiple Resources for students (i.e. food & childcare)
- The Underground (new high-tech hub/interactive learning center)
 11,000 square feet of latest technology-Located on Washington Street Campus
- West Campus Tutoring/Outreach Center
- West Campus Computing Center
- West Campus Library
- Professional (SSS program) & Peer Radiography Tutor



Current Students

■ Cap: 52 per JRCERT

- Students set to complete SP2024: 22
- Students set to complete SP 2025: 24

■ New cohort of 26 will be accepted to start 8/19/2024

AC Radiography Program

- Annual Report submitted to JRCERT
 - Submitted 10/5/2023
 - Accepted with no further action required 10/26/2023
- Current Program Effectiveness Data is posted on the AC Radiography web site
- Interim Report, projected submission, third quarter of 2025
- Next site visit tentatively in third quarter of 2029

Program Effectiveness Data (as posted on AC

Radiography web site)

Credentialing Examination Rate	Number passed on 1 st attempt divided by number attempted within 6 months of graduation		
Year	Results		
Year 1- 2018	18 of 21; 86%		
Year 2- 2019	21 of 22; 95%		
Year 3- 2020	20 of 24; 83%		
Year 4- 2021	19 of 21 of; 90%		
Year 5- 2022	20 of 23; 87%		
Program 5-Year Average	98 of 111; 88.3%		

Program Effectiveness Data (as posted on AC

Radiography web site)

Job Placement Rate	Number employed divided by number actively seeking employment within 12 months of		
	graduation		
Year	Results		
Year 1-2018	20 of 22; 91%		
Year 2-2018	21 of 22; 95%		
Year 3-2020	24 of 24; 100%		
Year 4-2021	19 of 21; 90%		
Year 5-2022	23 of 23; 100%		
Program 5-Year Average	of; 95.5%		

Program Effectiveness Data (as posted on AC

Radiography web page 2021; previous: 2020 96%)

Program Completion Rate	Number graduated divided by number started the program		
Year	Results		
Year 1-2022	22 of 23		
Annual Completion Rate	95.7%		

Five Year Average for Program Effectiveness (graduate rate is report as year, not as 5-year totals)

Year	Graduation Rate	ARRT 1 st Time Pass Rate	Employment
2018	22 of 26; 85%	18 of 21; 86%	20 of 22; 91%
2019	23 of 26; 88%	21 of 22; 95%	21 of 22; 95%
2020	24 of 25; 96%	20 of 24; 83%	24 of 24; 100%
2021	20 of 23; 87%	19 of 21; 90%	19 of 21; 90%
2022	22 of 23; 95.7%	20 of 23; 87%	23 of 23; 100%
5 Year Average	111 of 123;	98 of 111;	107 of 112;
	90.2%	88.3%	95.5%

Five Year Effectiveness Data (**report FA 2024 in

Annual Report)

Year	Graduation Rate	ARRT Pass Rates	Employment Rates
2019	23 of 26; 88%	21 of 22; 95%	21 of 22 eligible; 95%
2020	24 of 25; 96%	20 of 24; 83%	24 of 24 eligible; 100%
2021	20 of 23; 87%	19 of 21; 90%	19 of 21 eligible; 90%
2022	22 of 23; 95.7%	20 of 23; 87%	23 of 23 eligible; 100%
**2023	**19 of 21; 90.5%	**18 of 19; 94.7%	**18 of 19 eligible; 94.7%
5 Year Average	108 of 118; 91.5%	98 of 109; 89.9%	105 of 109 eligible; 96.3%

ASRT Curriculum/ARRT

- ASRT Radiography Curriculum
 - Adopted 2022 (on a five-year cycle)
 - Required by JRCERT to be implemented by 9/1/2023
 - Starting FA 2023, M. Hart and
 J. Smith revised course
 objectives/outcomes to match
 the ASRT 2022 Curriculum

Have already been using and continue to use:

- ARRT Didactic and Clinical Competency Requirements-2022 version
- ARRT Examination Content
 Specifications-2022 version
- Task Inventory-2022 version

RADIOGRAPHY OUTCOMES COMMITTEE/OUTCOME S ASSESSMENT DATA

Radiography Assessment Committee Meeting

- Held 3/6/2024
- Discussed the Outcomes Assessment Plan 2023 (August 2021-August 2022)

Goal 1: Monitor Program Effectiveness

Goal 1: Monitor Program Effectiveness (updated: 10/6/2023-mgh)

Goal 1: Monitor Program Eπectiveness (updated: 10/6/2023-mgn)						
Student Learning Outcome (SLO)	Measurement Tool	Benchmark	Timeframes	Group/Person Responsible	Results	
1. Students will complete the program and take the ARRT certification exam.	 Satisfaction of all program requirements. Completion of the ARRT certification exam. 	 No less than 75% of students will complete the program in all required courses. No less than 75% of graduates will successfully complete the ARRT exam on first attempt. 	 During the program/ Within 12 months Within 6 months of graduation 	 Program Director Program Director 	1.N=26 started program (3 exceptions (non-academic), per 6.1), 22 completed on time, 95.7% completion rate 2. N=23 tested, 20 passed 1st attempt, 87% 1st time pass rate	
Program will assess graduate satisfaction.	1. Item #30 from Radiography Graduate Survey.	1. Average of 4.0 (5.0 Likert).	1. Within 12 months of graduation	1. Program Director	1. Avg= 4, N=20 returned (17 answered #30)	
3. Program will assess employer satisfaction.	1. Item #21 from Employer Survey.	1. Average of 3.0 (4.0 Likert).	1. Within 12 months of graduation	1. Program Director	1. Avg=3.75, N=12 returned	
4. Program will assess employment rate.	1. Radiography Graduate Survey.	1. Within 12 months of graduation, 75% of graduates seeking employment in the field will find employment.	1. Within 12 months of graduation	1. Program Director	1. N=23 employed, 100% employment rate (N=24 completed SP 22, 1 not seeking Rad. Tech employment)	

Analysis/Revisions/Recommendations (Goal 1: Monitor Program Effectiveness):

- SLO 1, Tool #1: We are pleased with the 95.7 % completion rate in 2022. Five-year comparison: 2018: 85%, 2019: 88%, 2020: 96%, 2021: 87%, 2022: 95.7% 5-year average: 90.2%; SLO 1, Tool #2: 2022 pass rate 87%. We continue to utilize Corectec Radiography review during RADR 2235 to help students prepare for the exit exam and the ARRT. Five-year comparison: 2018: 86%, 2019: 95%, 2020: 83%, 2021: 90%, 2022: 87% 5-year average: 88.3%
- SLO 2: <u>Five-year comparison</u>: Met benchmark in 2022, which was an improvement from 2021. Although not measured, communications skills, critical thinking, & prepared for ARRT exam questions had 4.7, 4.5, & 4.0 averages respectively on the 5.0 Likert scale. We believe these results will help graduates be successful technologists.
- SLO 3: Employers continue to be pleased with AC graduates work performance, 2022 responses average 3.75 (4.0 Likert). <u>Five-year comparison</u>: 2018: 3.91, 2019: 3.9, 2020: 3.9, 2021: 3.8, 2022: 3.75.
- SLO 4: Five-year comparison: AC Radiography graduates continue to have a robust employment rate. 2018: 91%, 2019: 93%, 2020: 100%; 2021: 90%, 2022: 100%; 5-year average: 95.5%

Goal 2: Graduate will be clinically competent.

Goal 2: Graduate will be clinically competent.						
Student Learning Outcome (SLO)	Measurement Tool	Benchmark	Timeframes	Group/Person Responsible	Results	
Student will provide appropriate radiation safety for patients and self.	1. Item 10 from clinical evaluation	1. 95% of students will score ≥4.0 (5.0 Likert)	1. 3 rd & 5 th semester	1. Clinical Coordinator	1. 3^{rd} sem. N=38, 36 scored 5, 2 scored 4; 5^{th} sem. N=73, 72 scored 5, 1 scored 3, 99.1 % scored ≥ 4	
	2. Radiation Safety assignment RADR 2313	2. Average score of ≥ 80%	2. 1 st semester (FA 21)	2. Didactic instructor	2. Average score=83.2; 16 scored ≥ 80%	
2. Students will recognize appropriate positioning skills and produce diagnostic images.	1. Item #15 from clinical evaluation	1. 95% of students will score ≥4.0 (5.0 Likert)	1. 5 th semester (SP 22)	1. Clinical Coordinator	1. N=73, 68 scored 5, 4 scored 4, 1 scored 2, 98.6% scored ≥ 4	
	2. RADR 2235, Procedures Exam, questions (#3 (humerus), 11 (abd.), 30 (pelvis), & 35 (calcaneus))	2. ≥ 80% of questions will be answered correctly	2. 5 th semester (SP 22)	2. Didactic instructor	2. 84.7% of questions were answered correctly; N=23 took exam	

Analysis/Revisions/Recommendations (Goal 2: Graduate will be clinically competent):

- SLO 1, Tool #1: Benchmark surpassed, we continue to be pleased with results. SLO 1, Tool #2: This RADR 2313-Radiation Safety Assignment format was first used FA 2020. 2021 surpasses the benchmark for the first time. Instructor will continue to help students raise grades higher by continuing non-graded activities prior to the assignment.
- SLO 2, Tool #1: Benchmark surpassed, we continue to be pleased with results for this tool.; SLO 2, Tool #2. Benchmark surpasses. RADR 2235 Procedures Questions: 84.7% of the preselected questions were answered correctly. The pelvis question did have a low success rate, however, with some wording clarification, the question should better assess students' knowledge. Instructor will work on clarifying question wording; Five-year comparison: SP 2019: 88% SP 2020: 83% SP 2021: 91.9% SP 2022: 84.7%

Goal 3: Graduate will display communication skills

Goal 3: Graduate will display communication skills.						
Student Learning Outcome (SLO)	Measurement Tool	Benchmark	Timeframes	Group/Person Responsible	Results	
Student will demonstrate verbal skills when relating to patients.	1. Item 7 & 16 from Clinical Evaluation.	 95% of students will score ≥4.0 (5.0 Likert) 	1. 1 st , 2 nd , 4 th , 5 th semesters	1. Clinical Coordinator	1. 1^{st} sem. N=84, 72 scored 5, 10 scored 4, 2 scored 3, 97.6% \geq 4; 2^{nd} sem. N=110, 90 scored 5, 20 scored 4, 100% scored \geq 4; 4^{th} sem. N=148, 131 scored 5, 12 scored 4, 2 scored 3, 3 scored 2, 96.6% \geq 4; 5^{th} sem. N=146, 135 scored 5, 9 scored 4, 2 scored 3, 98.6% \geq 4	
	2. Successful completion of Oral portion of the Patient Interview/Screening & X- ray Beam Assignment RADR 1313	2. Students will score ≥ 80%	2. 2 nd semester (SP 22)	2. Didactic instructor	2. 95% of students scored ≥ 80% (n=20)	
2. Student will demonstrate written communication skills.	 Successful completion of Written portion of Case Study RADR 2305 Successful completion 	1. Students will score ≥ 85%	1. 4 th semester (FA 21)	1. Didactic Instructor	1. 100% of students scored ≥ 85 % (N=24); Starting FA 2022 this assignment will be changed/modified.	
	written portion of the Patient Interview/Screen & X-ray Beam Assignment RADR 1313	2. Students will score ≥ 80%	2. 2 nd semester (SP 22)	2. Didactic Instructor	2. 90% of students scored ≥ 80% (n=20)	

Analysis/Revisions/Recommendations (Goal 3: Graduate will display communication skills):

- SLO 1, Tool #1: Benchmark was surpassed in all timeframes for this measurement tool. SLO 1, Tool #2: Only one student did not make \geq 80% on this assignment, we continue to be pleased with student outcomes for this tool.
- SLO 2, Tool #1: Benchmark surpassed. The assignment for this SLO was changed in fall 2022, to better assess student learning. We will track new data beginning 2022; SLO 2, Tool #2: The assignment format is still relatively new, we would like to have 100 % of students ≥ 80% instructor will continue with student engagement techniques in preparation for the assignment.

Goal 4: Graduate will display critical thinking/problem-solving skills.

Goal 4: Graduate will display critical thinking/problem-solving skills.					
Student Learning Outcome (SLO)	Measurement Tool	Benchmark	Timeframes	Group/Person Responsible	Results
Students will be able to evaluate radiographic images for acceptability.	1. Image Acceptability/Critique Assignment RADR 1202 & RADR 1250	 The students will score an ≥ 85% in 1202 and average score of ≥ 90% in 1250 2.95% of students will score ≥4.0 	1. 3 rd semester & 5 th semester (SP 22 & SU 22) 2. 5 th semester (SP 22)	Didactic instructor 2. Clinical	1. Results: SP 22 (5 th semester) RADR 1250; AVG=83.4, N=22. #1: $5 \ge 90\%$; #2: $6 \ge 90\%$; #3: $11 \ge 90\%$; #4: $6 \ge 90\%$ Results SU 22 (3 rd semester) RADR 1202 Overall average: 81% (N=19) #1: $2 \ge 85\%$; #2: $6 \ge 85\%$; #3: $15 \ge 85\%$; #4: $13 \ge 85\%$ 2. N=73, 61 scored 5, 11 scored 4, 1 scored 3, $98.6\% \ge 4$
	Evaluation in Practicum V	(5.0 Likert)	2.5 Semester (SP 22)	Coordinator	4, 1 Scoreu 3, 96.0% 2 4
2. Students will demonstrate adaptive behavior for critical or stressful scenarios.	1. Item 11 on Clinical Evaluation in Practicum V 2. Successful completion of Oral portion of Case Study RADR 2305	 1. 95% of students will score ≥4.0 (5.0 Likert) 2. The student will score ≥ 85% 	 5th semester (SP 22) 4th semester (FA 21) 	 Clinical Coordinator Didactic Instructor 	 N=73, 61 scored 5, 11 scored 1 scored 3; 98.6% scored ≥ 4 91.6% of students scored ≥ (N=24)

Analysis/Revisions/Recommendations (Goal 4: Graduate will display critical thinking/problem-solving skills):

- SLO 1, Tool #1. The measurement tools in RADR 1202 & 1250 benchmark was not met in 2022. We continue adjust/modify this assignment to ensure the SLO, Measurement tool and benchmarks are appropriately aligned. SLO 1, Tool #2. The department is pleased with these results. Five-year comparison: SP 2018: 100%; SP 2019: 98.4%; SP 2020: 100%; SP 2021:100%; SP 2022: 98.6% scored no less than 4 (5.0 Likert)
- SLO 2, Tool #1: We strive to have students demonstrate adaptive behavior in critical/stressful scenarios, therefore we are pleased with the result of 98.6% ≥ 4 and the four-year comparison, SP 2019: 100%, SP 2020: 100%, SP 2021 100%, SP 2022 98.6% scored ≥ 4. SLO 2, Tool #2: We are pleased with the results, however, to better measure this SLO, the instructor is considering to modify the oral portion of this assignment beginning in FA 2023. Four-year comparison: FA 2018: 95%, FA 2019: 95%, FA 2020 90.9%, FA 2021 91.5% scored ≥ 85%.

Goal 5: Graduate will exhibit professional development.

Goal 5: Graduate will exhibit profes	sional development.				
Student Learning Outcome (SLO)	Measurement Tool	Benchmark	Timeframes	Group/Person Responsible	Results
1. Students will be able to demonstrate conduct as outlined in the ARRT "Code of Ethics".	1. Item 14 on Clinical Evaluation in Practicum V	1. 95% of students will score ≥4.0 (5.0 Likert)	1. 5 th semester (SP 22)	1. Clinical Coordinator	1. N=73, 73 scored 5, 100% scored ≥ 4
	2. RADR 1203, Five Pre-selected questions on Exam 4	2. ≥ 80% of questions will be answered correctly	2. 1 st semester (FA 21)	2. Didactic Instructor	2. 95.48% of questions were answered correctly (N=22)
2. Students will be able to differentiate between various modalities and professional organizations.	1. RADR 1201, Five Pre-selected questions on Exam 1	1. ≥ 80% of questions will be answered correctly	1. 1 st semester (FA 21)	1. Didactic Instructor	1. 74% of questions were answered correctly (N=20); 100 questions attempted, 74 questions answered correctly, 26 questions answered incorrectly.
	2. RADR 2309-Will complete modality paper	2. Students will score ≥ 85%	2. 4 th semester (FA 21)	2. Didactic Instructor	2. 91.7% of students scored ≥ 85% (N=24). FA 2021 is last semester for the exact assignment format.

Analysis/Revisions/Recommendations (Goal 5: Graduate will exhibit professional development):

- SLO 1, Tool #1: We continue to be pleased with these results. Four-year comparison: SP 2019: 100%; SP 2020, SP 2021 100%, SP 2022: 100 %scored ≥ 4.0. SLO 1, Tool #2. Benchmark surpassed. We are pleased with this relatively new measurement tool (started FA 2019) Comparison data: 2019: 90.9%, 2020: 94.6%, 2021 91.7% answer correctly
- SLO 2, Tool #1: Did not meet benchmark, the 74% reported above is not where we would like to be. If measured individually, three of the five questions had ≥ 85% of questions answered correctly. Instructor will ensure student engagement activities are helping students prepare for these types of questions to help raise our results. SLO 2, Tool #2: 100% of the students did not score 85% FA 2021 is the last semester for this exact exam format, FA 2022 will have new assignment to better assess student learning, new data be collected on new assignment. Four-year comparison: FA 2018: 100%; FA 2019: 96% FA 2020: 90.9%, FA 2021:91.7% scored ≥ 85%

Overall Analysis:

■ The Amarillo College Radiography program staff continue to work as a group and with the Radiography Outcomes Assessment committee to strengthen/adapt measurement tools and related benchmarks to ensure a strong assessment plan.

Striving for Student/Graduate Success

- To help accomplish Goal 2: Graduate will be clinically competent.
- Objective 3.2: Provides a well-structured, competency-based curriculum that prepares students to practice in the professional discipline.
 - Following 2021 site visit, implemented an online Competency Evaluation, that the clinical staff will complete on each student wishing to complete a competency. If the student is successful in completing the competency, the technologist will date and sign the students Competency Profile card (please see attached for documentation). After two unsuccessful attempts, the student will need remediation prior to attempting the competency for the third time. The remediation will be completed by the Clinical Coordinator or Clinical Assistant.

Institution Name: Amarillo College

Program Type: Radiography

Degree Type: Associate in Applied Science (AAS)

Program Effectiveness Data

The following is the most current program effectiveness data. Our programmatic accreditation agency, the Joint Review Committee on Education in Radiologic Technology (JRCERT), defines and publishes this information. Click here to go directly to the JRCERT webpage.

Credentialing Examination: The number of students who pass, on the first attempt, the American Registry of Radiologic Technologists (ARRT) certification examination, or an unrestricted state licensing examination, compared with the number of graduates who take the examination within six months of graduation. The five-year average benchmark established by the JRCERT is 75%.

Credentialing Examination Rate	number passed on 1 st attempt divided by number attempted within 6 months of graduation		
Year	Results		
Year I - 2018	18 of 21 - 86%		
Year 2 - 2019	21 of 22 - 95%		
Year 3 - 2020	20 of 24 - 83%		
Year 4 - 2021	19 of 21 - 90%		
Year 5 - 2022	20 of 23 - 87%		
Program 5-Year Average	98 of 111 - 88.3%		

Job Placement: The number of graduates employed in the radiologic sciences compared to the number of graduates actively seeking employment in the radiologic sciences within twelve months of graduating. The five-year average benchmark established by the JRCERT is 75%.

Job Placement Rate	number employed divided by number actively seeking employment within 12 months of graduation		
Year	Results		
Year I - 2018	20 of 22 - 91%		
Year 2 - 2019	21 of 22 - 95%		
Year 3 - 2020	24 of 24 - 100%		
Year 4 - 2021	19 of 21 - 90%		
Year 5 - 2022	23 of 23 - 100%		
Program 5-Year Average	107 of 112 - 95.5%		

Program Completion: The number of students who complete the program within the stated program length. The annual benchmark established by the program is 75.

Program Completion Rate	number graduated divided by number started the program		
Year	Results		
Year - 2022	22 of 23		
Annual Completion Rate	95.7%		

Striving for Student/Graduate Success

- To help accomplish Goal 1: Monitor Program Effectiveness, SLO 1
 - FA2023, increased ARRT Prep exercises, for first time utilized in RADR 2313 (first semester), 20 questions; fourth semester, increased same type of exercise to wo along with already implemented ARRT Prep exercises
 - SP 2023, increased to 225 to 230 for 3 of 4 ARRT Prep Exam Questions (00 from Corectec and 25-30 by M. Hart). SP 2024, 230 to hopefully 240 on all 4 ARRT prep exams. This mirrors number of questions on ARRT boards exam.
- To help accomplish Goal 4: Produce graduates who display critical thinking and problem-solving skills.
 - Starting FA 2023, M. Hart implemented new critical thinking exercises in RADR 1203, RADR 2313, RADR 2305, RADR 2309; completed similar in RADR 2235 in SP 2024. Gave a set of questions, had students to complete on his or her own with no book or collaboration. Then allow collaboration and books for students to complete. Finally, I go over as class discussion.

Application Process

- Will close 5/31/2024
- 61 have attended meeting and submitted the online application as of 4/29/2024; 141 have submitted the online application
- Still have three informational meetings/video hospital visits remaining

AMARILLO COLLEGE FACULTY, STAFF

Amarillo College Faculty, Staff

- Clinical Instructor- Jamie Smith
- Lab/Clinical Assistant-Jim Huse

Dean of Health Science

Kim Boyd

THANK YOU & ADJOURNMENT