

Radiology Program Advisory Committee Fall 2024 Meeting

Room: Blue Moose EGF, MN Date of Meeting: October 23, 2024 Time of Meeting: 5 pm

Attendees: Debra Beland, Ryan Tull, Tanya Kildal, Brianna Iverson, Tabitha Jones, Morgan Ziegler, Chelsea Stone, Amy Swehla, Sara Risky, Jess Tanke, Student rep: Haley Davis, Student rep: Bryan Hann

Absent: Christina Fontaine, Lisa Bohm, Kayla Kuznia, Katelyn McFarland, Taylor Sivertson, Shelly Sorenson, Breanna Brintnell, Leah Smeby, Kayla Olson,

Topic	Responsible Party	Discussions/Outcomes									
Call to Order	President: Beland Time: 5 pm										
Last Meeting Minutes		Approved via emails, no changes									
OLD BUSINESS:											
		None									
NEW BUSINESS:											
Program Effectiveness Data -Annual Update	Beland	<p>Pass Rate/Scores Analysis of Class of 2024 The committee reviewed Class of 2024 ARRT 1st time pass rate: 100% Also assessed 2022, 2023, and 2024 categories by comparing scores in the 8 scoring sections.</p> <table><tr><th>Class</th><th>Lowest Category</th><th>Highest Category</th></tr><tr><td>2022</td><td>7.7 in Radiation Physics and Radiobiology</td><td>8.7 in Radiation Protection</td></tr><tr><td>2023</td><td>7.8 in Thorax and Abd Procedures</td><td>8.4 in Image Acquisition and Evaluation</td></tr></table> <p>Assessment of scores doesn't support a certain category overhaul. Noted that image acquisition and evaluation are strong suits for graduating students. Lowest category score for 2024 was 7.8; highest was 8.7.</p> <p>Employment Rates: 100% 13 students have field related jobs, or are continuing their education; 1 no response – 100% over the past 5 years also</p>	Class	Lowest Category	Highest Category	2022	7.7 in Radiation Physics and Radiobiology	8.7 in Radiation Protection	2023	7.8 in Thorax and Abd Procedures	8.4 in Image Acquisition and Evaluation
Class	Lowest Category	Highest Category									
2022	7.7 in Radiation Physics and Radiobiology	8.7 in Radiation Protection									
2023	7.8 in Thorax and Abd Procedures	8.4 in Image Acquisition and Evaluation									

		<p>Program Completion Rates: 14 of 15 (1 student dropped 1 day prior to orientation, so we had a class of 15) for the Class of 2024 1 academic drop 93%</p> <p>JRCERT Program Effectiveness form: Committee reviewed the 5 year data from the JRCERT's program effectiveness report 5 students out of 70 in the last 5 years hadn't passed on 1st attempt</p>
Supervision Policy Review - Annually	Tull	<p>Annual revisit of the supervision policy was shared/discussed.</p> <p>Tull shared the Trajecsyst process to ensure all staff supervising students have completed the annual training including the video. Also noted that Trajecsyst has been updated to reflect only active/current staff for efficient communication and other needs.</p>
Action Plan Evaluation	<p>Beland</p> <p>Tull</p>	<p>Both our current action plans were reviewed</p> <p>Image Critique Exam -- SLO #3: Students will identify required criteria for routine radiographic images.</p> <ul style="list-style-type: none"> 100% or students score a 77% or > 77% is the program's lowest C <p>An on-going assessment (since Class of 2018); biggest change is the official switch to the RTBC version for the exam. Class of 2024 took BOTH the D2L version and the RTBC version and scores were relatively comparable. So, the program is switching to RTBC as it has been discussed numerous times at advisory meetings.</p> <p>Beland stated: of note, each student does NOT receive the same exam in this way, which she believes is a downfall, but the plus is the up to date content.</p> <p>ARRT pass rate isn't reflective of these low scores.</p> <p>Committee thinks goal and assessment are still valid.</p> <p>Critically Thinking Assessment – SLO #5: Students will apply critical thinking & utilize independent judgment in respect to positioning when exams deviate from routine.</p> <ul style="list-style-type: none"> Overall Class average of 90%> <p>Another on-going assessment since Class of 2023...87% average Class of 2024...89%</p> <p>As of fall of 2023 Tull had added and continues to utilize critically thinking assessments to each anatomical testout, hoping to trigger critical thinking processes well before this assessment.</p> <p>Committee agrees goal and assessment are still valid.</p> <p>Efficiency is key for a passing assessment.</p>

<p>Assessment Plan Evaluation</p> <p>– Due every 3 years (Last one was Oct 2021 – due NOW)</p>	<p>Beland</p>	<p>Next Due: Fall 2027</p> <p>Beland and Tull are requesting movement away from concentration on survey results to assess PLOs/SLOs; some are ok, but survey responses are low for 6-month post grad and new employers 6 mons post. Committee suggested incentives for survey completions. Program exit surveys offer the highest survey completion rates.</p> <p><i>Timeframe – Information shared from JRCERT example: A formative measure used (while students are in the first year of the program), and a summative measure used (when students are close to program completion and/or graduates) is recommended for best practices</i></p> <ul style="list-style-type: none"> • Tools Support Goals? <ul style="list-style-type: none"> ○ Committee reviewed all goal areas; all last semester/capstone projects are reflected in current program assessment ○ Surveys lacking merit due to completion rates... will continue to push for higher return rate ○ Revision of Assessment to assess how students are meeting <i>radiographic image and their corrective actions assessment</i> will be added to Clinical V as an end of program additional assessment. Tull to develop a project focused at analyzing images for appropriate passing criterion, corrective measures needed of images, and overall quality spectrum. Images and conditions will be taken from each unit of procedures to include variety of examinations for student review. <p>Placing in Clinical V for summative assessment – will need to assess the weighted measures for its inclusion in total grade analysis. Title of assessment: Analysis of image critique</p> <ul style="list-style-type: none"> ✓ Goal 2: Graduate students with a foundation for problem-solving and critical thinking in the healthcare setting. ✓ Outcome 6: Students will analyze radiographic images to determine corrective action needed. ✓ Tool #3 will be replaced: Employer Survey analysis of question #8 ✓ Benchmark matching that of Image Critique Assessment <p>In that 100% of students will score 77% or ></p> <ul style="list-style-type: none"> ▪ Verbiage change: Assessment of “Reg. Prep Comprehensive Exam – Image Critique” to be renamed: Reg Prep Comprehensive Procedures Assessment ▪ Title of action plan also will be noted with change <ul style="list-style-type: none"> • Data Appropriate? <ul style="list-style-type: none"> ○ Data to support goals is appropriate; great to have trend tracking included
---	---------------	---

		<ul style="list-style-type: none"> • Benchmarks High Enough? <ul style="list-style-type: none"> ○ No adjustments to current benchmarks ○ Committee agreed they are attainable measures <p>Other projects, ideas, tools for assessment improvement discussed:</p> <ul style="list-style-type: none"> • <i>Technique chart build from end of 1st spring semester – too early for program assessment foundational establishments</i> • <i>Simulated patient interaction with either a diverse patient, or a simulated interaction with members of the healthcare team – when, what class?? Clinical V?? – faculty feel the students should have this professionalism prior to the end of the program, but assessment too early isn't valuable either</i>
Application Process Upgrade	Beland	<p>New application format to an online form through TEAMS/Forms.</p> <p>Beland converted the paper application process into an online application by utilizing Microsoft Forms. Starting Nov 1st, this will be the first implementation of the application. Committee members were able to explore the new process through an example application offered for completion and evaluation via a link/QR code.</p>
PSEO Guidance	Beland	<p>The Rad Tech Program is the pilot program for an effort to support PSEO and dual credit course selection while in high-school. Or even in general for interested students to get off on the right start! The required layout for the course listings on the websites can be challenging for students, parents, and high-school counselors to navigate (without a college advisor). This will support the determination of which courses students could attain while in high school if they are interested in a specific career path. This document will be shared by our new recruiter, at college/career fairs, and is accessible via our program websites (other programs at Northland will have theirs established in the near future).</p>
Agenda addition: Improving new student communication skills	All	<p>New student/young students' communication skills requiring development.</p> <p>As we reviewed the assessment document it was noted that incoming students are lacking in interpersonal communication skills. Need for better evaluation and restatement of current rubrics were discussed.</p> <p>Communication evaluation statements in Trajecsyst will be restructured to include diversity language for supporting better evaluation of student growth in communication abilities with program progression. Clinical technologists assessing student communications are encouraged to reflect the assessment well in these communication evaluations.</p>

		<ul style="list-style-type: none"> Current weekly assessment statement: Communication: <i>Demonstrates appropriate pt. communication prior to & during exam. Communicates with HC personnel in regards to patient needs/task completion.</i> Current Rotational Eval section on communication: <div data-bbox="879 243 1791 782"> <div>Section 6: COMMUNICATION SKILLS</div> <div> <div>1. Demonstrates good/appropriate communication with patients; (not awkward/ no intervention needed)</div> <div> <input type="radio"/> Unacceptable: Intervention required; corrective action needed <input type="radio"/> Needs Improvement: Concerns evident; guidance needed <input type="radio"/> Acceptable: Requires some direction and/or guidance <input type="radio"/> Excellent: Consistently demonstrates proficiency and competence; students meets the criteria. *no concerns </div> </div> <div> <div>2. Follows dept. protocol for patient verification & appropriately addresses patient; (initial rapport)</div> <div> <input type="radio"/> Unacceptable: Intervention required; corrective action needed <input type="radio"/> Needs Improvement: Concerns evident; guidance needed <input type="radio"/> Acceptable: Requires some direction and/or guidance <input type="radio"/> Excellent: Consistently demonstrates proficiency and competence; students meets the criteria. *no concerns </div> </div> <div> <div>3. Demonstrates ability to adequately explain exams to patients.</div> <div> <input type="radio"/> Unacceptable: Intervention required; corrective action needed <input type="radio"/> Needs Improvement: Concerns evident; guidance needed <input type="radio"/> Acceptable: Requires some direction and/or guidance <input type="radio"/> Excellent: Consistently demonstrates proficiency and competence; students meets the criteria. *no concerns </div> </div> <div> <div>4. Demonstrates ability to communicate with patients with respect to diversity.</div> <div> <input type="radio"/> Unacceptable: Intervention required; corrective action needed <input type="radio"/> Needs Improvement: Concerns evident; guidance needed <input type="radio"/> Acceptable: Requires some direction and/or guidance <input type="radio"/> Excellent: Consistently demonstrates proficiency and competence; students meets the criteria. *no concerns </div> </div> </div>
Clinical Updates	<div>Tull</div> <div>Committee members</div>	<p>Tull shared the overall 1st year evaluation themes from comments on weekly or rotational evaluations so far:</p> <ul style="list-style-type: none"> Building confidence Improving communication Setting techniques Motivation – including c-arm work <p>Iverson checked in with the fact that first year students are wanted to split image duties during a patient. Program will address with students that the responsibility of 1 patient is 1 students. Encouragement of fellow students to assist and support in the examination is valid if the student isn't attaining a test out.</p> <p>Iverson also offered the program more CT and MRI rotation options. A 3rd CT observation would be of value to our students, so Tull will look to adjust in the schedule. Thursdays are the top choice for scheduling as it offers the fullest, consistent schedule.</p> <p>Review of when C-Arm cases can be signed in the competency/Blue books was discussed. Students must complete their first unit of Advanced Imaging (summer semester course)</p>

		<p>prior to attempting to comp on both c-arm cases. Yet, students from day 1 should be actively involved with C-arm examinations with registered technologists!</p> <p>Jones updated the program that Fluoro examinations will no longer be offered at Altru South/Professional Center once the new hospital is established. January 2025</p> <p>Stone shared that Maddie Lubinski is the new 2nd tech assigned to Ortho</p> <p>Stone also stated that 2 students assigned to ortho at a time is ideal. When the schedule only allows 1 student, the student often comments on the stress level and amount of work. Tull and Beland are aware of the benefit of 2 students scheduled to Ortho at all times, but sometimes the scheduling doesn't permit. When the cohort isn't at full capacity of 16 due to withdrawals this poses a challenge. The students' schedules are set to allow for equal rotation through all clinical sites, so adjusting a student's schedule to fill that empty rotation doesn't always work, but it is nice to know they are busy and attain many patient care and examination opportunities.</p>
Additional Comments/Questions of Committee Members	All	<p>Tull and Beland will be attending the JRCERT Excellence in Education Conference in Chicago in November</p> <p>Next Fall (2025) the programs re-accreditation process will be underway</p>
Next Meeting:	TBD	Spring 2025
Adjourn:	President: Beland Time: 730 pm	Thank you all for coming to support the program!