

Radiologic Technology Program Advisory Committee Meeting Minutes Date & Time: March 21, 2017 6 p.m. Campus & Room # EGF – Room 290

Attendees: Deb King, Lisa Bohm, Ryan Hager, Amy Swehla, Kayla Krom, Emily Lewandowski, Jessi Nicola Katelyn McFarland

Following 6 p.m. dinner
October 2016 meeting minutes were emailed to all members for review & approval. Minutes were briefly recapped by Deb K.
 Al still on leave. Deb Beland has been established as the CC for now. Al's anticipated return is the start of summer session which is May 15th. Self – Study submitted – September will be site-visit New students have been selected. Waiting for conformation from two. NO ACTION REQURIED
In response to the last Advisory meeting: 11 – 7 shift at Altru hospital has been utilized. The program will utilize this shift for incoming new students fall semester as well since this is recognized as "regular hours". Actions due to Clinic Closure: Essentia health is taking a third SR student. On a trial basis, they are taking a third JR student. We are hoping this continues as students are indicating they are getting good fluoro experience and additional c-arm experience; busy facility. Ortho Dept. has two students scheduled rather than one and that seems to be



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		going well; good workload. We are back to utilizing FMC since they are busier due to the clinic closure. We will see how staffing changes and determine if we will continue to have FMC in the rotation.
		Altru Clinic CI Deb Lessard has accepted a position in Fargo. Deb K. is still working on determining how to shift CI duties due to the shifting of current CI's.
		1. Rad Protection Guidelines – Clinical Sites dept. posting Still need to confirm document for posting with a few sites. Deb added the supervising statements to each facility document. It is important that all students rotating through each clinical site are aware of each facilities requirements in regards to shielding, documenting FDLMP, paperwork requirements for female age groups etc. There is a difference from site-to-site so posting the criteria in each procedure room serves as assurance for patient safety and also constant reminders of the supervision policies.
		ACTION/OUTCOME : Deb K. will be following up with each site to assure approval of any document revisions as well assurance of postings in the procedure rooms.
		2. Deb K. decided not to pursue Grafton as a clinical site at this time. Currently we have half our students on the road for clinical rotations and Deb is not sure she wants to add another distance site in the mix. At the current time, the third student from each cohort scheduled at Essentia has been proving to be very advantageous for student access to additional workload, particularly c-arm and fluoro.
		ACTION/OUTCOME:
		Deb will visit with both Kerrie Lewis and Jeanne prior to submitting the final summer schedule and determine if Essentia will continue with three students for the two summer rotations.
Review of general program policies	Deb K.	Advisory members in attendance reviewed the following program specific policies.



		1. Absent Policy
		Course Grade for progress Halform Ballou
		3. Uniform Policy
		ACTION/OUTCOME: Board members present did not recommend changes to the current absent policy. Members in attendance commented the current policy regarding CTO assures students are prepared for employer expectations. Course Grade for progress/continuation: No recommendations for a change in this
		policy were expressed. The program continues to maintain policy that all courses must be completed with a "C" or above to allow progression in the program.
		Deb K. indicate the most recent cohort was something challenged at finding brown scrubs. This was mandated by Altru so all students from various professions represent which department/program. Deb will visit with an Altru representative prior to fall semester to see if there are any changes to those requirements and see if another color may be available.
		Deb also indicated that each facility can be unique to their requirements in regards to uniforms/professional appearance and each clinical instructor to include these requirements as part of their student orientation sessions.
5. Review of Program Mission, goals,	Deb K.	Deb provided members in attendance the current mission, goals, outcomes. Since the program just submitted the self-study and will have a site-visit in September, no recommendations for revisions were made at this time. Revisions to SLO's generally involve revisions to assessment tools. These items will be reviewed every three years and March 2017 meeting was that cycle.
outcomes	Deb K.	ACTION/OUTCOME:
		No action, revisions, recommendations regarding these items at this time.
6. Curriculum updates		Common Course Outlines and curriculum revisions:



		Deb has revised four common course outlines in anticipation for curriculum revisions. Rad Physics, Imaging Production/Evaluation, Rad. Proc. III, Imaging Equipment/QA. See attached transition plan. These courses were due for a revision in outcomes and alignment as we have been discussing these revisions for some time. With the ARRT content updates released in April, the incoming cohort should start with these course revisions. The new content will start with the fall 2017 cohort. The common course outlines were approved by AASC just yesterday. These courses will now be revised to accommodate the new and revised outcomes; that will most likely take place this summer upon Al Shervold's return since he instructs these courses. A new textbook was adopted for these courses so we are looking at a very refreshing revision! Deb anticipates the re-alignment and revision of content, new textbook resource, updated assignments, tests etc. will provide a stronger foundation from semester one to semester four in many areas that students feel a little more challenged with in regards. The new course "Advanced Imaging" will be more of a modality exploration but the equipment aspect of modalities has been removed from Imaging equip course and brought into one. There will most likely be a few more revisions to course outlines and content in the future but these were the major revisions and needed to be completed ASAP for AASC approval so those were top priority. ACTION/OUTCOME: Deb will visit with Al upon his return and discuss needed changes to how and when students are scheduled in modalities and perhaps how often.
7. Assessment Process	Deb K.	Assessment plan results and analysis were provided to members. The only areas of assessment requiring review are stated below since the assessment plan was presented and reviewed during the fall meeting. The following comments/recommendations were noted:



1. Employer Surveys

All benchmarks were met where employer surveys are utilized for assessment. Seven submissions and four returns. Deb stated a 100% return would certainly be advantageous; she often sends out two or three requests. We need to rely on alumni completed their surveys with supervisor contact information in order to submit employer surveys.

2. Alumni Surveys

All benchmarks were met where alumni surveys were utilized. Six of 11 received.

3. SLO #2 – Clinical V rotation eval. – Committee members discussed possible revision to this tool during the fall meeting. This outcome is: *Students will demonstrate radiation safety practices by following the principles of ALARA*. The current tool is the last clinical rotation evaluation and benchmark is set at 3.2 on a scale of 4; five components on a 4.0 scale. Last fall discussion was whether or not this benchmark is low for this particular outcome. Of the five areas assessment, last semester students should be assessed at 100% - majority agrees. Deb K. proposed changing this benchmark to 100% of the cohort will assess at 3.5

Deb K. proposed changing this benchmark to 100% of the cohort will assess at 3. or higher. All in attendance agreed to the revision;

Outcome: increase benchmark.

4. Bio/Protection – Research project on "best practices" regarding radiation safety. Implemented spring 2016. Deb Beland is requiring both research and presentation components to this project.

Minutes for Class of 2016 assessment inquire if we should change this benchmark or how it is worded.

Consideration for 2017; increase the benchmark to 90% or change benchmark to overall class average. CURRENT BENCHMARK: 100% of students will score 80% or higher.

OUTCOME: - Tabled Deb K. will visit with Deb Beland regarding any revisions



		she may have made to grading rubric since she is requirement an additional component to this project. Attendees agree an increase in this benchmark as this project relates to best practices/radiation protection makes sense but would need more information as to how this project is assessed. Since this class is currently in session, revisions to benchmark may affect the 2018 cohort. 5. Five-Year Program Review – draft in process. Deb hopes to schedule meeting
		with Dean next week to go over the draft.
Student Progress		Deb solicited feedback from members in attendance regarding student progress, concerns, issues etc. No concerns or issues were noted. Deb indicated her appreciation for techs/Cl's that are requiring students to set "manual" techniques as well as requiring students to take ownership at critiquing their own images.
	Deb K.	In the lab, students will see more opportunity for critical case studies in the current semester II procedures class. At this time, students have been in clinical longer and may have established better building blocks to apply trauma applications in the lab setting. Deb presents case studies and students in groups have to determine exam needs regarding patient care and outcome. Deb indicated she sees more thinking/judgment this semester compared to students first semester which makes sense since they have been in clinical longer.
		NDSRT Conference: 23 students in total attended the state conference for the Friday session. Fourteen junior students and nine senior students. This was very impressive and was well observed by conference committee members! Certainly since the conference was in Fargo, no hotel etc. was required so it was cost effective.
MEETING ADJOURNED AT 8:10 P.M.		

Minutes submitted by Deb King – Program Director