

[Home](#)



Program Review
Form for External Review Committee

Instructional

[Back To Forms List Page](#)

Form ID

70

Division

Allied Health

Department

Radiography

Program

Radiography

Review Year

2007-2008

Member Names

Division Overview

Program/Department Purpose

State the purpose of the program/department.
How is this purpose within the mission of
Amarillo College?

The Radiography Program has a mission
(purpose) to provide a comprehensive

educational environment that will prepare the graduate to effectively engage in the daily challenges and responsibilities required of a competent and professional entry-level radiographer. The program provides an educational service that will enhance the quality of life for the graduates of the program and for the communities they serve. Jobs are plentiful in the service region and starting salaries are commensurate with other AAS degree allied health programs.

**Does the answer include a purpose statement for the program/department?
Does the answer indicate how this program/department is within the mission of Amarillo College?**

Acceptable

Yes. The answer provides a mission (purpose) statement for the program.

Yes. The answer is consistent with the key components of the mission.

When was the last time the program's/department's purpose statement was reviewed/revised by faculty and staff in the program/department?

The radiography program purpose statement is reviewed annually by the program faculty and

staff as well as the program advisory committee. The most recent review occurred in May, 2007. The purpose (mission) statement and goals can be viewed at the following web site:

www.actx.edu/radiography/index.php

Does the answer indicate the last time the program's/department's purpose statement was reviewed/revised by faculty and staff in the program/department? Does the answer indicate how this program/department is within the mission of Amarillo College? within the mission of Amarillo College?

Unacceptable

Concern

Yes. May 2007.

No. The answer does not indicate how this program is within the AC mission. Instead, the answer provides a link to the program's mission statement. The mission statement that appears at the Web address provided does not include an explanation of how the Radiography program enhances the quality of life in the AC service area, a key component of the AC mission.

If the program/department offers continuing education credits, how are these courses consistent with the mission of Amarillo College?

The radiography program does NOT offer CEU credit for any of its semester-hour credit courses.

The program does provide an annual CEU two-

day symposium in the fall for graduates who are needing CEU credits to maintain certification and licensure. The symposium typically offers 12 CEU credits per year. To maintain Texas licensure and ARRT (American Registry of Radiologic Technologists) certification requires 24 credits over a two-year period.

Does the program/department offer continuing education credits? Does the answer indicate how these courses are consistent with the mission of Amarillo College?

Acceptable

Concern

Yes. The program provides CEU credit for its annual two-day symposium that helps graduates maintain certification and licensure. The program does NOT offer CEU credit for its semester-hour credit courses.

No. The original answer does not address how the CEU courses are consistent with AC's mission. However, the Program Director provided additional information that relates more closely to the AC mission:

"The radiography program is most certainly dedicated to provide the education required of an entry-level radiographer. Graduates work throughout the service area and elsewhere through Texas and other nearby states. It has been estimated that more than 80% of all currently working Texas Panhandle radiographers graduated from the AC program. That is likely to be a conservative estimate. Also, by adding healthcare personnel to the population base of the AC service area, the quality of life for all who live in that area will be improved. The program is open to all ethnic and cultural groups and provides annual continuing education courses for radiographers working in the area who need evidence of CE to

retain their licenses to practice." The last sentence explains how the CEU courses enhance the quality of life in the AC service area.

This well-written statement is more closely related to AC's mission. Good job on the additional statement.

Does the program have admissions policies?

yes

Where are the policies published?

Program admission policies and procedures are published on line at www.actx.edu/radiography/index.php and in paper format for anyone not having access to the on line source. The paper document is available at the Call Center, the Allied Health building division office, or by postal mail.

Are all the locations where the policies are published included in the answer?

Acceptable

Yes.

Explain how these policies are consistent with the mission of Amarillo College.

Good healthcare is vital to the continuance of an acceptable quality of life for all. To ensure that quality of life for those living in the Amarillo College service region and elsewhere, the AC Radiography program educates and trains competent entry-level radiography professionals. These allied health professionals are an

important part of the healthcare team by assisting physicians in making diagnostic evaluations of illness and trauma so that a good measure of health can be restored to each patient. Program admission policies are designed to admit only those who are deemed academically qualified using a point system that focuses on the historical academic performance of each applicant.

The point system is described in detail in the information packet and can be viewed on line at the following website:

www.actx.edu/radiography/index.php

Does the explanation of how the policies are consistent with the mission of Amarillo College appear to be accurate?

Acceptable

Yes. This answer is complete and well-written. Good job!

Is the program/department accredited?

yes

Which agencies or organizations accredit the department/program?

The Joint Review Committee on Education in Radiologic Technology (JRCERT) grants accreditation to the program. The web site for

the JRCERT is as follows:

www.jrcert.org/

Are the complete names of the agencies or organizations which accredit the department/program cited?

Acceptable

Yes.

How many years are in the accreditation cycle?
7

How many years are in the accreditation cycle?

Unacceptable

The correct answer is 8, as verified by the Program Director.

When were the accreditations affirmed or granted?

The program has just completed a "self-study" document as it prepares for a JRCERT site visit scheduled for May 19 and 20, 2008. The previous accreditation affirmation was awarded in 2000. The program has been continuously accredited by JRCERT since 1968 when the program was moved from St. Anthony's Hospital to Amarillo College.

When were the accreditations affirmed or granted?

Acceptable

The program has been continuously accredited by JRCERT since 1968 when the program was moved from St. Anthony's Hospital to AC. It was reaffirmed in 2000. Reaffirmation based on the May 2008 site visit is pending with results expected in September 2008.

What is the current status of the accreditation?
In Process of Renewal

Are the current statuses of the accreditations identified (e.g. accredited, in process of renewal, in process of candidacy, other)?

Acceptable

Yes.

If not required, is the program eligible for accreditation?

Acceptable

The program is accredited.

Has this program/department sought accreditation even though it is not required (e.g. yes; If no, explain)?

Acceptable

The program is accredited.

Is this program/discipline required to receive approval from an external agency or organization (other than the Texas Higher Education

Coordinating Board) in order to offer courses?
yes

Identify the external approver(s) for the department/program.

The Joint Review Committee on Education in Radiologic Technology, the American Registry of Radiologic Technology (ARRT) and the American Society of Radiologic Technologists are the external organizations that grant approval for the program. Links to these organizations are shown below.

www.jrcert.org/

www.arrt.org/

www.asrt.org/content/Educators/Curricula/radiography/radiography_curriculum.aspx

The JRCERT is the accreditation organization. The ARRT is the organization that specifies radiography practicum course competencies. The ASRT is the organization that specifies radiography didactic course competencies.

IF the program/discipline is required to receive approval from an external agency or organization (other than the Texas Higher Education Coordinating Board) in order to offer courses, was (were) the external

approver(s) for the department/program identified?

Acceptable

Yes.

What approval schedule is required by the external approver(s)?

The reaffirmation schedule varies with the status of the program at its prior reaffirmation. The maximum accreditation period is seven years. The Amarillo College program was awarded a maximum of seven years at its last reaffirmation visit in 2000. Programs which receive the maximum award are required to submit an abbreviated self-study report midway during the seven year period.

Was the approval schedule required by the external approver(s) identified?

Unacceptable

Yes, but it was not correct. The maximum accreditation period is actually 8 years, as verified by the Program Director.

When did the program/department last receive approval?

The AC radiography program was last reaffirmed in 2000 and is due for reaffirmation in 2008.

When did the program/department last

receive approval?

Acceptable

2000. Reaffirmation based on the May 2008 site visit is pending with results expected in September.

Is the reason why the program/department is required to receive this approval clear?

Acceptable

Yes.

Improvements

Identify at least one example of an improvement/revision which resulted from the annual PET forms for the last five years

The 2007-2008 Radiography PET document may be viewed at the following web site:

www.actx.edu/archives/index.php

It is evident from the 2007-08 PET document that no revision for any goal is necessary at this time. However, a previous PET suggested the need to improve content in RADR 1167 (Practicum 1). This course marks the first of six practicum courses to complete the program. The combined clock-hour requirement for these six courses amount to about 1,700 hours of clinical duty time. RADR 1167 was requiring students to enter the clinical facilities to perform direct

patient care within five weeks of the beginning of the course. This early patient care contact was proving to be unsatisfactory since most students were unable to develop adequate patient skills within such a short time frame. Therefore, RADR 1167 was revised to required students to only observe radiography procedures until such time that they were confident in the skills required for direct patient contact. The revision has been in effect for the past two years and is working very well.

After reviewing at least one example of improvements/revisions that resulted from the annual PET forms for the last five years, determine the extent that this program/department has used the PET forms to make improvements/revisions. Does this meet the minimum expectations for using PET forms to make improvements/revisions to the program/department?

Acceptable

The improvement made to RADR 1167 is an excellent example of using PET forms to identify and correct aspects that are not working well. Since the question is limited to the last five years, the answer should include the year of the PET form that contains the RADR matter.

Identify at least one example of improvements/revisions which resulted from the

last Program Review.

At the last program review (2001-2002), the program was asked to "develop a recruitment and retention action plan." At the time, retention of starters to completers was about 60%.

Following that recommendation, the following actions were taken:

- Prepared a detailed recruitment "information packet" designed to answer most or all of the questions typically asked by applicants.
- Purchased a "gradebook" software package that provides detailed analysis of course performance and an "early warning system" to alert students of any unsatisfactory progress.
- Developed one of the first Amarillo College on-line program sites to include the same information found in the program "information packet."
- Revised the academic advising model to ensure that each applicant is carefully advised by one of the program faculty advisors BEFORE acceptance into the program.
- Revised the applicant acceptance procedure to be based on an objective point system to ensure that the best qualified applicants

(based on past academic performance) are accepted into the program.

Today, the average retention of starters to completers is about 85%. The number of program applicants has increased from an average of about 75 per year to about 150 per year.

After reviewing at least one example of improvements/revisions that resulted from the last Program Review, determine the extent to which this program/department values the Program Review process to make improvements/revisions.

Acceptable

Commendation

The answer provides a very impressive demonstration of how they improved their recruitment and retention rates on the basis of the plan they developed as a result of the last Program Review. They obviously valued the input that led to these improvements. Good job!

Identify all the delivery approaches used for courses within this program/department: (Select all that apply.)

traditional classroom, web, video,

After reviewing all delivery approaches for courses within this program/department, is this program positioned for growth? Does the committee have recommendations for delivery options which will provide

additional growth?

Traditional classroom, Video, Web

After reviewing at least one example of improvements/revisions that is a response to accomplish a strategy or tactical objective within the Strategic Plan 2010-2015, determine the extent to which this program/department has contributed to the implementation success of the Strategic Plan? Does this department/program understand how it relates to the institution's future based on the Strategic Plan?

Acceptable

It would seem that they understand how they relate to the institution's future based on the Strategic Plan (SP) because of the steps they have taken. They have developed an assessment model (SP 3.3), adapted coursework to online technology (SP 1.1), and added emphasis on advising to improve the attainment of student goals (SP 3.1).

Identify at least one example of an improvement/revision that is a response to accomplish a strategy or tactical objective within the Strategic Plan 2010-2015.

The radiography program faculty has developed an outcome assessment plan that ensures an annual and systematic review of specific program goals with corrective actions to follow when

benchmarks values are not fulfilled. This plan has been reviewed and endorsed by the JRCERT. A copy of the assessment plan follows.

**AMARILLO COLLEGE
RADIOGRAPHY PROGRAM
OUTCOMES ASSESSMENT PLAN**

August 2007 – August 2008

Goal: Monitor Program Effectiveness.

Outcomes	Measurement Tool	Benchmark	Time Frame	Person/Group Responsible
1. Students will complete the program and take the ARRT certification exam.	1. Satisfaction of all program requirements. 2. Completion of the ARRT certification exam.	1. No less than 75% of students will complete program with a grade of 'C' or better in all required courses. 2. No less than 75% of graduates will successfully complete the ARRT exam on the first attempt.	1. Annually 2. Annually	1. Program Director 2. Program Director
2. Program will assess graduate satisfaction.	1. Item #30 from "Radiography Graduate Survey" instrument.	1. Average of 4.0 on a scale of one to five.	1. Annually	1. Program Director
3. Program will assess employer satisfaction.	1. Item #21 from "Employer Survey."	1. Average of 3.0 on a scale of one to four.	1. Annually.	1. Program Director

Goal: Graduates will be clinically competent.

Outcomes	Measurement Tool	Benchmark	Time Frame	Person/Group Responsible
1. Student will provide appropriate radiation safety for patients and self.	1. Item 10 from clinical evaluation 2. Comprehensive final examination in RADR 2313.	1. no less than a 8 on a 10 point scale. 2. Average score of 80.0%.	1. third and sixth semester. 2. Annually - fall semester.	1. Clinical Coordinator 2. RADR 2313 instructor.
2. Student will produce diagnostic images.	1. Completion of FINAL lab competencies. 2. Positioning examination given in capstone course (RADR 2235). 3. Completion of required items on the "Competency Profile."	1. 2 of 4 completed by end of fourth practicum. 4 of 4 completed by end of fifth practicum. 2. Average score of 75.0%. 3. 100% completion by end of RADR 2235.	1. Fourth and fifth semesters. 2. Sixth semester. 3. Sixth semester.	1. Clinical Coordinator 2. RADR 2235 instructor. 3. Clinical Coordinator.

Goal: Graduate will display communication skills.

Outcomes	Measurement Tool	Benchmark	Time Frame	Person/Group Responsible
1. Student will demonstrate verbal skills when relating to patients.	1. Item 6 from Clinical Evaluation. 2. Oral presentation of Case Study in RADR 2367 (Practicum 5).	1. The students will receive no less than an 8.0 on a ten point scale. 2. The student will receive no less than an 8.0 on a ten point scale.	1. Second and fifth semester 2. Fifth semester	1. Clinical Coordinator 2. Radr 2367 instructor.
2. Student will demonstrate written communication skills when relating to physicians or other medical staff.	1. Complete written abstracts in RADR 2305. 2. Successful completion of written "case study" in RADR 2367.	1. The student will receive a score of 85% or greater. 2. The student will receive a score of 85.0% or greater.	1. Fifth semester 2. Fifth semester	1. RADR 2305 instructor. 2. RADR 2367 instructor.

Goal: Graduate will display critical thinking/problem-solving skills.				
Outcomes	Measurement Tool	Benchmark	Time Frame	Person/Group Responsible
1. Students will be able to evaluate radiographic images for acceptability.	1. Portfolio critiques submitted in RADR 1166 RADR 2367	1. The students will receive an 85.0% in the third semester and average score of 90.0% in fifth semester.	1. Third and fifth semester	1. Radr 1166 instructor Radr 2367 instructor
	2. Comprehensive final examination from RADR 1313.	2. The students will achieve a score 80.0% or greater	2. Fourth semester	2. RADR 1313 instructor.
2. Students will demonstrate adaptive behavior for critical or stressful scenarios.	1. Item 8 on Clinical Evaluation.	1. The students will receive no less than an 8.0 on a ten point scale.	1. Third and sixth semester	1. Clinical Coordinator.
	2. Chapter 7 unit test covering emergency scenarios in RADR 1303.	2. The student will receive an 85% or greater.	2. Fall semester.	2. RADR 1303 instructor.

Goal: Graduates will exhibit professional development.				
Outcomes	Measurement Tool	Benchmark	Time Frame	Person/Group Responsible
1. Student will be able to demonstrate conduct as outlined in the ASRT "Code of Ethics."	1. Item 4 on Clinical Evaluation.	1. Students will receive not less than an 8.0 or greater using a scale of ten.	1. Fifth semester	1. Clinical Coordinator.
	2. RADR 1301, Examination 3.	2. Students will receive a score of no less than 80.0%.	2. Spring semester.	2. RADR 1301 instructor.
2. Students will be able to differentiate between all discipline-related professional organizations.	1. Exam #3 in RADR 2233.	1. The students will receive a score of no less than 85%.	1. Sixth semester	1. Course Instructor.

After reviewing at least one example of improvements/revisions that is a response to accomplish a strategy or tactical objective within the Strategic Plan 2010-2015, determine the extent to which this program/department has contributed to the implementation success of the Strategic Plan? Does this department/program understand how it relates to the institution's future based on the Strategic Plan?

Acceptable

Their efforts have been significant (especially in the area of outcomes assessment, technology, and advising) and show they are pursuing elements of the Strategic Plan. The Outcomes Assessment Plan has measurement tools and benchmarks, and it assigns responsibility to specific individuals. It would seem that they understand how they relate to the institution's future based on the Strategic Plan (SP) because of the steps they have taken that are

included in the SP.

Does this Committee have recommendations as to how this program/department may contribute to the implementation of the Strategic Plan?

Acceptable

No.

Provide names and titles of those who determined the process used to assess outcomes of the program and/or courses in the department.

Bill Crawford — Director/Faculty

Becky Burton — Clinical Coordinator/Faculty

The program outcomes and the assessment process also involved a collaboration with Leslie Winters , JRCERT's CEO, and Jay Hicks, a JRCERT accreditation specialist. The collaboration process included two trips by Becky Burton to JRCERT outcomes assessment workshops (one in Chicago and the other in Las Vegas), telephone conferences, and written correspondence.

Has the program/department had a broad base of involvement from a majority of faculty and staff with the program/department regarding implementation of student learning

outcomes of the program(s) (or department) and courses? What recommendations does the committee have for increasing involvement?

Acceptable

The Outcomes Assessment Plan document indicates that all administrators and instructors have responsibilities. The Clinical Coordinator confirmed that all are involved in implementing outcomes assessment.

Explain the primary reasons behind the competencies that were selected.

All practicum radiography program course competencies are provided and required by the ARRT.

www.arrt.org/

All didactic course competencies are provided and required by the ASRT.

www.asrt.org/

Course competencies are identified for each didactic and practicum (clinical) RADR course taught in the curriculum and are required to certify student competency before the graduate may sit for the national ARRT Certification Examination administered following program

completion. Successful completion of this examination is required to obtain a Texas license to practice as a radiographer. Once the radiography graduate completes the certification examination successfully, he/she is entitled to use the initials RT(R) following his/her name.

Specific program outcomes assessment goals and competencies were selected through an interaction of JRCERT staff and AC faculty.

Do the selected competencies appear to be valid?

Acceptable

Yes. They appear to be required by outside agencies to which the program is accountable.

Identify the primary reasons for the assessment tool(s) selected.

The assessment tool used to evaluate the psychomotor competencies completed during the six RADR practicum (clinical) courses was developed by the program faculty and endorsed by the program advisory committee. The tool is called a "Competency Profile" and serves as a student log for recording all required practicum competencies. The competency profile is completed by the student and then verified by program faculty and clinical adjunct faculty. A

student may not complete the program until all competencies have been verified. The format used for the assessment tool was chosen to make the instrument concise and easy to use.

The Competency Profile form is shown below.

Amarillo College — Radiography Program							
Competency Profile							
Student Name: _____				Practicum Start Date: _____			
Procedure	Pre-Competency Completions			Final Competency		Random Challenge	
	Dates and Initials			Date	Signature	Date	Initials
	1	2	3				
TRUNK SKELETON							
Cervical Spine							
C-Spine (cross-table)							
Thoracic Spine							
Lumbosacral Spine							
Sacrum and/or Coccyx*							
Sacroiliac Joints*							
Pelvis							
Ribs							
Sternum*							
Soft Tissue Neck							
TRUNK ORGANS							
Chest (routine)							
Chest (6 yrs or less)							
Chest (wheelchr/gurney)							
Chest (portable)							
Chest (lateral decubitus)							
Abdomen (KUB)							
Abdomen (decub/upright)							
Abdomen (portable)							
Intravenous Urogram							
Upper GI Series							
Lower GI Series*							
VCUG/Cystogram							
HEAD							
Skull Series*							
Facial Bones*							
Zygomatic Arches*							
Mandible*							
Paranasal Sinuses							
SPECIAL PROCEDURE							
C-Arm Procedure							
Myelogram							
CT							

Procedure	Pre-Competency Completions			Final Competency		Random Challenge	
	Dates and Initials			Date	Signature	Date	Initials
	1	2	3				
EXTREMITIES							
Clavicle*							
Scapula*							
Shoulder							
Shoulder (y-view or T.T.)							
Humerus							
Elbow							
Radius/Ulna							
Wrist							
Hand							
Finger or Thumb							
Hip							
Trauma Hip (cross lat)							
Femur							
Knee							
Patella*							
Tibia/Fibula							
Ankle							
Foot							
Os Calcis (Heel)*							
Orthopedics (portable)							
Trauma - Upper Ext.							
Trauma - Lower Ext.							
Pediatric Extremity							
GENERAL CARE							
CPR							
Use of Sterile Technique							
Safe Patient Transfer							
Vital Signs							
Venipuncture							
O ₂ Administration							
FINAL LAB PRACTICAL							
Head							
Extremities							
Trunk Organs							
Trunk Skeleton							

* Indicates procedures that may be performed in the college energized lab using mannikins or in a simulated clinical setting.

Will the assessment tool(s) selected provide valid and reliable results?

Acceptable

The tool itself is merely a device for recording a graders' approval for the students' performance of procedures, and it looks like it should be sufficient for doing so. The faculty members and advisory board members have deemed it to be adequate for this

purpose.

Evaluate the assessment approaches to date.

The competency profile assessment tool continues to provide an effective means to track and evaluate student practicum performance. The competencies are periodically updated to meet changes required by the ARRT.

The program also has developed and uses a general "Outcomes Assessment" protocol that meets the accreditation requirements of the JRCERT. This protocol is used to assess the overall performance of a student group (class) as the group progresses through the program to completion. The assessment protocol is only in its second year of use, however, it has already proven to be a useful evaluation tool.

The current Outcomes Assessment protocol may be reviewed in section 2.D. of this program review document.

Each RADR didactic course is assessed annually using course grade distribution data, course GPA data, and course attrition data. A course report is generated soon after a course concludes that includes this all of this data.

An example of this report is shown below.

25 Jan 08
Allied Health
Radiography Tech

AcaVP\GradeDist_3.SPS:
Grade Distribution Report
By Individual faculty

Fall, 2007

Faculty Name	# of Stdts	Total Enr	A	C	-A-	-B-	-C-	-D-	-F-	-Au-	-W-	-I-	GPA Hours	Honor Points	GPA
RADR 1303															
RADR 1303 001	50	41	9	21	11	0	3	0	6	0	132	363	2.750		
		82.0%	18%	42%	22%	.00%	6.0%	.00%	12%	.0%					
Course Summary	50	41	9	21	11	0	3	0	6	0	132	363	2.750		
		82.0%	18%	42%	22%	.00%	6.0%	.00%	12%	.0%					
RADR 1311															
RADR 1311 001	10	9	1	7	1	0	0	0	1	0	27	81	3.000		
		90.0%	10%	70%	10%	.00%	.00%	.00%	10%	.0%					
RADR 1311 002	10	10	1	7	2	0	0	0	0	0	30	87	2.900		
		100%	10%	70%	20%	.00%	.00%	.00%	.00%	.0%					
RADR 1311 003	9	7	1	6	0	0	0	0	1	1	21	66	3.143		
		77.8%	11%	67%	.00%	.00%	.00%	.00%	11%	11%					
Course Summary	29	26	3	20	3	0	0	0	2	1	78	234	3.000		
		89.7%	10%	69%	10%	.00%	.00%	.00%	6.9%	3%					
Faculty Summary	79	67	12	41	14	0	3	0	8	1	210	597	2.843		
		84.8%	15%	52%	18%	.00%	3.8%	.00%	10%	1%					

Finally, the program uses the Planning, Evaluation and Tracking (PET) document as an additional program assessment tool. The 2007-2008 radiography program PET can be viewed at the following website:

www.actx.edu/archives/index.php

Will the assessment approaches(s) selected provide valid and reliable results?

For student or program/course outcome assessments, review the program's/department's five-year graph(s) of quantitative results or provide a brief narrative summary of qualitative

results.

The program outcomes assessment plan described in sections 2.D. and 2.E. above has only been in place since Summer 2006.

Therefore, five year data using this specific plan is not yet available, but will continue to be collected and assessed.

Individual course assessments are evaluated soon after the conclusion of each course and data from the past five years show no trends that suggest the need to change. As stated previously, specific competencies with these RADR courses is strictly controlled by the JRCERT, ASRT, and ARRT.

Outcomes following PET evaluation have been in place through the past five years. Again, the only significant changes made during this period following PET assessment was the addition of a Sectional Anatomy course and the realignment of the entry-level practicum course.

Review the program's/department's five-year graph(s) of quantitative results for student or program/course outcome assessments, or provide a brief narrative summary of qualitative results.

Acceptable

Program personnel were unable to provide a five-year graph because the outcomes assessment plan has been in existence only since 2006.

What changes have been made in the curricula of the program/department because of the analysis of these results?

ARRT didactic competencies are grouped into five fundamental categories. Each category spans two or more RADR didactic courses and all six of the RADR psychomotor courses.

1. Patient Positioning and Anatomy (5 didactic courses)
2. Imaging Principles (3 didactic courses)
3. Patient Care (2 didactic courses)
4. Radiation Safety (2 didactic courses)
5. Imaging Equipment (2 didactic courses)

The ARRT certification examination is also divided into these five categories.

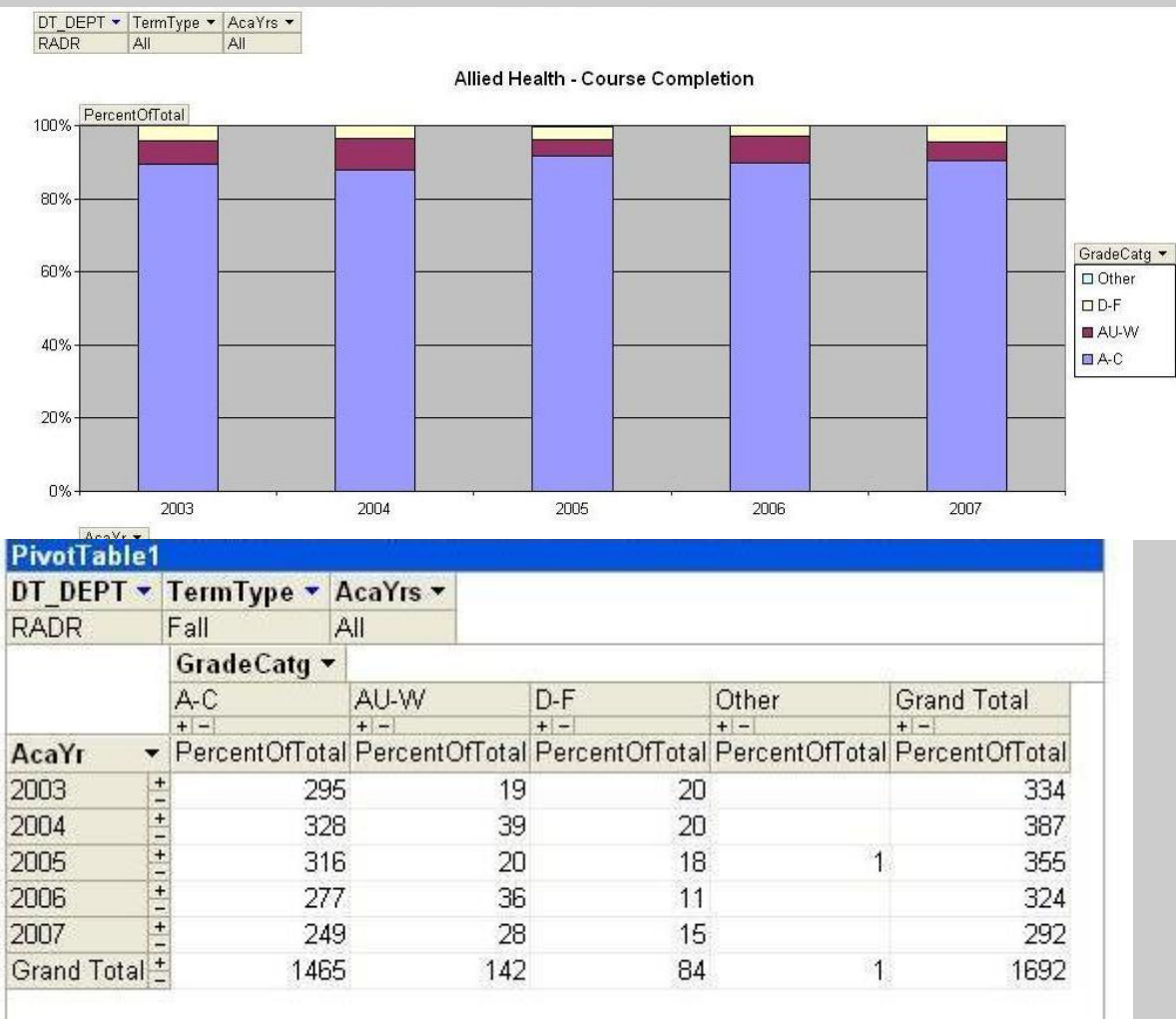
Have any changes been made in the curricula because of the analysis of these results?

Acceptable

The program does not yet have five years of outcomes assessment

results to analyze. However, they made the changes described above to align their curriculum more closely to ARRT and WECM, according to the Clinical Coordinator.

Review the five-year graph(s) of course completions for the program/department. Explain any increase or decrease that is more than a one-year anomaly.



Does the review of the five-year graph(s) of course completions demonstrate the use of analysis to implement a plan of action for retention? Is the analysis of any increase or

decrease that is more than a one-year anomaly accurate?

Acceptable

The program did not provide a written review of the course completions. However, the Clinical Coordinator wrote in an e-mail that they "did not find an anomaly in the numbers when comparing over a 5-year course. Because there was no anomaly, we did not have an analysis of assessment." In any case, they are not having a problem with retention or completions at this point, as demonstrated by other information they provided elsewhere in their Self-Study.

Provide the program's/department's plan of action for improving any identified problem or results from the implementation of the plan of action.

After review and analysis of the course completion data shown above, it must be kept in mind that the majors included in the data are primarily those students who are enrolled in general education courses with the goal of earning acceptance points. The actual number of student enrolled in the medical program itself is limited to no more than 60 total students (30 Freshmen and 30 Sophomores). These 60 students are included in the data shown. The data does not suggest the need for a plan of action to correct any problems.

Will the plan of action likely improve the number of course completers?

Acceptable

The program is limited in the number of students that can be accepted, and they routinely have more applicants than open slots. The program's retention and completion rates are good. They do not appear to have a problem that would require a plan of action.

Does the program/department provide for alternative methods of awarding credit?

CLEP

Has the program/department provided for alternative methods of awarding credit? If not, which alternative methods would be recommended?

CLEP

What approaches are used to assure outcomes are comparable to those expected of students who enrolled and completed the course?

Acceptable

CLEP examinations have been in existence for many years. The College Board Web site claims that most colleges and universities grant credit for CLEP exams. (College Board is the organization that produces the CLEP tests.)

For general education and/or core curriculum required by this program/department, identify the relevant competencies approved by the Academic Affairs Committee (see Catalog section entitled Degrees and Certificates: General Education Competencies).

The radiography program requires the following general education courses:

- Freshman Composition 1
- Any Speech course
- Any college level Mathematics course
- Any Fine Arts or Humanities course
- Any Social Science or Behavioral Science course

These course are evaluated via a course crosswalk shown below.

ENTRY-LEVEL WORKPLACE COMPETENCIES/COURSE CROSSWALK																											
A	Communication (speaking/listening)	M	Radiographic Pathology																								
B	Writing Skills	N	Principles of General Physics																								
C	Mathematics Skills	O	Radiation Physics																								
D	Critical Thinking Skills	P	Radiation Safety																								
E	Reading Skills	Q	Radiation Biology																								
F	Computer Skills	R	Imaging Equipment Design/Operation																								
G	General Patient Care	S	Imaging Equipment Use/Care																								
H	CPR/Body Mechanics	T	Imaging Technique Selection																								
I	Communicable Diseases	U	Image Critique																								
J	Medical Ethics/Law	V	Quality Control Practices																								
K	Human Structure and Function	W	Patient Positioning																								
L	Medical Language/Disease Processes	X	Beam/Part/Film Alignment																								

COURSE	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X
ENGL 1301 Freshman Comp	✓	✓		✓	✓	✓																		
ANY MATH			✓	✓	✓	✓								✓	✓		✓			✓		✓		
ANY SPEECH	✓	✓			✓							✓									✓		✓	
POFM 1313 Medical Terminology	✓	✓			✓		✓			✓	✓	✓	✓				✓						✓	
ANY SOCIAL/BEHAVIOR	✓			✓	✓		✓																✓	
ANY FA/HUMANITIES	✓	✓		✓						✓													✓	
RADR 1167 Practicum I	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓		✓	✓	✓		✓	✓
RADR 1267 Practicum II	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓		✓	✓	✓		✓	✓
RADR 1166 Practicum III	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓		✓	✓	✓		✓	✓
RADR 2366 Practicum IV	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
RADR 2367 Practicum V	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
RADR 2266 Practicum VI	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
RADR 1301 Intro to Radiography	✓			✓	✓	✓				✓		✓			✓	✓	✓	✓	✓	✓			✓	
RADR 1317 A & P I		✓		✓	✓	✓	✓		✓		✓	✓	✓				✓						✓	
RADR 1318 A & P II		✓		✓	✓	✓	✓		✓		✓	✓	✓				✓						✓	
RADR 1311 Basic Rad Procedures	✓		✓	✓	✓		✓	✓		✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓		✓	✓
RADR 2301 Intermediate Rad Proced	✓		✓	✓	✓		✓	✓		✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓		✓	✓
RADR 1303 Patient Care	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓		✓	✓	✓						✓	
RADR 2313 Rad Biology & Protection	✓		✓	✓	✓					✓	✓					✓	✓	✓		✓			✓	✓
RADR 1313 Principles of Imaging I		✓	✓	✓	✓	✓					✓			✓	✓	✓		✓	✓	✓	✓	✓	✓	✓
RADR 2305 Principles of Imaging II		✓	✓	✓	✓	✓					✓			✓	✓	✓		✓	✓	✓	✓	✓	✓	✓
RADR 2333 Advanced Imaging		✓	✓	✓	✓	✓					✓			✓	✓	✓		✓	✓	✓	✓	✓	✓	✓
RADR 2340 Sectional Anatomy	✓																							

[illegible]

Have all relevant competencies for general education and/or core curriculum been identified for this program/department? If not, which are obviously a part of this program/department's general education competencies?

Acceptable

The top of the form in the previous answer lists the competencies required by the program.

Explain how outcomes for the competencies have been assessed and achieved and provide links to the documentation.

Beginning in 2007, Amarillo College designed and implemented an assessment model for the purpose of assessing the general education courses used by various program majors including radiography majors.

The model addresses six fundamental competencies:

- Mathematical skills
- Critical thinking skills
- Communication skills
- Technology (computer) literacy
- Aesthetic awareness
- Ethics and cultural diversity

Specifics of the assessment model can be viewed at the following website:

www.actx.edu/iea/index.php

Is the explanation of assessment approach(es) for general education competencies (outcomes) thorough? Is the analysis of the results accurate? Have links to documentation which verify the assessment results been included?

Acceptable

Yes, the AC Web page that explains the assessment approaches for general education competencies is very thorough.

The page does not contain information about assessment results. It is unclear whether a document exists at this point that contains assessment results for general education competencies. The formal process of college-wide outcomes assessment is still fairly new at AC.

Outline a plan for correcting any weaknesses.

At present, no data has been seen that suggests a weakness.

If assessment results and analysis are included, is there a plan for correcting any weaknesses included?

Acceptable

Program personnel have not devised a plan because they have not seen any data that suggests a weakness.

Do students/graduates in this

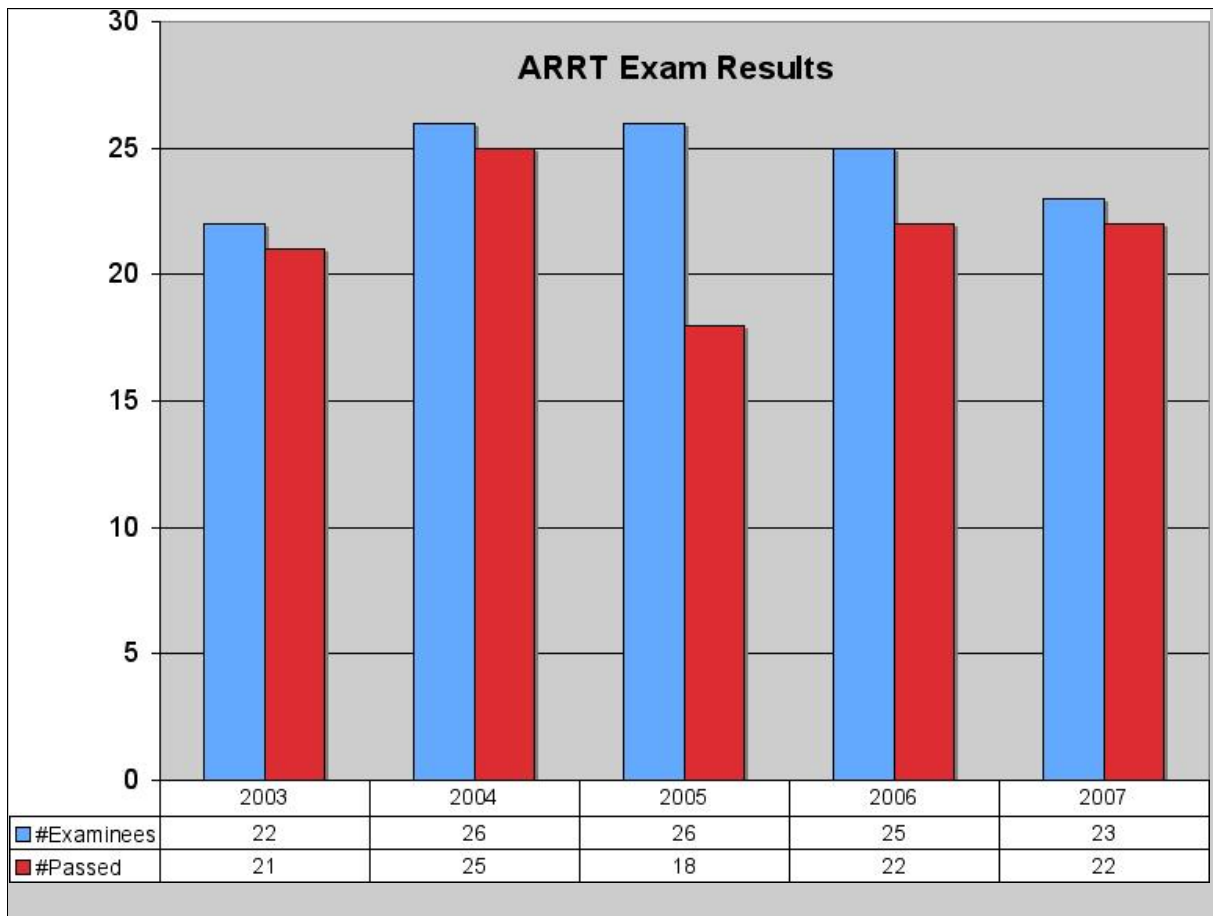
program/department have to be certified or licensed?

yes

Review the results for certification/licensure results of the program/department and/or job placement for the past five years. Explain any increase or decrease that is more than one-year anomaly.

Graduates of the program must successfully complete the ARRT national certification examination within 36 months of program completion. Those graduates who choose to work in Texas must also obtain a state license to practice radiography. No additional examination is required since Texas recognizes the ARRT credential.

ARRT examination results for the past five years ending in 2007 are shown in the table below:



**SCHOOL OF RADIOGRAPHY
AMARILLO COLLEGE**

**PO BOX 447
AMARILLO, TX 79178**

This report compares the examination performance of first-time candidates from your program to first-time candidates from all U.S. programs.

Report based on dates from **01/2003** through **12/2007**

Calendar Year	Group	Number Candidates	Scaled Scores					Total Mean	% Pass
			A	B	C	D	E		
2003	Program	22	8.6	8.1	8.3	8.3	8.8	83.7	96
2003	USA	9627	8.5	8.0	8.2	8.3	8.6	83.1	88.6
2004	Program	26	8.8	8.5	8.8	8.4	9.1	86.9	97
2004	USA	11860	8.5	8.1	8.3	8.3	8.8	83.9	88.8
2005	Program	26	8.3	7.7	7.8	8.7	8.7	80.0	70
2005	USA	13200	8.5	8.4	8.4	8.4	8.8	84.8	89.4
2006	Program	25	8.6	8.1	8.1	8.1	8.8	82.9	88
2006	USA	14061	8.7	8.4	8.3	8.4	8.8	84.8	90.5
2007	Program	23	8.7	8.4	8.5	8.4	9.0	85.6	96
2007	USA	14142	8.7	8.3	8.3	8.4	8.8	84.7	90.8

Provide a plan of action for the identified problem.

The ARRT examination results for the past five years do not suggest a need for a plan of action since no significant anomaly is identified. Future results will be closely monitored and action taken immediately should a problem area be identified.

IF students/graduates in this program/department have to be certified or licensed, do the results over the past five-years indicate that certification/licensure have been equal to or greater than the

average of the past five-years AND/OR equal to the statewide or national benchmark for this certification/licensure? IF NOT, does the analysis and plan of action appear that the program/department has thoroughly reviewed the problem?

Acceptable

Yes. The program had one year (2005) during which the percentage of students who passed the ARRT examination dropped to 70 percent, which appears to be a one-year anomaly. Scores are back up now, as demonstrated by the 96 percent figure for 2007. The program does not have a problem at this time with the percent of students passing the required examination.

Is the program's/department's plan of action for improving any identified problem or results likely to improve the certification/licensure results? Did program/department explain any increase or decrease that is more than a one-year anomaly? Does the plan correct any weaknesses included? If not, what is missing?

Acceptable

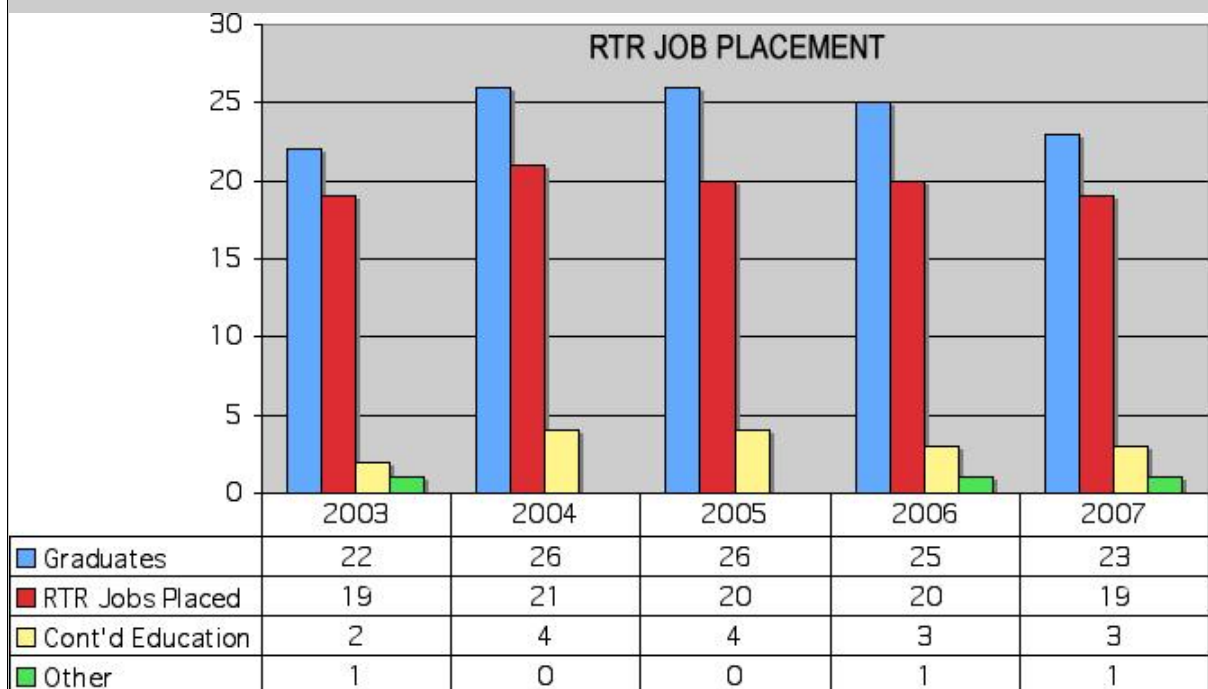
Program personnel have not identified any problems or weaknesses. Pass rates on the required examination are excellent at this time. Their outcomes assessment plan is likely to address and correct any problems that arise.

IF the department or program offers one or more technical programs (Associate in Applied Science

or Certificates), has the program/department included an explanation of the job placement success during the past five years AND are these results at least equal to the statewide annual benchmark (90%)?

Is the analysis of any increase or decrease that is more than a one-year anomaly accurate?

The program graduates approximately 20 – 25 students per academic year. Typically, a few of the graduates choose to continue their education – usually in nuclear medicine or some other medical profession. Sometimes, graduates simply disappear from tracking.



Is the program's/department's plan of action for improving any identified problem or results likely

to improve the job placement rate for graduates of the technical program(s)? If not, what is missing?

As shown in the chart above, the job placement statistics for the past five years indicate no particular problem that requires an action plan.

IF the department or program offers one or more technical programs (Associate in Applied Science or Certificates), has the program/department included an explanation of the job placement success during the past five years?

Is the analysis of any increase or decrease that is more than a one-year anomaly accurate?

Acceptable

Yes. Program personnel provided job placement statistics.

The figures show a steady success rate of graduates either being placed or going on to further their education—well above 90%.

Is the program's/department's plan of action for improving any identified problem or results likely to improve the job placement rate for graduates of the technical program(s)?

Acceptable

The job placement rate is already excellent, but the outcomes

assessment plan would likely correct any problem that is identified because it contains a systematic procedure to address problems.

Curricula

Does the program/department have affiliation(s)/agreement(s)/contract(s) with any other entity for the purpose of delivering instructional content?

yes

Review the affiliation(s)/agreement(s)/contract(s), consider Amarillo College's mission, and then make a recommendation to:

Provide an analysis of the review.

Amarillo College continues to use a standardized clinical affiliation agreement that has been in place for many years. This agreement document was prepared at the allied health division level and approved through Amarillo College legal counsel, administration, and the Board of Regents. The agreement is updated as necessary to meet changes in Federal and State healthcare regulations and for other reasons deemed appropriate.

If the program/department has affiliation(s)/agreement(s) with any other entity for the purpose of delivering instructional content, do these

affiliations/agreements make it clear that Amarillo College maintains the responsibility for controlling all aspects of the educational program? Has the College ensured the quality of the program with these affiliations/agreements? If so, how? What is the schedule for reviewing the quality of these programs? Has the College ensured that programs remain with Amarillo College's mission?

Acceptable

Yes. AC's control is specified in a number of places in the contract.

First, AC maintains control over the program in the contract, thus allowing them to ensure the quality of the program. The contract states that one of AC's responsibilities is to "advise the staff in each clinical department of the objectives for the students' clinical practice and overall plan for the experience." The college provides the evaluation form to be used by the medical facility. The college also is responsible for the administrative functions related to the experience. The Radiography section of the contract states that the Clinical Supervisor (a medical facility employee) is to "assist the Amarillo College faculty." The Clinical Supervisor is to "enforce Amarillo College's rules and regulations that apply to practicum courses."

Second, the Clinical Student Supervisor at the facility is charged in the contract with assisting the AC faculty in providing "the highest possible standard of clinical education and experience to all radiography students." The Clinical Supervisor assures adequate supervision, counsels students who are "observed practicing unacceptable radiation safety guidelines," attends facility-sponsored and college-sponsored seminars/workshops/meetings, and serves on the AC Radiography Program Advisory Committee.

There are many other quality safeguards, but this list includes a few that stand out.

Regarding the schedule for reviewing the quality of these programs, the Program Director provided additional information: "The program faculty are regularly reviewing program quality throughout the year. Student evaluations of faculty and clinical personnel are performed each semester. Grade distribution data and course completer GPA data is reviewed at the conclusion of each course. The program clinical coordinator and her assistants are in daily communication with clinical affiliates to ensure quality."

The Radiography Program is an educational service/resource, and the provision of medical personnel enhances the quality of life in the service area—so, yes, it is consistent with AC's mission.

How many curricula changes were approved by the Academic Affairs Committee during the past five years?

1

Which steps in the curricula change process had faculty involvement prior to submitting the curricula proposal(s) to the Academic Affairs Committee?

All program faculty had direct input and were unanimously in support for adding RADR 2340. In addition, the proposal was supported by the program advisory committee. RADR 2340 was already in the WECM course inventory and is offered at numerous other Texas community colleges. The proposal was approved by the Academic Affairs Committee on first reading.

Was the departmental faculty involvement documented and broad in representation? If not, what steps within curricula change

process should have had more proof of greater departmental faculty involvement? Is the primary responsibility for curricula changes under the control of faculty? Does the program have a qualified faculty member in charge of the program's coordination and curriculum development?

Acceptable

Yes, the faculty's involvement in curricula change (RADR 2340) was broad. The answer states that "All program faculty had direct input and were unanimously in support for adding RADR 2340."

Yes, the faculty's involvement in curricula change (RADR 2340) is documented. This matter was discussed and voted upon during the Oct. 19, 2005, Program Review Meeting attended by the Program Director, Clinical Coordinator, and faculty members (Connie Crawford, Barbara Gray, Ken Woody). The vote was unanimous to add the course. This activity is described in the minutes of the meeting.

Yes, the primary responsibility for curricula changes is under the control of faculty. The curriculum is largely dictated by outside agencies to which the program is accountable.

Yes. The Program Director and the Clinical Coordinator are both qualified faculty members.

Is any program within the department a technical program (e.g. AAS or certificate)?

yes

When was the last Advisory Committee meeting?

The program advisory committee meets a minimum of one time during each academic year, and more often if the need arises. The last

meeting occurred March 23, 2007. The next meeting will take place during the JRCERT accreditation site visit on May 19-20, 2008.

Provide a link to the minutes of the last Advisory Committee(s) minutes in the Electronic Archives.

The following link can be used to access minutes of the most recent radiography program advisory committee meeting:

www.actx.edu/archives/index.php

Provide a link to the appropriate committee membership of the Advisory Committee(s) in the Electronic Archives.

The following link can be used to access membership of the program advisory committee:

www.actx.edu/archives/index.php

If the department offers an AAS and/or certificate, do the minutes of the Advisory Committee prove that the curricula for each program is appropriate to the degree and/or certificate? Has the Advisory Committee been consulted in designing each degree and certificate? Has the Advisory Committee met at least once a year and been provided ample opportunity

to guide the faculty in curricula changes?

Acceptable

Yes. The minutes show discussions of curricula changes. The curriculum is largely dictated by outside agencies to which the program is accountable.

Yes. Additional content from Program Director: "The advisory committee, at each annual meeting, has the opportunity to suggest changes to the AAS degree curriculum, both in its content and in the order in which courses are taught."

Dates of available meeting minutes posted online:

May 15, 2008

April 11, 2008

March 23, 2007

February 10, 2006

November 9, 2004

March 27, 2003

March 5, 2002

The minutes of the Oct. 19, 2005, meeting are available in paper form from the Program Director.

The Program Director provided this additional information: "All advisory committees must meet at least one time during each academic year (not the calendar year). It is possible for a program to meet two times in a calendar year (one in the spring semester and once in the fall semester) and meet the THECB requirement. When this happens, a calendar year is skipped. The radiography committee met on November 9, 2004 which met the requirement for the 2004-2005 academic year. The next meeting was on February 10, 2006 which met the requirement for the 2005-2006 academic year. There was no meeting during the 2005

calendar year."

Is the membership of the Advisory Committee broad enough to provide the scope of advice necessary for input on curricula? If not, what changes are recommended to the program/department?

Acceptable

Yes.

Additional content from Program Director: "The advisory committee membership is determined by the program director, the Joint Review Committee on Education in Radiologic Technology and SACS. The committee has hospital supervisors, a clinical instructor from each program clinical affiliate, a radiologist representative and a student representative. These all represent experts in the profession and, with the exception of the student rep, are potential employers of our graduates. Some come from large hospitals, others from smaller rural hospitals, and others from private physician offices. The student rep is elected by his or her peers to represent all the students. In my opinion, the current advisory committee consists of a broad representation of those persons who are qualified because of their credential to give advice in matters of curriculum. Mary Ann Richards is a radiographer who works for Dr McKay and Dr. Frazier (a private orthopedic office) which is one of the program clinical affiliates." The last sentence is a response to a question from this reviewer.

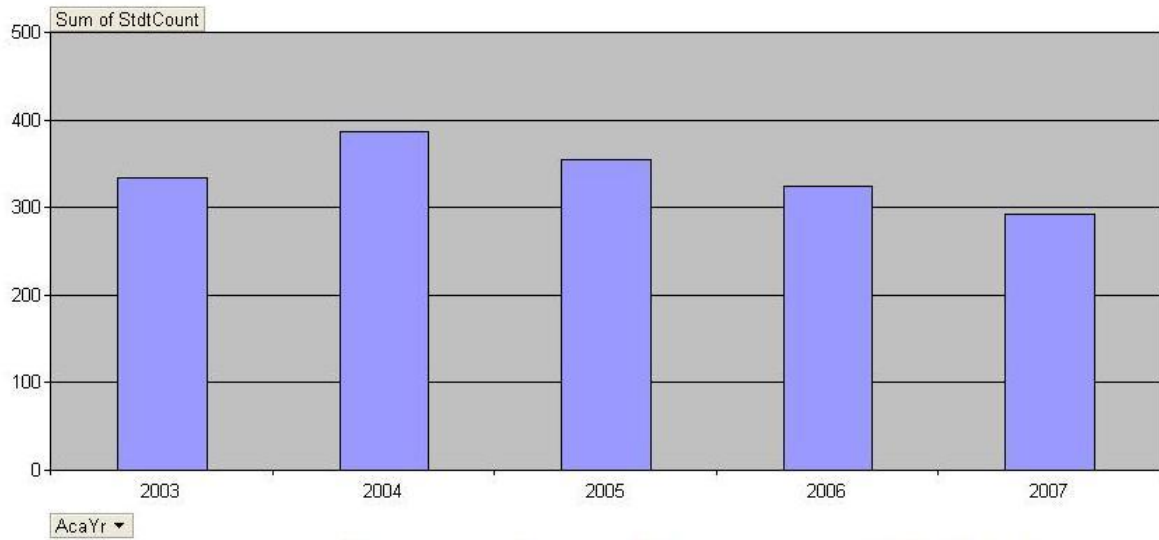
Enrollment Data

After receiving the data indicating the number of students enrolled in the program/department, by total students, number of full-time equivalents, and number of completers, determine if there is more than a one-year anomaly.

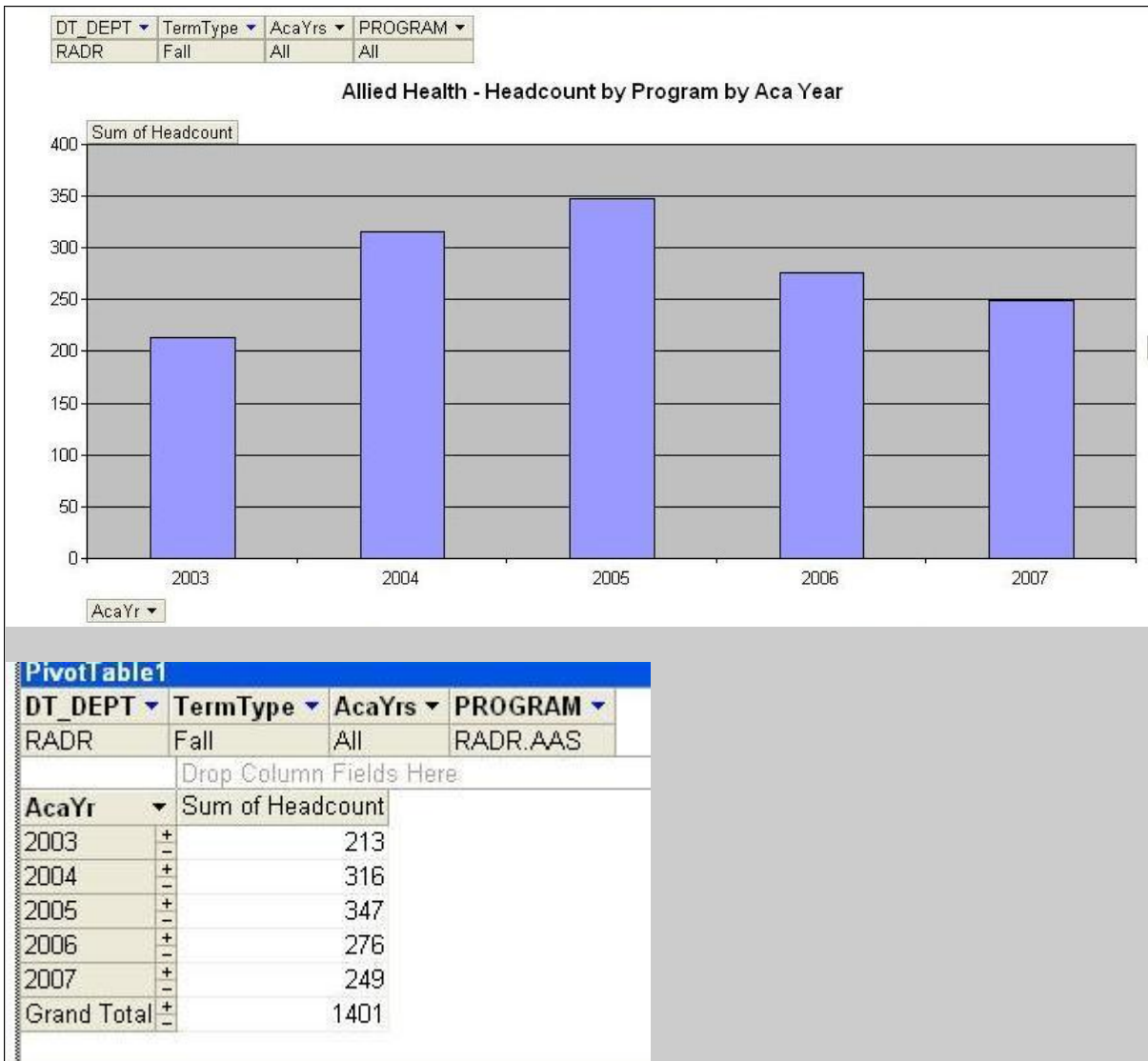
If so, provide the faculty and staff analysis of their assessment of the problem.

DT_DEPT ▾	TermType ▾	AcaYrs ▾
RADR	Fall	All

Allied Health - Enrollments in Dept by Aca Year



PivotTable1		
DT_DEPT ▾	TermType ▾	AcaYrs ▾
RADR	Fall	All
Drop Column Fields Here		
AcaYr ▾	Sum of StdCount	
2003	+	334
2004	+	387
2005	+	355
2006	+	324
2007	+	292
Grand Total	+	1692



Does the analysis by the faculty and staff of this data address any obvious problems/declining statistics?

Unacceptable

Concern

Program personnel were NOT directed to write an answer to this question unless an anomaly of more than one year was identified. They have more applicants than they do available slots, so they do not have a problem with declining enrollment. In answer to the next question, they list the probable causes of the decline in

declared Radiography majors.

The relationship of the charts to the question is ambiguous, and no narrative explanation was required or provided. The question clearly states the data to be included in the answer, and it is unclear that the exact data has been provided, e.g., FTE, completers. The answer should provide charts containing the exact data required by the question, and the charts should have titles and labels that correspond to the wording of the question. It should not be left up to the reader to try to provide the analysis.

The question should be rewritten to require a written analysis because the external reviewer is required to answer a question about the analysis.

Create an action plan for needed improvement and commendation for any dramatic improvement.

Declared radiography majors has declined during each of the last three years from a high of 387 majors in 2004 to 292 majors in 2007. This decline is most likely attributable to several factors:

- Competetive nature of applicant acceptance into the program which limits annual program enrollment to only 30 new students.
- Increase in the cost of education (tuition, fee, textbooks, etc).
- Increase in transportation costs which has reduced commuters coming from nearby towns.
- Decrease in overall enrollment at Amarillo

College.

Even though the downward trend suggests a problem, there is no real need to try to recruit more applicants for a program that already is seeing too many apply.

Does the action plan or commendation address the problem addressed within the analysis? Does it appear that implementation of the action plan will resolve the problem and correct the decline?

Acceptable

Program personnel have not devised an action plan because the program is already drawing more applicants than can be admitted.

Does the External Review Committee have any other analysis or recommendations for increasing enrollments based on the program/department's data?

Acceptable

No.

For programs/departments with majors, review the graphs of program majors and the number of new majors by year.

Provide an analysis of the program's/department's faculty and staff assessment of the problem and an action plan for

needed improvement and commendation for any dramatic improvement.

Same response as A.2. above.

Does the analysis by the faculty and staff of this data address any obvious problems/declining statistics regarding students enrolled as majors within the program/department? Does the action plan or commendation address the problem addressed within the analysis? Does it appear that implementation of the action plan will resolve the problem and correct the decline? Does the External Review Committee have any other analysis or recommendations for increasing the number of students majoring in this program/department based on this program's/department's data?

Acceptable

Yes. The response in A.2. lists the reasons for the decline in declared Radiography majors. This program does not have a problem with declining enrollment. It is already drawing more applicants than can be admitted, so no action plan is necessary.

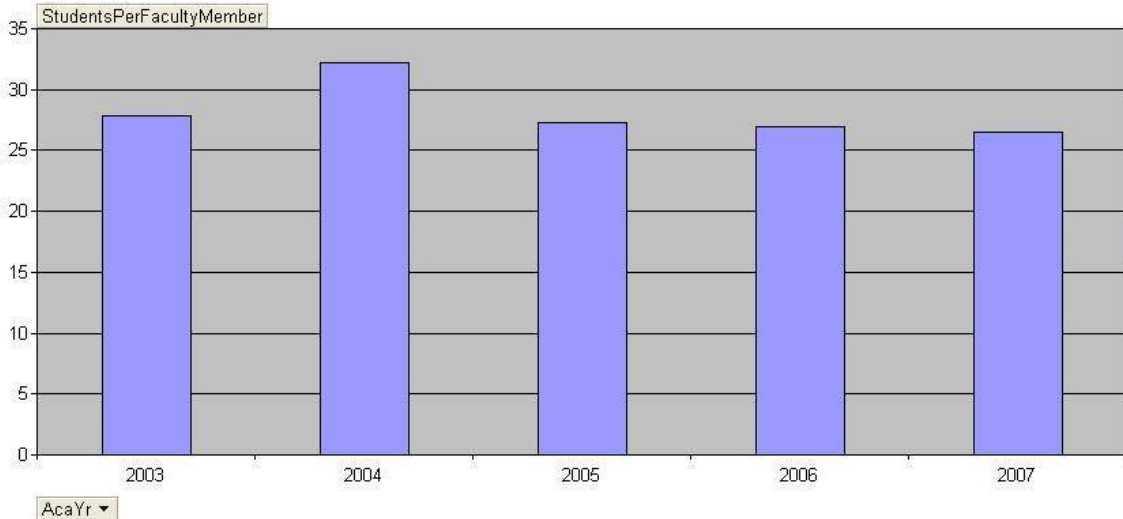
Resources

Review the five-year graph(s) of the student-to-faculty ratio in the program/department.

Explain any increase or decrease that is more than a one-year anomaly.

DT_DEPT ▾	TermType ▾	AcaYrs ▾
RADR	Fall	All

Allied Health - Average Students per Faculty Member per Section



PivotTable1

DT_DEPT ▾	TermType ▾	AcaYrs ▾
RADR	Fall	All
Drop Column Fields Here		
AcaYr ▾	StudentsPerFacultyMember	
2003	+	27.83333333
2004	+	32.25
2005	+	27.30769231
2006	+	27
2007	+	26.54545455
Grand Total	+	28.2

Does the analysis by the faculty and staff of this data address any obvious problems/declining statistics regarding student-to-faculty ratio within this program/department?

Acceptable

Program personnel did not provide an analysis. No analysis was required unless an anomaly of more than one year was identified. The ratio has been around 27:1 except for one year when it was

32.

Provide an action plan for improvement of any identified problem.

No problems are identified.

Does the action plan or commendation address the problem addressed within the analysis? Does it appear that implementation of the action plan will resolve the problem and correct the decline? Does the External Review Committee have any other analysis or recommendations regarding student-to-faculty ratio within this program/department?

Acceptable

The student-to-faculty ratio does not present a problem at this time.

No recommendation.

In the database for [Roster of Instructional Staff](#) (also known as Roster of Faculty), review the credentials of each full-time and part-time faculty member within the program/department. If any faculty member does not meet the SACS and THECB requirements, evaluate whether additional documentation is significant to grant an exemption.

All full-time and part-time radiography program faculty credentials meet all SACS and THECB requirements.

Identify any faculty teaching a transfer course which, according to the information within the database for [Roster of Instructional Staff](#) (also known as Roster of Faculty) do not meet the requirements of faculty teaching a transfer course and explain the credential problem. Identify any faculty teaching a technical course which, according to the information within the database for [Roster of Instructional Staff](#) (also known as Roster of Faculty) do not meet the requirements of faculty teaching a technical course and explain the credential problem based on SACS requirements and/or THECB requirements. Identify any faculty teaching a developmental course which, according to the information within the database for [Roster of Instructional Staff](#) (also known as Roster of Faculty) do not meet the requirements of faculty teaching a developmental course and explain the credential problem.

Acceptable

All full-time and part-time radiography program faculty

credentials meet all SACS and THECB requirements.

List the names and the last date for all full-time faculty evaluations based on the schedule indicated in the Faculty Performance Review (FPRP).

The Allied Health Division reviews all full-time faculty as follows:

All program directors are evaluated during the spring semester of odd-numbered years.

All other full-time faculty are evaluated during the spring semester of even-numbered years.

Exceptions:

All full-time faculty, include program directors are evaluated every year during their first four years of employment.

The following are full-time faculty in the radiography program:

Becky Burton – last reviewed in Spring, 2007; next review is Spring 2009.

Ken Woody – last reviewed in Spring 2007; next review is Spring 2009.

If any full-time faculty member (or Board-appointed faculty member) has not been

completed the Faculty Performance Review (FPRP) within the past two years and is listed in the aforementioned [Roster of Instructional Staff](#) (also known as Roster of Faculty), identify the faculty member's name and the date of the last FPRP.

Acceptable

Both full-time faculty members were reviewed in Spring 2007.

List the names of each part-time faculty and the last date of evaluation by students and supervisor for each course taught.

The following are part-time radiography program faculty:

Bill Crawford: last reviewed in Spring 2006; next review will be Spring 2008.*

***Mr. Crawford is a division chairman and is reviewed bi-annually by the Vice-President and Dean of Instruction.**

Courses taught: RADR 1313 — Principles of Radiographic Imaging 1

RADR 2305 — Principles of Radiographic Imaging 2

RADR 2233 — Advanced Medical Imaging

Connie Crawford: last reviewed in Spring 2006;

next review will be Spring 2008.

Courses taught: RADR 1317 — Radiographic Anatomy & Physiology 1

RADR 1318 — Radiographic Anatomy & Physiology 2

RADR 2370 — Principles of Radiologic Science

RADR 2309 — Radiographic Imaging Equipment

If any part-time faculty member has not been evaluated by both students and supervisor for each course taught within the past year and is listed in the aforementioned [Roster of Instructional Staff](#) (also known as Roster of Faculty), identify the faculty member's name and state the specific problem.

Acceptable

Both part-time faculty members were evaluated by both students and supervisors during the Spring 2008 semester, according to the Program Director (who is one of the part-time faculty members).

Amarillo College's Board Policy Manual defines each faculty member's academic freedom as "full freedom in the classroom in discussing the subject being taught and to pursue research and publications. However, a faculty member must not attempt to force on students a personal

viewpoint and must at all times allow for diversity of opinion." Has anyone in the program/department filed a grievance for violation of the aforementioned academic freedom?

no

If anyone within the department has filed a grievance for violation of academic freedom based on the definition stated in Amarillo College's Board Policy Manual, briefly describe the violation (excluding personal identifiers) and the total number of violations.

Acceptable

No one in the department has filed a grievance.

Which of the following library collections/resources/services have been used by faculty, staff and/or students within the past five years? (Select all that apply.)

Circulating collection Electronic journals

Proprietary databases Reference collection

Tutorials/guides

Does it appear that the library collections/resources/services used by the faculty, staff, and/or students within the past five years are accurate and thorough?

Acceptable

Yes.

Which two or three collection/resources/services should be improved to support Amarillo College's mission regarding teaching and service?

The Amarillo College library staff and resources go well beyond what is necessary to achieve effective teaching and learning in the radiography program. There are no recommendations for improvements.

Has the program/department identified which two or three collections/resources/services should be improved to support Amarillo College's mission regarding teaching and service?

Acceptable

No. They have stated they have no recommendations for improvements.

Does your program/department have discipline accreditation?

yes

How has the library participated in this discipline's accreditation?

The library provides sufficient materials to support all of the radiography program's educational and research needs. This support was documented during the last JRCERT

reaccreditation in 2000 and will be reviewed again during the 2007-2008 academic year. The program director submits requests for additional printed material each year as the need arises. These requests are filled by the library as funds become available. The library also provides excellent staff assistance to students and faculty who desire to use on line resources.

Prior to each JRCERT reaccreditation visit, the library staff provides a detailed written assessment of all radiography-related print holdings (books and journals). This document is included in the program self-study report submitted to JRCERT.

Does the program/department have a discipline accreditation? IF SO, has the library participated in completing the approver's evaluation?

Acceptable

Yes.

Yes.

After assessing the strengths and weaknesses of the program's/department's access to technology, what improvements would ensure that students have access and training in the use of technology?

At present, radiography majors and faculty have easy access to any training needed to effectively use all technology resources.

Does the program's/department's assessment of strengths and weaknesses include ways to improve both students' access to & training in the use of technology?

Acceptable

The Program Director provided additional information that provided a more complete answer: "The students have easy access to on-campus computers and to on-campus radiology equipment. Part of the educational program, include the six practicum courses ensure that students are well-trained in the use of this technology before they complete the program. They will spend about 1,700 clock hours of clinical duty time working with the technology. "

What improvements would ensure that students use technology?

Program faculty are regularly encouraged to require students to use technology during RADR coursework. This is accomplished through outside assignments and in-class demonstrations. As part of the on-going faculty performance review process, each faculty person is evaluated relative to the use of library and technology by their students. Also, the nature of the radiography discipline requires regular use of

technology by program majors during the clinical (practicum) coursework. At this time, no improvements are deemed necessary.

Does the program's /department's answer include improvements that would ensure that students use technology? Are the recommendation(s) of this program/department feasible?

Acceptable

No. The answer does not include improvements because program personnel feel no improvements are necessary at this time. Students are already being required and encouraged to use technology.

Review program/department operations. Does any operation present the possibility for violations of security, confidentiality, or integrity of student records?

no

What changes need to be made to prevent violations of this nature?

After a review of this program's /department's operations based on this Self-Study and any other information available to this Committee, does any operation present the possibility for violations of security, confidentiality, or integrity of student records? If so, describe those operations and identify the violation

possibility in detail.

Acceptable

Program personnel have not identified any vulnerabilities in this area. In regard to the practicums, the contract specifies that the College will be responsible for administrative functions.

What changes need to be made to prevent violations of this nature?

Acceptable

Program personnel have not identified any problems in this area that need to be corrected.

Which support services need to be strengthened to better serve students in this program/department?

Until recently, the allied health division did not have the benefits of a "divisional advisor." This deficiency has now been corrected with the addition of a full-time credentialed divisional advisor.

The West Campus does not have a technology support person on campus. One is needed!

The West Campus does not have a security officer on campus. One is needed!

Explain what aspects of the services need to be strengthened.

Technology support needs to be present on the West Campus at all times. When technology fails, either in a lab or in a faculty office, the failure should be addressed and corrected within a reasonable period of time (24 hours). History has demonstrated that West Campus tech support comes and goes. Sometimes we have it; at other times we do not! It seems that whenever the overall I.T. technician staff is understaffed, the West Campus technician is the first to be recalled to the Washington Campus and is not replaced.

The West Campus has a relatively large student and employee population. Incidents occur which require urgent AC police response. Typically, such response requires that an officer travel from Washington Street at the expense of precious minutes. It would seem, in light of continuing campus "incidents" across the U.S., that at least one police officer must be present on all campuses at all times when the college is open. Full-time police staffing levels should NOT be compromised due to budgetary restrictions.

Do the Self-Study recommendations of this program/department for support services that need to be improved appear to be valid?

Acceptable

Yes. Very much so.

Describe any indicators or problems that prevent a healthy, safe and secure environment for the students, faculty and staff of this program/department.

As described in the previous section, the West Campus needs to have a full-time police officer presence.

Are recommendations to assure a healthy, safe and secure environment for staff and students of this program/department valid? Are any of these recommendation(s) more significant and/or urgent?

Acceptable

Yes, their concerns are valid.

The West Campus should have its own police presence, especially in light of incidents like the killing spree at Virginia Tech. Students and/or employees could be killed. Also, AC might have possible lawsuit vulnerability if something like that happened at the West Campus, and no police were readily available.

The tech support problem could develop into a retention issue with students who can afford to do so migrating to WTAMU or elsewhere after experiencing continued inconvenience and irritation with AC's state of technology and support.

Describe any indicators or problems that hamper adequate physical facilities, both on and off campus, to meet the needs of the program/department.

Heating and cooling throughout the allied health building is not controlled within acceptable limits. Numerous student and faculty complaints continue. In some circumstances, classes have had to be moved to other available classrooms when temperature extremes prevail. Teaching and learning in an uncomfortable environment cannot occur in a manner comparable to rooms that are properly heated and cooled.

Do any of the problems or concerns regarding adequate physical facilities appear to be significant and/or urgent? Are there any other needs which this Self-Study didn't cite but are critical based on other information? Which of these needs are most significant and/or urgent?

Acceptable

The matter of the lack of police protection is the most urgent matter. This situation also creates a problem with the other campuses because the sole patrol officer on duty at night and weekends must patrol all the campuses. The officer could be unavailable when needed.

The lack of tech support is very significant and should be remedied. Learning often comes to a standstill when technology malfunctions. The heating and cooling matter is also important in terms of providing an adequate learning environment that promotes retention.

Budget

Which program/department outcomes have

resulted in budget requests to date?

There have been no program outcomes that have resulted in budget changes. The radiography program operating budget has consistently proven to be adequate to accomplish all of the program outcomes. For the past several years, budget requests in all categories have remained "flat," but are satisfactory. The on-campus energized x-ray laboratory contains equipment that is aging, but is still satisfactory. New digital imaging technology will soon mandate that the film system be scarped and replaced with digital equipment. This new equipment is already planned as a part of the recent bond election that was endorsed by the citizens of the AC district.

Have any of this program's/department's outcomes resulted in budget requests to date? If not, why not?

Acceptable

No. Program personnel have determined that budget requests are not necessary at this time.

Project the program's/department's strategic initiatives for the next five years based on the program's/department's outcomes.

As described earlier in this document, the AC

radiography program has a annual capacity of 30 new freshmen students. Until Amarillo (or some surrounding community) builds a new medical facility that contains radiology services (e.g. a hospital), the AC enrollment cap cannot increase. It is not likely that such a facility will be added within the next five years. That being said, the program will continue to offer existing courses and maintain the annual enrollment cap. Every effort will continue to limit program attrition.

Has this program/department been able to project strategic initiatives for the next five years based on the program's/department's outcomes? If not, what appears to be blocking this program/department from accomplishing this?

Acceptable

The Program Director provided this additional information: "As stated in the self-study, the radiography program has an annual enrollment cap of 30 new students. There are many more applicants each year than the cap permits. At present, and for the next five years, there are no realistic possibilities to expand the cap. An additional Amarillo hospital would be needed. Therefore, the main strategic initiative for the next five years is to reduce program attrition."

Publications

If the program/department publishes any advertising or recruitment documents (electronic or paper), do the documents accurately represent Amarillo College and the

program/department?

yes

If no, explain what is inaccurate.

IF the program/department has published any advertising or recruitment documents (electronic or paper), check at least one copy of each document and determine whether it accurately represents Amarillo College and the office/department?

Acceptable

This reviewer examined the AC Catalog, an Allied Health pamphlet, the AC Radiography home page, and the Radiography Program Information Packet. They appear to contain no obvious misrepresentations.

IF anything appears to be inaccurate, identify the apparent violation.

Acceptable

The review revealed no obvious inaccuracies.

Does the program/department publish any documents (electronic or paper) with references to SACS accreditation?

no

Are the references in compliance with SACS approved statement?

Which reference is not in compliance? Describe how you will assure compliance for all references in the future.

IF the program/department has published any document(s) with a reference to SACS accreditation, are all references consistent with the approved statement? (Approved reference: Amarillo College is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools to award associate degrees. Contact the Commission on Colleges at 1866 Southern Lane Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Amarillo College.) IF any references are inconsistent, identify all documents with the inconsistent reference(s).

Acceptable

A review of the program's publications revealed no references to SACS. The AC Catalog's references to SACS are consistent with the approved content.

IF the Self-Study did identify the inconsistencies, does the plan for assuring future compliance appear to correct the problem? IF the Self-Study did NOT identify all inconsistencies, what plan does this Committee recommend?

Acceptable

Neither the Self-Study nor the external review identified any inconsistencies.

Other

State any additional comments/concerns which may impact this program/departments during the next five years.

The future of the radiography program at Amarillo College is secure and should remain stable in all respects throughout the next five years.

IF additional comments/concerns were included in the Self-Study regarding items which may impact this program/departments during the next five years, what recommendations and/or concerns are warranted? IF NO such items were included in the Self-Study but this Committee feels such comments or concerns are valid, cite them and include any relevant recommendations.

Acceptable

The request for additional police protection contained in this Self-Study should receive particular attention. Having one police officer cover three widely separated campuses during parts of the work day is not sufficient and could result in harm to students and/or employees. It could also leave AC vulnerable to lawsuits if an incident should occur. The requests for better temperature control and tech support also are legitimate concerns that should receive attention.