Amarillo College Business and Leadership Councils will ensure to comply with GIPWE Advisory Committee Meeting Minutes by incorporating the following agenda items into the meeting minutes. For more information about the characteristics of these committees, review pps. 7-8 in the GIPWE.

- (1) Identification of committee members (name, title, and affiliation);
- (2) Indication of the committee members' presence or absence from the meeting;
- (3) The names and title of others present at the meeting;
- (4) The signature of the recorder; and
- (5) Evidence that industry partners have taken an active role in making decisions that affect the program as outlined below:
 - a. Evaluating the goals and objectives of the program curriculum;
 - b. Establishing workplace competencies for the program occupation(s);
 - c. Suggesting program revisions as needed;
 - d. Evaluating the adequacy of exciting college facilities and equipment;
 - e. Advising college personnel on the selection and acquisition of new equipment;
 - f. Identifying local business and industry leaders who will provide student with wor-Obased learning experience, employment, and placement opportunities;
 - g. Assisting in the professional development of faculty;
 - h. Assisting in promoting and publicizing the program to the community and to business and industry; and
 - i. Representing the needs of students from special populations as defined in Perkins V.

For recorders/notetakers

Please review the guidelines above and below as you prepare the agenda and/or minutes.

If a motion is made, make note in the section of who made the motion, who seconded, and include results of vote.

If there is no motion or action taken on a discussion or a point in the agenda, note "no action or vote taken" in the section.

Signatures and Routing

Upon completion of the minutes, please send them to advisory board/BLC chair and program chair and/or program coordinator for review and signature. *Include the meeting agenda with the minutes*. Afterwards, send it to Dean for review and final initial before you submit to the library for the electronic archives.

Instructions for Advisory Board / BLCs

Chairperson – appointed by program manager (someone outside of Amarillo College)

Recorder – person taking notes from meeting

Members – Include all members of committee; place an X to left of name if present.

Ex-Officio – Include all other people present. AC faculty, staff, and guests are ex-officio; they do not vote on motions.

"Program Name" Business and Leadership Council Meeting Minutes

CHAIRPERSON: Lynda Williams		
MEETING DATE: 4-8-25	MEETING TIME: 7:00 AM	MEETING LOCATION: AC Allied Health Bldg. West Campus
RECORDER: Janet Barton		PREVIOUS MEETING: 4-30-2024

MEMBERS PRESENT: (P = Present) Add nonmembers to bottom of table with heading "Others Present."

P?	Name and Title (List all)	Business Affiliation	Email	Best contact number
Р	Kristin Ribble	Community Member	Kribble7@gmail.com	806-282-7675
Р	Lynda Williams	ADC	Lγnda.Williams@bsahs.org	806-676-9674
Р	Amanda Rodriguez	HRMC	Rodrigueza348@yahoo.com	806-236-896
Р	Dana Hockaday	Amarillo Bone and Joint	dhockaday@abjc.net	806-884-8156

Р	Kassidy Underwood	Baptist St Anthony's Hospital Xray	Kassidy.urelemood@yahoo.co	817-235-2015	
			m		
Р	Shelly Price	Northwest Texas Hospital Radiography Dir.	Shelly.price@nwths.com	806-678-0544	
Р	Ashley Conger	Veterans Hospital DRT, CI	Ashley.conger@va.gov	806-341-5043	
Р	Mandy Meschke	PRMC Radiography Manager	mreneecll@yahoo.com	806-662-3120	
Р	Anita Steinmaier	Northwest Texas Hospital Xray	asteinmaier@gmail.com	806-351-5717	
Р	Zane Pratt	Moore County Hospital District	zpratt@mchd.net	806-935-7171	
Р	Marie Deaver	Baptist St. Anthony's Hospital DI Mgr.	Marie.deaver@bsahs.org	806-567-2061	
Р	Leandra Hays	Open Air MRI Tech	Leandra.hayes@bsahs.org	806-676-7215	
Α	Michelle Ahlden	Golden Plains Community Hospital	Michelle.ahlden@goldenplain s.org	806-457-5700	
Α	Karen Chavez	Baptist St. Anthony's Urgent Care	Karen.chavez@bsahs.org	806-212-4835	
Р	Amanda Rodriguez	Hereford Regional Medical Center	Amanda.rodriguez@dschd.org	806-364-2141	
		1//			

į	Minutes		
Key Discussion Points	Discussion		
Minutes	Lynda asked for approval of previous minutes Asley 1 st Shelly 2 nd , all approved		
Students	Emma Tow 2 nd year student – Emma asked about lumbar punctions being added. Jamie stated that is not part of AART. Aleaya Lucero 1 st year student – Negatives – Facilities have different Comps/sterile, lidocaine. Some facilities have comps for wheelchair. Need more consensus. Aleaya mentioned Lead/parent holding a child. Positives – self introducing, personal tips and tricks. Aleaya stated she appreciates the Whys. Jamie Smith responded to Aleaya – getting every tech on the same page would be difficult. Committee member asked Jamie to send an email to all. Can review C-spine. It was mentioned that students struggle with Fluoro. Students should be fine as long as they are doing what the tech has asked them to do. Question what are the expected procedures?		
Clinical Site Reports	Kristin Ribble – Community Member – no report Dana Hockaday - Amarillo Bone and Joint – No Issues Kassidy Underwood -BSA – Students need to get parking tags. Also, some students have been on their phones. Jamie stated that the student can be sent home if this happens. BSA – Everything else is good. Anita Steinmaier NWTXH –Anita stated everything is Zane Pratt Moore County Hospital — Zane stated everything is good. Shelly Price NWTX Hospital – Everything is good Leandra Hays -Open Air MRI – Leandra stated everything is good Mandy Meschke – Pampa Regional Hospital – Mandy stated they need PRNS. Ashley Conger – Veterans Hospital – Ashley stated everything is good Lynda Williams – Amarillo Diagnostic Center – No report		
	Amanda Rodriguez – Hereford Regional Medical Center – everything is good Marie Deaver – BSA no report		

	Additional Clinical sites might be required. Fluoroscopy competencies have been a challenge. Program needs to make sure sites have enough repetitions for student practice and competencies. Target for student increase is Fall 2026. May have to be more barium based. Shelly stated she would like to see more students accepted but this is a start. Anita stated she will switch students. Michael reviewed the Radiography mission statement and the AC 2025 Strategic Plan. Resources available to students – The ARC, The Underground, WC Tutoring Center, West Campus Computing Center, West Campus library, WC Tutoring. Current Students: the cap is 52 per JRCERT. 27 students were accepted FA 2024 24 are still in the program. 23 students are set to complete in spring 2025, 25 students are set to complete in spring of 2025. New cohort starts 8-25-2025. Michael presented the Program Effectiveness Data for 2019-2023 Job placement rate for 5 years is 96.3%, Program Completion rates 2023 – 18 of 20 students completed for a 90% completion rate. Program Effectiveness Credentialing Examination Rate for 2019-2023. Five Year average is 98 of 109 89.9% 1st attempt pass rate. The five-year average 2019-2023 graduate rate is 91.4%. The Five-Year Effectiveness Data for 2020-2024 is Graduation Rate 104 of 114 91.2%, ARRT Pass Rates 99 of 109 90.8% pass rate. Employment rates 106 of 109 eligible is 97.2%. The 2025 Radiography Assessment Committee meeting is TBD. The Assessment plan will be discussed and evaluated for possible revisions. Michael presented the Analysis/Revision/Recommendations. (See PowerPoint for all information) for the Radiography Assessment Plan for 2024. Overall analysis – the Radiography program will continue to strive to increase student knowledge and retention. Will take steps to increase results on assignment/tools to help graduate be successful in the Radiologic Sciences professions. There is ongoing analysis and revisions to ensure benchmarks and measurement tools align. Starting in spring 2026 the program is moving t
Faculty Report	Jamie Smith – Faculty/Clinical Coordinator - stated that she sends out policies every year. Please contact her if there are any questions. Jim Huse – PT Faculty/ Lab Assistant – Jim stated he appreciates everyone. Marco Trevizo – Adjunct Faculty – no report

Radiography

Date 4-8-2025

Curriculum Decisions:	N/A		
Other:			
Adjourn:			
Committee Chairperson:	9	MEETING DATE:	NEXT MEETING:
Lundal	llians RTCRXCT(m)	4/8/2025	TBD-5/2026

Committee Chairperson:

NEXT MEETING DATE:	UB/2025	TBD - SP 2026
Recorder's Signature:	05/28/2025	
DEPARTMENTAL CHAIRPERSON SIGNATURE:	DATE:	T-27-2025
DIVISION DEAN'S SIGNATURE	DATE:	05/29/2025
Kim M Boyd		

Radiography Spring 2025 (4/08/2025) BLC (Advisory Board) Meeting



Welcome



AC Radiography BLC Meeting 4/8/2025

- Call to Order Chairperson Lynda Williams
- Approval of Previous Minutes Chairperson 1st 2nd
- Advisor Report Amanda McKee, Leslie McCaslin
- Student Report Emma Tow, Aleaya Lucero

- Affiliation Reports
 - Advanced Imaging
 - Amarillo Bone & Joint Clinic
 - Amarillo Diagnostic
 - BSA Hospital
 - BSA Urgent Care
 - Golden Plains Hospital
 - Hereford Regional Medical Center
 - Moore County Hospital
 - NWTX Hospital
 - Open Air Imaging Center
 - Pampa Regional Medical Center
 - VA Hospital
 - EmCare

DIRECTOR REPORT

Evaluation of Increasing Student Capacity for AC Radiography Program

- Visited with JRCERT office on 4/2/2025
- We have adequate staffing for an increase up to 30 per year (we feel this may need to be incremental) and on paper we have enough clinical space. However, we feel additional clinical sites will be required to help with an increase in students
- Fluoroscopy competencies continue to be a challenge and we want to ensure sites realistically have enough repetitions for students to get practice and then competencies
- We would have a target start in fall 2026 for the increase

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
- 27 accepted FA 2024 (most since I have been director)
 - 24 of those are still in the program
- Students set to complete SP 2025: 23
- Students set to complete SP 2026: 25
- New cohort will start 8/25/2025

AC Radiography Program

- Annual Report submitted to JRCERT
 - Submitted 10/4/2024
 - Reviewed with no further action required as of 10/24/2024
- Current Program Effectiveness Data is posted on the AC Radiography web site
- Interim Report, submission due, 8/27/2025
- Next site visit tentatively in third quarter of 2029

Program Effectiveness Data 2019-2023

(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- 2019	21 of 22; 95%		
Year 2- 2020	20 of 24; 83%		
Year 3- 2021	19 of 21; 90%		
Year 4- 2022	20 of 23; 87%		
Year 5- 2023	18 of 19; 95%		
Program 5-Year Average	98 of 109; 89.9%		

Program Effectiveness Data 2019-2023

(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 1-2019	21 of 22; 95%		
Year 2-2020	24 of 24; 100%		
Year 3-2021	19 of 21; 90%		
Year 4-2022	23 of 23; 100%		
Year 5-2023	18 of 19; 95%		
Program 5-Year Average	105 of 109; 96.3%		

Program Completion Rate 2023

Program Completion Rate	Number graduated divided by number started the program		
Year	Results		
Year 1-2023	18 of 20		
Annual Completion Rate	90%		

Five Year Average for Program Effectiveness 2019-2023 (graduate rate is report as year, not as 5-year totals)

Year	Graduation Rate	ARRT 1 st Time	Employment
		Pass Rate	
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%
2023	18 of 20; 90%	18 of 19; 95%	18 of 19; 95%
5 Year Average	107 of 117; 91.4%	98 of 109; 89.9%	105 of 109; 97.2%

Five Year Effectiveness Data 2020-

2024 **to be reported in FA 2025 in, 2024 Annual Report

Year	Graduation Rate	ARRT Pass Rates	Employment Rates
2020	24 of 25; 95%	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	18 of 20; 90%	18 of 19; 95%	18 of 9 eligible; 95%
**2024	**20 of 23; 86.9%	**22 of 22; 100%	**22 of 22 eligible; 100%
5 Year Average	104 of 114; 91.2%	99 of 109; 90.8%	106 of 109 eligible; 97.2%

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

- 2025 meeting date TBD
- We will analysis, discuss, and revise the Radiography Assessment plan

AC Radiography Outcomes Assessment Plan

- Goal 1: Monitor program effectiveness
- Student Outcomes (SLO)
 - Students will complete the program and take the ARRT certification exam.
 - Program will assess graduate satisfaction.
 - Program will assess employer satisfaction.
 - Program will assess employment rate.
- Goal 2: Produce graduates that are clinically competent
- Student Outcomes (SLO)
 - Students will provide appropriate radiation safety for patients and self.
 - Students will recognize appropriate positioning skills and produce diagnostic images.

AC Radiography Outcomes Assessment Plan

- Goal 3: Produce graduates who display communication skills
- Student Outcomes (SLO)
 - Students will demonstrate verbal skills when relating to patients.
 - Students will demonstrate written communication skills.
- Goal 4: Produce graduates who display critical thinking and problem-solving skills
- Student Outcomes (SLO)
 - Students will be able to evaluate radiographic images for acceptability.
 - Students will demonstrate adaptive behavior for critical or stressful scenarios.
- Goal 5: Produce graduates who demonstrate professional development
- Student Outcomes (SLO)
 - Students will be able to demonstrate conduct as outlines in the ARRT "Code of Ethics".
 - Students will be able to differentiate between various modalities and professional organizations.

RADIOGRAPHY ASSESSMENT PLAN 2024

August 2022-August 2023

Goal 1: Monitor Program Effectiveness

Goal 1: Monitor Program Effectiveness (updated: 10/10/2024-mgh)

Goal 1: Monitor Program Effectiveness (updated: 10/10/2024-mgh)					
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.	1. No less than 75% of students will complete the program in all required courses.	1. During the program/ Within 12 months	1. Program Director	1. N=25 started program (5 exceptions (non-academic), per JRCERT Standard 6.1), 18 completed on time, 90% completion rate (SP 2023)
	2. Completion of the ARRT certification exam.	2. No less than 75% of graduates will successfully complete the ARRT exam on first attempt.	2. Within 6 months of graduation	2. Program Director	2. 95% first time ARRT pass rate N=19 tested, N=18 passed 1 st attempt (SP 2023)
2. 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: 4.41; N=19 returned, N=17 answered question #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: 4.0; N=5 returned, N=3 answered question #21
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. 95% employed in Radiologic Sciences. N=19 completed, N=18 employed

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

- SLO 1, Tool #1: We are pleased with the 90% completion rate in 2023. 5-year comparison: 2019: 88%, 2020: 96%, 2021: 87%, 2022: 95.7%, 2023: 90% 5-year average: 91.45%.
- SLO 1, Tool #2: 2022 pass rate 95%. We continue to utilize Corectec Radiography review, multiple worksheets, & exams during RADR 2235 to help students prepare for the exit exam and the ARRT. Also, in RADR 2235 during spring of 2023, the instructor increased the number of questions with regards to the ARRT preparation exams we take during the exams. This increase more aligns with the 230 questions the graduates will see on the ARRT exam (combined of graded & pilot). 5-year comparison: 2019: 95%, 2020: 83%, 2021: 90%, 2022: 87%, 2023: 95% 5-year average: 89.9%.
- SLO 2: Benchmark surpassed. Average 4.41 surpassed the benchmark & increased from previous 2 years, Five-year comparison: 2019: 4.14, 2020: 4.7, 2021:3.7, 2022: 4.0, 2023:4.41 (5.0 Likert)
- SLO 3: Benchmark surpassed. Employers continue to be pleased with AC graduates work performance, 2023 responses average 4.0 (4.0 Likert). 5-year comparison: 2019: 3.9, 2020: 3.9, 2021: 3.8, 2022: 3.75, 2023: 4.0
- SLO 4: Benchmark surpassed. The AC Radiography program continues to have a stellar employment rate for graduates. 5-year comparison: 2019: 95%, 2020: 100%, 2021: 90%, 2022: 100%, 2023: 95%, with 96.3% program 5-year average.

Goal 2: Graduate will be clinically competent.

Goal 2: Graduate will be clinically comp	etent.				
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. 3rd semester, 97.8% scored ≥ 4.0, N=46 5th semester, 100% scored ≥ 4.0, N=55
	2. Radiation Safety assignment RADR 2313	2. Average score of ≥ 80%	2. 1 st semester (FA 21)	2. Didactic instructor	2. Class average 85.58%, N=26 completed assignment
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. 98.2% scored ≥ 4.0, N=55
	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. 93.4% of questions answered correctly, N=19 students for a total of 95 questions.

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

- SLO 1, Tool 1: Surpassed benchmark, the program is pleased with results.
- SLO 1, Tool 2: Surpassed benchmark. FA 2020 was the first semester for this assignment format. The average has increased from FA 2020 to FA 2022. We are pleased and will continue to strive to increase student understanding, engagement, & retention to help the average scores to increase. 3-year comparison: FA 2020: 76.9, FA 2021: 83.2; FA 2022: 85.6
- SLO 2, Tool 1: Surpassed benchmark.
- SLO 2, Tool 2: Benchmark surpassed. There was a significant increase in % correct of SP 2022 (84.7%). 5-year comparison: SP 2019: 88%, SP 2020: 83%, SP 2021: 91.9%, SP 2022: 84.7%; SP 2023: 93.4%

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.	1. 95% of students will score ≥4.0(5.0 Likert)	1. 1 st , 2 nd , 4 th , 5 th semesters	1. Clinical Coordinator	1. 1st semester, 98.9% scored \geq 4.0, N=92; 2nd semester, 95.5% scored \geq 4.0, N=144; 4th semester, 100% scored \geq 4.0, N=116; 5th semester, 98.2% scored \geq 4.0, N=11	
	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. 100% scored ≥ 80%, N=25	
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. Only 8 scored ≥ 85%, 42% surpassed benchmark (FA 22: 1st time for this assignment format)	
	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. 96% scored ≥ 80%, Average score 87.23, only 1 scored < 80%	

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

- SLO 1, Tool 1: Benchmark surpassed. We as a department are pleased with the results. Clinical Coordinator will continue to implement role play as well as other teaching strategies to increase student success in this area.
- SLO 1, Tool 2: Benchmark surpassed. Comparison data: SP 2022: 95%, SP 2023: 100% scored ≥ 80%
- SLO 2, Tool 1: We did not meet the benchmark; however, FA 2022 was the first time for the new format of this assignment. The assignment went from a traditional written paper (FA2021) to fill-in-the-blanks, short answer, matching, m/c, essay questions. The instructor believes this assignment format better assesses student learning. The program will continue to evaluate to ensure the benchmark (which was not changed) and the measurement tool are aligned. No comparison data available in this cycle due to it being a new assignment.
- SLO 2, Tool 2: There was an increase from previous year. Although 100% did not score \geq 80%, we are pleased with the progress. Comparison data: SP 2022: 90%, SP 2023: 96% scored \geq 80%.

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	1. The students will score an ≥ 85% in 1202 and average score of ≥ 90% in 1250	1. 3 rd semester & 5 th semester (SP 22 & SU 22)	1a. Didactic instructor	1. 1202 (SU 23): Chest avg.: 79.34; Abdomen avg.: 79.17; Upper extremity avg.: 83.00; Lower extremity avg.: 85.16 1250 (SP 2023): C-spine avg.: 85.47; L-spine avg.: 89.83; Skull avg.: 84.70; GI avg.: 79.05		
	2. Item #9 on Clinical Evaluation in Practicum V	2. 95% of students will score ≥4.0 (5.0 Likert)	2. 5 th semester (SP 22)	2. Clinical Coordinator	2. 98.2% scored ≥ 4.0, N=55		
Students will demonstrate adaptive behavior for critical or stressful scenarios.	1. Item 11 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. 98.2% scored ≥ 4.0, N=55		
	2. Successful completion of Oral portion of Case Study RADR 2305	2. The student will score ≥ 85%	2. 4th semester (FA 21)	2. Didactic Instructor	2. 78.9% (N=15) scoring ≥ 85%, N=19 total.		

Analysis/Revisions/Recommendations (Goal 4: Graduate will display critical thinking/problem-solving skills): SLO 1, Tool 1: in RADR 1202 to better assess student learning, there was a slight

- SLO 1, Tool 1: in RADR 1202 to better assess student learning, there was a slight modification in the assignment (CXR image). There was an increase from 71.62 in SU 2022 to 79.34 in SU 2023. Although the benchmark was not met, there was a slight increase from an overall average of 80.97 in SU 2022 to 81.66 in SU 2023. We will continue to strengthen pre-assignment preparation.
- SLO 1, Tool 2: Student success is quite high in this area. Clinical Coordinator will continue current teaching strategies to retain this level of success
- SLO 2, Tool 1: Benchmark surpassed
- SLO 2, Tool 2: Although 78.9% scoring \geq 85% was a decrease from the previous years, the AC Radiography program is pleased with the use of this tool. The instructor will evaluate the assessment to help verify it is assessing quality information to help the student to increase success. Comparison data: FA 2020: 90.9% scored \geq 85%; FA 2021: 91.6% scored \geq 85%; FA 2022: 78.9% scored \geq 85%

Goal 5: Graduate will exhibit professional development.

Goal 5: Graduate will exhibit profes					-
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. 100% scored 5, N=55
	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. 94.6% of questions answered correctly, N=130 question attempts, N=123 correct answers.
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. 86.67 % of questions answered correctly, N=105 question attempts, N=91 correct answers.
	2. RADR 2309-Will complete modality paper	2. Students will score ≥ 85%	2. 4 th semester (FA 21)	2. Didactic Instructor	2. 36.94% exceeded the benchmark, N=19 completed with only 7 scoring ≥ 85%. (FA 22: 1st time for this assignment format)

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

- SLO 1, Tool 1: The program is very pleased with 100% of students scoring 5.0 on this tool. Comparison data: SP 2021: 100%, SP 2022: 100%, SP 2023: 100%.
- SLO 1, Tool 2: Benchmark surpassed, students continue to be successful with these legal/ethical questions. Comparison data: 2019: 90.9%, 2020: 94.6%, 2021: 91.7%, 2022: 94.6% answer correctly
- SLO 2, Tool 1: Benchmark surpassed with a significant increase from 74% of questions answered correctly in FA 2021. Comparison data: FA 2021: 74%, FA 2022: 86.67%.
- SLO 2, Tool 2: We did not meet the benchmark; however, FA 2022 was the first time for the new format of this assignment. The assignment went from a traditional written paper (FA 2021) to m/c, fill-in-the-blank, matching and two essay question assignment. The instructor believes this assignment format better assess student learning. Program will evaluate to ensure the benchmark (which was not changed) and the measurement tool are aligned. No comparison data available in this cycle due to being a new assignment.

Overall Analysis:

■ The Amarillo College Radiography program continually strive to increase student retention and knowledge. We continuously take steps to increase results on assignments/tools to help graduates be successful in the Radiologic Sciences professions. We do have some further ongoing analysis and revisions to ensure the benchmarks and the measurement tools align.

Striving for Student/Graduate Success

- Starting SP 2026 we will be going to Clover Learning (previously known as RadTech Boot Camp) instead of Corectec in RADR 2235
- Focusing on more than m/c questions
 - ARRT question types: mostly m/c, some multi-answer; few with use mouse on image, others m/c after viewing video
 - Increase multi answer (M. Hart & J. Smith utilizing) and M. Hart started to incorporate exercise of video with questions (first time 3/4/2025)-will work on more
 - Working on strengthen exam by removing "all of the above" or "none of the above"
- I went & analyzed scaled scores from ARRT 2024, trying to increase exercises content & strengthen exam questions in RADR 2235 was Equipment Operation & Quality Assurance (25) and Thorax & Abdomen Procedures (20)

Application Process

- Application deadline: 4/25/2025; Acceptance notifications go out: 5/30/2025
- Radiography Informational Meetings and Video Hospital visits have been very well attended, approximately 148 so far (had approx. 160 in 2024)
- Still have 2 (4/15 & 4/25) informational meetings/video hospital visits remaining

AMARILLO COLLEGE FACULTY, STAFF

Amarillo College Faculty, Staff

- Clinical Instructor- Jamie Smith
- Lab/Clinical Assistant-Jim Huse
- Adjunct-Marco Trevizo

Dean of Health Science

Kim Boyd

THANK YOU & ADJOURNMENT