College of Southern Idaho Radiologic Technology Program Outcome Assessment Plan for the Class of 2019

Mission: To prepare students to become graduates for entry-level employment as ARRT Registered Technologists in Radiography

Category I: Graduate Performance

Goal I: Program effectiveness will be measured on an ongoing basis

Outcome	Tool	Benchmark	Time Frame	Responsibility	Result	Action
1. Enrolled students will complete the program.	CSI Institutional Research Graduation Report	≥ 80 % annual graduation rate.	Commencement (May)	Program Director	Yes 11/12 = 91.6%	None
Note: One student resigned at the end of the 2nd Semester after deciding to be a nurse instead of an RT.						
2. Graduates will pass the ARRT exam in radiography on the first attempt. [Note: Data is taken from the ARRT Radiography Examination Summary.]	A. Annual first-time pass rate. B. 5-year first time pass rate. C. Annual program mean scaled score. D. 5-year program mean scale score.	A. ≥ 80 % Annual first time pass rate. B. ≥ 80 % 5-year first time pass rate. C. ≥ 80 Annual program mean scaled score. D. ≥ 80 % 5-year program mean scaled score.	A. January 1 to December 31 for graduating class. B. January 1 to December 31 for graduating class. C. January 1 to December 31 for graduating class. D. January 1 to December 31 for graduating class.	A. Program Director. B. Program Director. C. Program Director. D. Program Director.	Yes 10/11 = 91% Yes 56/58 = 96.6% (Scores include 2 failures) Yes 11/11 = 82 (Total who took Registry including 1 failure.) Yes 58/58 = 87.2 (Score includes 2 failures.)	None None None None

3. Graduates will be employed within 6 months of graduation.	CSI RT Program Graduate Survey # 4 or students reporting job status.	≥ 80 % of those seeking employment of those surveys returned. (Excludes military and continuing education.)	Last day of class during the final spring semester of training. (Note: Students who are not employed as of last day of class are contacted within 6 months of graduation.)	Program Director	Yes 10/10 = 100%Note: Note: One student has not sought employment.	None
4. Graduates will receive a quality education.	CSI RT Program Graduate Survey # 1: Did the CSI Radiologic Technology Program adequately prepare you for entry level employment as an ARRT Registered Technologist in Radiography? (Note: Answers to this question are anonymous.)	≥ 80% students answer YES of those who returned surveys and answered the question.	Last day of class during final spring semester.	Program Director	Yes 11/11 = 100% of students received a quality education.	None
5. Employers will be satisfied with the (hard – technical) performance of graduates.	Employer Survey Question #4: Please rate this person's overall technical abilities (i.e., radiation protection, equipment operation, quality control, image acquisition, image analysis, imaging	≥ 95 % Combined satisfactory rating of those surveys returned.	Six months post - graduation.	Program Director	Yes 100% for 6/6 respondents as of 2/10/2020.	

	procedures, patient care).					
Category II: Clinical Performance. Goal II: Students will be clinically competent.						
Outcome	**Tool**	**Benchmark**	**Time Frame**	**Responsibility**	**Result**	**Action**
1. Students will demonstrate they have the clinical skills of a radiographer.	A. All competency exams. (Direct)	95% of the total comps will be passed on the first attempt.	3rd, 4th, and 5th semesters.	Clinical Coordinator	Yes 574 / 581 = 98.7%	
Note: The number of Unsatisfactory comps for the Class of 2019 was much lower than previous classes. At the 4/14/2019 Clinical Instructor Workshop a Clinical Education Manual procedure for "chain of custody" of competency evaluations was revised requiring that all Unsatisfactory comps immediately be turned into the Clinical Instructor (CI) by the RT Evaluator (RTE). The CI will send a copy of the unsatisfactory comp to the CSI Clinical Coordinator (CC). This will help to insure that the CC gets all the Unsatisfactory comps. CIs attending the Clinical Instructor Workshop felt that some of the Unsatisfactory comps were not being reported by students.						
The following 7 Unsatisfactory Comps were reported for the Class of 2019: 1st Semester: Pediatric Chest, Routine Chest, Portable Chest, and Hand. 2nd Semester: C-Spine. 3rd Semester: Femur, Humerus.						
	B. All venipuncture lab competency evaluations. (Direct)	100% of students will pass their venipuncture lab competency evaluation.	5th semester	RADT 165 Instructor	No comps for 2019. CT instructor Ryan Mumford RT (R) (CT) will report data for Class of 2020.	Track trends for all tasks on all competency evaluations.
Note: This venipuncture tool is a high priority item and Ryan Mumford has developed competency evaluations that will allow us to track all competency evaluations of our students starting with the Class of 2020. Students enter RADT 165 after taking an extensive online venipuncture course that meets California's strict venipuncture standards and that results in a certificate of completion. We retain copies of all certificates as verification that students have completed this online course successfully prior to entering RADT 165 Fundamentals of Computed Tomography.						
	C. Trauma Case Study Part 2: #1How well you feel your clinical experience has prepared you for trauma radiography? (Indirect)	100 % of students will score ≥ 3.	5th semester	Clinical Coordinator	No 5 out of 11 students scored < 3 with a composite score of 2.68 for the group.	Revise curriculum to enhance trauma radiography.

ACTION: 1. Students will complete Bontrager's Unit 15: Trauma, Mobile, and Surgical Radiography in the 4th semester. 2. RADT 151 (2nd Spring) and RADT 162 (2nd Fall) instructors will continue to reinforce basic trauma, mobile, and surgical positioning concepts during the teaching of routine entry level procedures. 3. Consider establishing a "trauma radiography rotation" on Friday nights during 5th semester RADT 182 Clinical Education.						
2. Students will demonstrate they have the employability skills of a radiography.	A. All Grade Determination Form B's. (Direct)	A. 100 % of students will score ≥ 3.	A. 3rd and 5th semesters.	A. Clinical Coordinator	Yes 3.75	Action Track and compare semester scores.
3rd and 5th semester combined average scores were 3.69 and 3.82 respectively suggesting student employability skills improved slightly.						
	B. Anonymous Student Clinical Education Self-Assessment Survey. (Indirect)	B. 100 % of students will score ≥ 3.	B. 3rd, 4th, 5th semesters. Note: data not available for 2019.	B. Program Director	Data unavailable for Class of 2019.	Action Track and compare semester scores.
Note: Gary and Tamara attended the JRCERT Outcome Assessment Workshop in Fall of 2018 and this tool was not developed until the end of the spring semester 2019. Therefore, data collection for Class of 2019 using this tool was unable to be accomplished. We expect to have the data beginning with the Class of 2020.						
Category III: Problem Solving and Critical Thinking **Goal III: Students will possess problem solving and critical thinking skills.**						
Outcome	**Tool**	**Benchmark**	**Time Frame**	**Responsibility**	**Result**	**Action**
1. Students will demonstrate critical problem-solving skills performing a variety of challenging radiography procedures.	A. Grade Determination Form B # 3: The student thinks and acts creatively.	A. 100 % of students will score ≥ 3.	A. 3rd and 5th semesters.	A. Clinical Coordinator	A. Yes 11 out of 11 students scored ≥ 3 with a composite score of 3.78 for the group.	Action Track and compare 3rd and 5th semester scores.

3rd and 5th semester combined average scores were 3.86 and 3.71 respectively suggesting critical problem solving skills diminished slightly. We don't consider this to be indicative of something requiring action.						
	B. CSI RT Program Evaluation of Clinical Site # 1 (Gave student opportunities to participate in various radiographic procedures) and # 23 (An adequate number of procedures).	B-1. 100 % of students will score ≥ 3. B-2. 100 % of students will score ≥ 3.	B-1. 3rd and 5th semesters. B-2. 3rd and 5th semesters.	B-1. Clinical Coordinator B-2. Clinical Coordinator	B-1. Yes 11 out of 11 students rated their clinical facility at ≥ 3 with a composite score of 4.8 for #1. B-2. Yes 11 out of 11 students rated their clinical facility at ≥ 3 with a composite score of 4.7 for #23. B-1/B2 Average = 4.75	Action Track and compare data from all clinical sites.

	#1: Opportunities to Participate					#23: Adequate Number of Procedures						
	5	4	3	2	1	5	4	3	2	1		
SLMV	13	1				12	2					
IOC	10	1				9	1					
MPI	7					6	1					
NC	3					3						
SLE	2	1				2	1					
M	1	1				1	1					
C	4	2				2	3	1				
SLWR	3					1	2					

Note: There were 2 students at Cassia during this training period and now there is 1, which should additionally enhance the adequacy of procedures that are available to students.

SLJ	3					1	2						
Total	46	+6	=52			37	+13	+1	=51				
	x5	x4				x5	x4	x3					
	230	+24	=254			185	+52	+3	=240				
			÷52	=4.8					÷51	=4.7			
										+4.8			
										=9.5	÷2	**=4.7**	

2. Students will demonstrate basic analog and digital image analysis.	A. RADT 151 Radiographic Procedures Lab Assessment, #1-3 (Direct)	A. 100 % of students will score ≥ 3.	A. 2nd semester.	A. RADT 151 Instructor.	A. No 10 out of 12 students did not score ≥ 3 with a composite score of 2.3.	Track and compare trends between 3.3.2.A, 3.3.2.B., and 3.3.2.C.
RADT 153 Image Analysis will emphasize more: (1) focused instruction on the analog and digital exposure variables and their effects on analog and digital image quality; (2) focused instruction on applying a practical basic image analysis strategy that insures diagnostic quality; and (3) practical image analysis experience using a variety of images.						
	B. RADT 162 Radiographic Procedures Lab Assessment. (Direct)	B. 100% of students will score ≥ 80%.	B. 4th semester.	B. RADT 162 Instructor.	B. No 10 students scored ≥ 80%. 1 student scored 76.1% for a composite score of 89.7% for the group.	Track and compare trends between 3.3.2.A, 3.3.2.B., and 3.3.2.C.
	C. Student Image Analysis Self-Assessment Survey, #1-5. (Indirect)	C. 100 % of students will score ≥ 3.	C. 5th semester.	C. Clinical Coordinator	C. Yes 11 out of 11 students scored ≥ 3 for a composite score of 3.6.	Track and compare trends between 3.3.2.A, 3.3.2.B., and 3.3.2.C.
The data trend between 3.3.2.A, 3.3.2.B., and 3.3.2.C., shows steady improvement in the student's ability to demonstrate basic analog and digital image analysis. There was considerable improvement from RADT 151 Lab assessment to RADT 162 Lab Assessment. And, students themselves believed their image analysis skills were improving, which we would expect as they gain experience.						
Category IV: Communication Skills **Goal IV: Students will communicate and interact effectively with patients and staff.**						

Outcomes	Tools	Benchmark	Time Frame	Responsibility	Result	Action
1. Students will provide appropriate patient instructions that prevent repeats due to motion prior to making an x-ray exposure.	A. All Unsatisfactory Competency Evaluation Task # 14: Patient Instructions. (Direct)	A. ≥ 95% combined satisfactory rating.	A. 3rd - 4th and 5th semesters.	A. Clinical Coordinator	A. Yes 7/7 = 100%	Track trends and compare.
	B. Anonymous Repeat Images Due to Patient Miscommunication Questionnaire # 1: How many repeated images due to patient instructions communications error. (Indirect)	B. ≤ 7.5% of all estimated repeated images due to communications errors.	B. 3rd, 4th, and 5th semesters. Note: 5th semester is the first time this tool was used so data for 3rd and 4th semesters not available.	B. Clinical Coordinator	B. No 10.8 %	
Estimated total number of images per student = 722 images X 11 students = 7942 estimated total number of images 5th semester for RADT 182. Estimated total number of repeated images 5th semester = 539. Estimated total number of repeated images due to communication errors = 58. Estimated repeated images NOT due to communications errors = 539 – 58 = 481. Percent of repeated images due to communication errors = 58 ÷ 539 = 10.8%.						
2. Students will be effective critical communicators in the clinical setting.	A. Clinical Instructor Student Effective Communication Survey. (Direct)	A. 100 % of students will score ≥ 3.	A. 3rd and 5th semesters. Note: Data was only collected for 5th semester as outcome was not in place until 5th semester.	A. Clinical Coordinator	A. Yes 11 out of 11 students scored ≥ 3 for a composite score of 3.83 for the group.	Track data from CI surveys and compare semesters.
		Student / 3rd Sem. / 5th Sem. and <4 Scores 1 / / 4 2 / / 4 3 / / 3.9 (9) 4 / / 3.6 (1,2,3,4,10)		Although CIs perceived all students as communicating above the benchmark score of 3, students 6 and 4 were rated lower than a score of 4		

		5		4.0	in the most communication areas, suggesting possibly a need for these students to improve their overall level of communication in the clinical setting in a variety of areas. Student 6 showed the need for greatest improvement.	
		6		3.2(1,3,5,6,7,8,9,10.12.13)		
		7				
		8		3.9 (12)		
		9		3.7(5,7,12)		
		10		4		
		11		4		
	B. Anonymous Student Radiographer Effective Communication Survey. (Indirect)	B. 100 % of students will score ≥ 3.	B. 3rd and 5th semesters. Note: Data was only collected for 5th semester as outcome was not in place until 5th semester.	B. Clinical Coordinator	B. Yes 11 out of 11 students scored ≥ 3 for a composite score of 3.67 for the group.	Track data from student surveys and compare semesters.
Category V: Professional Growth and Development Goal V: Students and graduates will behave ethically.						
Outcomes	**Tools**	**Benchmark**	**Tim Frame**	**Responsibility**	**Result**	**Action**
1. Students will adhere to ethical standards of practice.	A. Grade Determination Form B-#5: Professional Ethical Conduct. (Direct)	A. 100 % of students will score ≥ 3.	A. 3rd and 5th semesters. Note: Data was only collected for 5th semester as outcome was not in place until 5th semester.	A. Clinical Coordinator	A. Yes 11 out of 11 students scored ≥ 3 for a composite score of 3.95 for the group.	Track data and compare.
	B. Anonymous Student Radiographer Ethics Self-Assessment. (Indirect)	B. 100 % of students will score ≥ 3.	B. 3rd and 5th semesters. Note: Data was only collected for 5th semester as outcome	B. Clinical Coordinator	B. Yes 11 out of 11 students scored ≥ 3 for a composite score of 3.78 for the group.	Track data and compare.

			was not in place until 5th semester.			
2. Employers will be satisfied with the overall personal skills (i.e., safety, flexibility, creativity, communication, professionalism) of graduates.	A. CSI Rad Tech Program Class of 2019 Employer Survey # 5: Please rate this person's overall personal skills (i.e., safety, flexibility, creativity, communication, professionalism).	A. ≥ 90 % combined satisfactory rating of those surveys received.	A. 6 months after May 2019 graduation.	A. Program Director	A. Yes 100% of 6 respondents as of 2/11/2020 Data collection through Survey Monkey is in progress.	Track data and compare.
	B. Anonymous RT Radiographer Scope of Practice Survey.	B. 100 % of students who respond to the survey will score ≥ 3.	B. 6 months after graduation.	B. Program Director	B. Yes 57 total points ÷2 graduates evaluated =28.5 per graduate ÷9 questions=3.1	Track data and compare.

Note: This 19 question anonymous survey was edited down to 9 questions (required by Survey Monkey to avoid paying a fee). Most available email addresses of 2019 graduates were used. Only two responded. It was surprising to learn that the two respondents had different responses concerning: (1) applying ALARA to minimize exposure; (2) identifying and responding to emergency situations; (3) providing patient education; (4) educating and monitoring students and other health care providers; and (5) performing radiographic and fluoro procedures as prescribed by a licensed practitioner.

College of Southern Idaho
Radiologic Technology Program
Minutes of the Program Advisory Meeting
For the Class of 2019 Outcomes Assessment Plan

Radiologic Technology Program Advisory Committee Meeting Minutes

February 19, 2020

HSHS Conference Room 139
10:00am – 2:00pm

Present: O. Gary Lauer	CSI RADT Program Director	glauer@csi.edu		
Tamara Janak	CSI RADT Clinical Education Coordinator	tjanak@csi.edu	208-732-6716	
Jayson Lloyd	CSI HSHS Instructional Dean	jlloyd@csi.edu	208-732-6547	
RoseAnna Holliday	CSI HSHS Department Chair	rholliday@csi.edu	208-732-6737	
Rene Rambur	CSI HSHS Student Advisor	rrambur@csi.edu	208-732-6730	
Pat Weber	CSI Center for New Directions	pweber@csi.edu	208-732-6688	
Rae Jean Larsen	CSI Office Specialist	rlarsen@csi.edu	208-732-6701	
Ryan Mumford	SLMV CT Supervisor	ryanm@slhs.org	208-814-1520	
Kelsey Dietz	SLMV Education Coordinator	kelseydietz24@gmail.com		
Michelle Higley	Cassia Medical Center Clinical Instructor	michelle.higley@imail.org		
Stacey Mitchell	Product Specialist, Turn Key Medical	smitchell@turn-keymedical.com		

Absent:

Thomas Bandolin	CSI Career Readiness Facilitator	tbandolin@csi.edu	208-732-6303	
Justin Vipperman	CSI Grant Writer	jvipperman@csi.edu	208-732-6258	
Robert Schramm	SL Elmore Clinical Instructor	schrammr@slhs.org		
Barry Pate	CTE Instructional Dean	bpate@csi.edu	208-732-6415	
Jake Kerley	Account Executive, Turn Key Medical	jkerley@trun-keymedical.com		
Lindsay Smith	CRMC Director of Diagnostic Imaging	Lindsay.Smith@imail.org		
Rochelle Anderson	SLMV Manager of Diagnostic Imaging	andersro@slhs.org	208-814-1521	
Melissa VanNoy	SLMV Imaging Clinical Education	melissava@slhs.org		
Alexi Hagen	CSI RADT Freshman Student	ajhagen@csi.edu		

Introduction and Purpose of Meeting:	Gary Lauer called the meeting to order at 10 am. Members were introduced and the agenda was explained.
Review and Approval of Minutes:	The minutes from the February 27, 2019 Program Advisory Committee Meeting were reviewed and discussed. A motion to approve the previous minutes by RoseAnna Holliday, seconded by Stacey Mitchell. All approved.
Approval of Class of 2019 Outcome	

Assessment Plan:	The Outcome Assessment Plan for the Class of 2019 was discussed in detail. The plan was sent to the committee members through an email attachment the week prior to the meeting for their review. Topics of discussion included: **Category 1: Graduate Performance**. All benchmarks were met. Ten students passed the ARRT Registry on the first attempt, one did not. The class scored a composite of 82. Motion to approve by Jayson Lloyd, seconded by Ryan Mumford. **Category 2: Clinical Performance**. Five tools were identified for Category 2. Due to a revision of the outcome assessment plan after attending the JRCERT Outcome Assessment Workshop in Chicago in November 2018, data supporting two tools was not collected. Outcome 2.2.1C: Trauma Case Study Part 2 Question #1 was not met. A "trauma radiation rotation" on Friday evenings and an optional rotation at Intermountain Medical Center (Trauma I) in Salt Lake City will give students more opportunities to be involved in trauma radiography. A motion to approve by RoseAnna Holliday, seconded by Kelsey Dietz. **Category 3: Problem Solving and Critical Thinking**. Five tools were measured. 3.3.2A and 3.3.2B: Students will demonstrate basic analog and digital image analysis were not met. However, students showed steady improvement in their image analysis skills as their training progressed. The procedures labs have been restructured to improve student learning. The first hour is practice and documentation, the second hour students are randomly selected to do a performance while the rest of the class observes. This has improved student learning. Motion to approve by Jayson Lloyd, seconded by Stacey Mitchell. **Category 4**: **Communication Skills**. Four tools were measured. 4.4.1B Anonymous Repeat Images Due to Patient Miscommunication was not met. Students estimated their repeats due to patient miscommunication and may have overestimated the number. The clinical education Weekly Exam Log will be improved to include instructions to document the reason for any repeat to provide more accurate data. Motion to approve by Ryan Mumford, seconded by Kelsey Dietz. **Category 5**: **Professional Growth and Development**. Four tools were used to evaluate the outcomes. All were met. Point of interest: students scored themselves lower than their clinical instructors on their ethical behavior implying they trusted the surveys would remain anonymous. It was suggested we use social media to get surveys to graduates to improve response rates from them. Motion to approve by Jayson Lloyd, seconded by RoseAnna Holliday. The outcome assessment plan for 2019 was revised to include indirect along with direct tools to evaluate student performance. Because the plan was implemented in their 4th semester some data was not collected. The plan will be fully developed for the Class of 2020. It was noted some of the reported results did not match the benchmark wording so the results will be amended to reflect the metrics of the reported results.

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	A motion to maintain the current mission statement was made by Kelsey Dietz, seconded by Ryan Mumford. A motion to maintain the current goals was made by Jayson Lloyd, seconded by RoseAnna Holliday. A motion to approve the Class of 2019 Outcome Assessment Plan by Jayson Lloyd, seconded by Michelle Higley. All approved.
Equipment Upgrades:	Turn-Key Medical upgraded the Agfa CR system to include the Target Exposure Index (TEI), Exposure Index (EI), and Deviation Index (DI) on all images. This has been a great improvement to student learning. The Cannon DR system is too old to make upgrades in the software so TEI, EI, and DI are not available on the images. CSI is the only Radiologic Technology Program in Idaho that has not upgraded to a wireless DR system. Our current DR room is not state-of-the-industry. It does not reflect the equipment students are expected to work with in their clinical rotations. A new DR image receptor and software is needed to keep current with industry standards. Turn-Key did full PMs on all equipment in the lab during 2019. A Fluke RaySafe dosimeter was purchased with CTE funds in 2019. This gives us the ability to get real-time dose measurements on exposures of phantoms in the lab.
Travel:	Tamara travelled to Chicago in November 2019 to attend the JRCERT 50th Anniversary Conference. The conference had many interesting speakers with an opportunity to network with other radiologic technology educators from around the US. It was suggested benchmarks be changed to state 100% of students would perform at the level specified. We have adjusted our outcome assessment benchmarks to reflect this. Gary and Tamara attended the ISRT annual conference in Twin Falls in April 2019. Both had the opportunity to be presenters at the conference. The 2020 ISRT conference will be held in Boise in April. It was noted there are no CSI funds for travel this year. Tamara is arranging a trip to Intermountain Medical Center in Salt Lake City to establish an optional clinical education rotation for 5th semester students to get an opportunity to be immersed into a Trauma I hospital.
Venipuncture Course:	The class of 2019 was the first to take the Pedagogy Online Learning Systems Venipuncture Certification for Radiologic Technologists. Ryan observed students were much better prepared to start

	IVs on the simulation arms after this instruction in his CT course. Ryan has developed a new rubric to assess IV proficiency. He is working on a procedure to give students an opportunity to start IVs on actual patients in the clinical setting. It will need to be approved by each hospital.
Clinical Instructor Workshop:	Tamara gave an update on the 2019 Clinical Instructor Workshop. The biggest concern was students are not always turning in their unsatisfactory comps. The group discussed the situation and decided to change the chain-of-custody for any unsatisfactory comps to assure they get to the clinical coordinator. The 2020 Clinical Instructor Workshop will focus on the need for thorough documentation of student behavior. Students deserve honest feedback and the program needs the documentation to track any behaviors that may cause concern.
Mammography Course Update:	The 2020 Mammography Conference will be held March 13 – 16. RTs already certified in mammography have the option to enroll in the eight hour tomosynthesis class only. Marketing and registration for the conference has been taken over by workforce training. The HSHS scholarship committee has pledged money to help with the $675 registration fee for current CSI Radiologic Technology students. St. Luke's Breast Imaging in Boise has reached out to discuss the possibility of developing a mammographic clinical rotation for students of the conference. A question of liability insurance will have to be answered first before a rotation can be developed. RoseAnna stated the CNA and Phlebotomy programs are workforce training programs but still have access to CSI clinical rotations through St. Luke's. Mammography may fall under the same umbrella as them.
Clinical Manpower updates:	Michelle Higley stated Cassia Medical Center is fully staffed but change is always happening. They hired two of the 2019 graduates. Ryan Mumford indicated St. Luke's Magic Valley has a few openings. Two from the class of 2020 have already been hired. Kandis Pedersen, Imaging Director for St. Luke's Southern Idaho has been working on recruiting efforts for St. Luke's. She has volunteered to speak with students during their Clinical Education Workshop to help them understand the job market. Idaho's population is growing so there is a large demand for RTs across the state with many opportunities available for graduating students. St. Luke's Magic Valley is having a hard time recruiting new RTs. They rarely offer full-time benefited positions to new graduates so students are electing to take other job opportunities.
Medical Imaging Industry Update:	Stacey reported the biggest change for this year is the requirement that equipment use Windows 10 instead of Windows 7 for security reasons. Upgrades are very expensive and will take most of the equipment budgets for many hospitals. Because the interface is different the upgrade will require staff

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	training. Windows 10 will not be available until fall 2020. It would be included with a new DR system if we get approval to purchase one for the CSI Rad Lab. Artificial Intelligence (AI) is being used more in CT to lower the dose to the patient and to improve image quality. AI does not improve itself with use, but collects data to expand its knowledge for future versions of the software.
Freshmen and Sophomore Class Updates:	Many students in the sophomore class have already started jobs. Everyone is expected to graduate. There is one student who is predicting a failure on the Registry. The freshman class is a very strong group. They have embraced the curriculum and use their lab time wisely handling the equipment like pros.
Other:	Our Radiologic Technology program is working well with myClinicalExchange. Tamara sets up one rotation for the entire semester and the clinical instructors at St. Luke's determine the specific time and location of each student's rotation eliminating the need to go through St. Luke's Student Services and myClinicalExchange for weekly rotations reducing some of the chaos experienced by other programs. The clinical instructors understand the clinical performance standards well and make sure each student is given the opportunities they need to complete their clinical rotations. Students are also held responsible for letting the clinical instructors and other staff RTs know what exams they need to complete their training. The St. Luke's clinical instructors have worked well with CSI setting up rotations and minimizing the confusion with the new portal.
Meeting Adjourned:	Gary Lauer thanked all attendees for travelling to Twin Falls to attend the Program Advisory Committee meeting. The meeting was adjourned at 2 pm.

Program Effectiveness Measures Category I: Graduate Performance	
Program Completion Rates	Benchmark for 1.1.1 of ≥ 80% annual graduation rate was met at 91.6% as 11 out of 12 students completed the program and graduated.
ARRT Pass Rates & Scaled Scores	All 4 benchmarks for 1.1.2 were met. Annual first time pass rate was ≥ 80% at 91%. 5-year first time pass rate was ≥80% at 96.6%. Annual program mean scaled score on the ARRT exam was ≥80% at 82. 5-year program mean scaled score on the ARRT exam was ≥ 80% at 87.2. Note: The decrease in 5-year scores from last year's score of 95 was due in large part to the fact that the Class of 2019 had one fail and a few low scorers.
Employment Rates	Benchmark for 1.1.3 of ≥80% of those seeking employment (excluding military and continuing education) was met at 100% with 10 out of 11 students obtaining employment within 6 months. One student did not seek employment.
Graduate Satisfaction	Benchmark for 1.1.4 of ≥80% of students receiving a quality education was met at 100% for all 11 students.
Employer Satisfaction (of Graduate Technical Skills).	As of 10-2-2020, the benchmark for 1.1.5 ≥ =95% combined satisfactory rating of those Survey-Monkey surveys returned was met with only 6 respondents at 100%.
Amendments to Category I: Graduate Performance (Program Effectiveness)	None
Summary	8 benchmarks reflecting 5 outcomes that were measured for Category 1: Graduate Performance were met. Students are completing the program, graduating, passing the ARRT exam, gaining employment, receiving a quality education and satisfying employers with their technical competence.
Student Learning Outcomes (Categories II – V)	
Category II: Clinical Performance	2 out of 3 benchmarks reflecting 2 outcomes for Category II: Clinical Performance were met. 2.2.1.C was not met with 5 out of 11 students scoring < 3 compared to the benchmark of a ≥3 score. Their composite score was 2.68 for the group. An effort will be made to emphasize trauma radiography knowledge and application in class, lab, and clinical education. Note: The process of transitioning into this new outcome assessment plan from the old plan did not allow for data reporting for 2.2.1.B. (student venipuncture competencies) and 2.2.2.B. (Anonymous Student Clinical Education Self-Assessment Survey), which both will be collected next year for the Class of 2020.
Amendments to Category II: Clinical Performance	None
Summary	2 out of 3 benchmarks reflecting 2 outcomes for Category II: Clinical Performance were met. Students are demonstrating that they have the clinical and employability skills of a radiographer.

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Category III: Problem Solving and Critical Thinking	4 out of 6 benchmarks reflecting 2 outcomes for Category III: Problem Solving and Critical Thinking were met. 3.3.2.A. was not met with 10 out of 12 students scoring < 3 compared to the benchmark of a ≥ 3 score for all students. The composite group score was 2.3. 3.3.2B was not met with only 10 out of 11 students scoring ≥ 80% compared to the benchmark of 100% of students scoring ≥ 80%. The student who did not achieve the outcome scored 76.1%. To assist improving basic analog and digital image analysis, Gary researched and presented to the 2019 ISRT Conference in Twin Falls, ID., RADIOGRAPHIC IMAGE ANALYSIS IN THE DIGITAL AGERADT. This activity enhanced Gary's mastery of the subject matter which has allowed him to revise RADT 153 Image Analysis to emphasize more: (1) focused instruction on the analog and digital exposure variables and their effects on analog and digital image quality; (2) focused instruction on applying a practical basic image analysis strategy that insures diagnostic quality; and (3) practical image analysis experience using a variety of images.
Amendments to Category III: Problem Solving and Critical Thinking	None
Summary	5 out of 6 benchmarks reflecting 2 outcomes for Category III: Problem Solving and Critical Thinking were met. Students are demonstrating critical problem-solving skills performing a variety of challenging radiography procedures. There is room for improvement in RADT 153 Image Analysis and Gary has taken steps to revise RADT 153 Image Analysis based on his enhanced mastery of the subject matter.
Category IV: Communication Skills	3 out of 4 benchmarks reflecting 2 outcomes for Category IV: Communication Skills were met. 4.4.1.B. was not met with students having 11% of all estimated repeated images due to communications errors instead of the benchmark of ≤7.5%. Note: The estimated total number of images per student = 722 images X 11 students = 7942 estimated total number of images 5th semester for RADT 182. Estimated total number of repeated images 5th semester = 539. Estimated total number of repeated images due to communication errors = 58. Estimated repeated images NOT due to communications errors = 539 – 58 = 481. Percent of repeated images due to communication errors = 58 ÷ 539 = 10.8%. To rectify the inaccuracies in estimating repeats due to communication errors, which may be the reason for exceeding the benchmark of ≤7.5% to 11% here, there will be an adjustment to the Weekly Exam Log instructions to include a reason for any repeats in the NOTES section. Therefore, students will be able to more accurately count repeats due to communication errors.
Amendments to Category IV: Communication Skills	None
Summary	3 out of 4 benchmarks reflecting 2 outcomes for Category IV: Communication Skills were met. Students are providing appropriate patient instructions that prevent repeats due to motion prior to making an x-ray exposure. Students are perceived as effective critical communicators in the clinical setting. A process has been defined to insure greater accuracy in acquiring data regarding repeats due to communication errors.
Category V: Professional Growth and Development	4 out of 4 benchmarks reflecting 2 outcomes for Category V: Professional Growth and Development were met.
Amendments to Category V: Professional Growth and Development	None

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Summary	4 out of 4 benchmarks reflecting 2 outcomes for Category V: Professional Growth and Development were met. Students are adhering to ethical standards of practice. Employers are satisfied with graduates overall personal skills (i.e., safety, flexibility, creativity, communication, professionalism).
Assessment Plan Review	
Summary	21 out of 26 benchmarks (84%) reflecting 13 measured outcomes across 5 categories and 5 goals were met. 2.2.1.B. (venipuncture comps) and 2.2.2.B (Anonymous Students Clinical Education Self-Assessment) were not included (measured) as data was not available for the Class of 2019 due to transitioning from the old outcome assessment format to the new format used in this report.
Mission Statement	No recommended changes were made to the program mission statement: The mission of the College of Southern Idaho's Associate of Applied Science Radiologic Technology Program in Radiography is to prepare students to become graduates for entry level employment as ARRT Registered Technologists in Radiography.
Goals	No recommended changes were made to the program goals established to achieve the mission: (1) Measuring program effectiveness on an ongoing basis; (2) Producing clinically competent students; (3) Producing students with problem solving and critical thinking skills; (4) Producing students who can effectively communicate and interact with patients and staff; and (5) Producing students and graduates who behave ethically.
Recommended changes to the assessment plan.	None
Final Thoughts	The Class of 2020 Outcome Assessment Plan is to be assessed at the next annual program advisory committee meeting during February 2021.