## Santa Rosa Junior College Program Resource Planning Process

## Radiologic Technology 2017

## 1.1a Mission

Based on the major missions of the college, the faculty of the Radiologic Technology Program at Santa Rosa Junior College is dedicated to facilitating the growth and development of enrolled students in becoming competent entry-level radiologic technologists to function within the healthcare community they serve.

Program Objectives:

The major goals of the Santa Rosa Junior College Radiologic Technology Program are to assist the enrolled students:

- in performing positioning skills with accuracy, utilizing skills in radiation protection, and demonstrating proper equipment handling;

- in using critical thinking ito recognize image quality and to adapt to non-routine patients and procedures;

- in demonstrating good communication in clinical environment, as well as demonstrating good oral and written communication;

- in demonstrating professionalism and understanding of ethical decision making.

## 1.1b Mission Alignment

Our program mission is based on the college mission. Thus, we do believe that it is well aligned with the District's mission. Of the Stratgic plan listed below, the radiologic technology program embraces all, but is particularly invested in bulletted points #1, #4 and #5.

### Mission

SRJC passionately cultivates learning through the creative, intellectual, physical, social, emotional, aesthetic and ethical development of our diverse community.

• We focus on student learning by preparing students for transfer; **by providing responsive career and technical education**; and by improving students' foundational skills.

• We provide a comprehensive range of student development programs and services that support student success and enrich student lives.

• We support the **<u>economic vitality</u>**, **social equity and environmental stewardship** of our region.

• We promote personal and professional growth and cultivate joy at work and in lifelong learning.

• We foster critical and reflective civic engagement and thoughtful participation in diverse local and global communities.

• We regularly assess, self-reflect, adapt, and continuously improve.

## 1.1c Description

The SRJC Radiologic Technology program serves the community in training and graduating qualified students to become health care providers in Radiologic Technology.

## 1.1d Hours of Office Operation and Service by Location

The program's operational hours span as early as 0700 and as late as 1800 Mondays through Fridays.

The Joint Review Committee in Edcation of Radiologic Technology (JRCERT) defines traditional program hours Monday - Friday within the hours of 5:00 AM through 7:00 PM. The JRCERT will also allow evening and weekend exerience on occasion. No night shift. (JRCERT standard 1.3)

## 1.2 Program/Unit Context and Environmental Scan

N/A for Degree programs, transfer major, general education and basic skills.

Regarding CTE certificates, the program has very good relationships with the various health care agencies.

Recent graduates are still finding employment although not always full time. Many have taken part time or per diem positions. Most recent survey indicates that of all graduates from the class of 2013 looking for work, 69% have found at least some work as a radiologic technologist. Per the JRCERT mandate, we will start to track this at 12 rather than 6 months. Also per a JRCERT mandate regarding transparency, we have posted our mission statement, program SLO's and Program Effectiveness data on the Radiologic Technology homepage. The 5 year trend can be found there.

There was no graduatuing class in 2014.

Statistics regarding the graduates of 2015 indicate that 13 actively sought employment as a radiologic technologist, and of those 11 have been successful indicating 85% employment rate.

Statistics regarding the graduates of 2016 indicate that 17 actively sought employment as radiologic technologists, and of those 15 have been successful indicating 88% employment rate.

## 2.1a Budget Needs

### 2017-2018:

1. Our existing radiography/fluoroscopy room has lost functionality over this past year. The radiography portion is no longer operating at all. The fluoroscopy portion is limited in its

operation, not all of the accessories associated with the fluoro portion still work. Additionally, this equipment is circa 1980's and is no longer commensurate with the industry standard.

Replacement of this equipment is pivotal for our program operation. We have built our curriculum around the ability to demonstrate concepts of radiography in our lab. This includes positioning of the body, central ray angulation, radiation protection, collimation, patient care, exposure factors, overexposure factors, and examples of high quality vs. substandard quality images. Where the lab is most utilized is in the physics and radiobiology courses demonstrating radiation safety and the "what if" scenario; "What if I use 4 times the radiation necessary, what if I place the image receptor backwards, what if my x-ray tube and image receptor are not aligned..." The ability for our program to demonstrate these concepts and the resultant image is critical for our graduates to recognize errors and thereby correct or avoid them.

We have obtained a mobile x-ray machine to use in the short term that was donated to us by one or our generous clinical affiliates. Despite that donation, this is not adequate to demonstrate to our students various labs where we explore grids, automatic exposure control, nor all aspects of scattered radiation and radiation protection. For these reasons, we request a replacement digital x-ray room with associated digital fluoroscopy capability, or alternatively a digital x-ray room with a separate digital fluoroscope "C-arm". Programs director has received general quotes for brand new equipment installed with warranty at \$400K - \$500K. However, our vendor also installs refurbished equipment with new generator components and x-ray tube installed and with a warranty for up to half the cost of new. Finally, we are exploring the possibility of our clinical affiliates donating a room to us still in working order. The college would pay for the de-installation on site, and for the re-installation here on campus. Benefit is 10-25% the cost of new, risk is that there is no guarantee or warranty. In all cases, college will be responsible for dismounting the existing installation and any room modifications prior to the replacement arriving.

The program director presented this issue at the spring 2017 advisory committee meeting.

2. Faculty continue to visit students on a periodic basis, and we again request adequate funding for mileage reimbursement. Since last year we have added one clinical site at a distance of an additional 20 miles south of our previously most southern clinical site. Faculty requested reimbursement for 5860 miles driven duiring the fall 16 / Spring 17 semesters. This doers not include miles during the 8 week summer semester.

3. We request funding to affiliate with additional clinical sites as these opportunities become available. Presently Redwood Orthopedic Surgical Associates has expressed interest in affiliating with us as has Marin OP and potentially Novato Community Hospital Terra Linda OP facility. Any or all of these would be welcome additions and may also allow us to increase the size of our incoming cohort. On the other hand, one of our clinical affiliates is in a deep financial challnge pressently and its future is uncertain.

4. Finally, the State of CA and our radiation protection policy here at SRJC mandates that we have our existing x-ray installation certified for operational safety by a physicist annually. This was last accomplished in April 2017. We have contracted with a different physicist organizastion, and their fee is \$850.00 per visit. We appreciate Mary Kay Rudolph's office funding this ongoing expense.

5. The State of CA has increased their fee for affiliated clinical sites. Presentlty we are associated with 17 sites and expect to perhaps increase by one in the next year. Assuming that we increase by one site our present fee of \$2400.00/yr will increase to \$3350.00/yr. We appreciate Mary Kay's office shouldering this expense.

6. In the unlikely event that the video projector in 4046 was not updated in 2016-2017, we request an update to that capability. Greg Wycoff has proposed a flat panel display computer mounted on the wall as a solution. He indicates that he would be willing to facilitate this as a routine upgrade to the projection equipment in that room. Space is at a premium in 4046, so this wall mounted installation will free up floor space that is presently used for a projection stand.

Tthe video projector does not address the problem of glare from the sunlight coming through the window in 4046 which could be addressed by the installation of a blackout window covering. Sunlight glare is not a problem with the flat panel display making the flat panel display computer a more attractive option.

## Radiologic Technology - FY 2015-16

### 2.1 Fiscal Year Expenditures

Expenditure Category	Unrestricted Funds	Change from 2014-15	Restricted Funds	Change from 2014-15	Total	Change from 2014-15
Faculty payroll	\$80,330.00	5.25%	\$0.00	0.00%	\$80,330.00	5.25%
Adjunct payroll	\$153,975.24	15.35%	\$0.00	0.00%	\$153,975.24	15.35%
Classified payroll	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
STNC payroll	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
Student payroll	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
Management payroll (and Dept Chairs)	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
Benefits (3000's)	\$53,856.33	13.46%	\$0.00	0.00%	\$53,856.33	13.46%
Supplies (4000's)	\$1,234.54	-26.40%	\$0.00	0.00%	\$1,234.54	-26.40%
Services (5000's)	\$5,187.31	75.31%	\$0.00	0.00%	\$5,187.31	75.31%
Equipment (6000's)	\$0.00	0.00%	\$2,409.18	-87.58%	\$2,409.18	-87.58%
Total Expenditures	\$294,583.42	12.47%	\$2,409.18	-87.58%	\$296,992.60	5.57%

### Santa Rosa Campus

#### Other Locations (Includes the PSTC, Windsor, and other locations)

Expenditure Category	Unrestricted Funds	Change from 2014-15	Restricted Funds	Change from 2014-15	Total	Change from 2014-15
Faculty payroll	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
Adjunct payroll	\$1,789.25	5.41%	\$0.00	0.00%	\$1,789.25	5.41%
Classified payroll	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
STNC payroll	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
Student payroll	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
Management payroll (and Dept Chairs)	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
Benefits (3000's)	\$231.60	41.38%	\$0.00	0.00%	\$231.60	41.38%
Supplies (4000's)	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
Services (5000's)	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
Equipment (6000's)	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
Total Expenditures	\$2,020.85	8.57%	\$0.00	0.00%	\$2,020.85	8.57%

### **Expenditure Totals**

Expenditure Category	Amount	Change from	District Total	% of District
		2014-15		Total
Total Expenditures	\$299,013.45	5.59%	\$142,812,136.74	0.21%
Total Faculty Payroll	\$236,094.49	11.63%	\$46,486,773.56	0.51%
Total Classified Payroll	\$0.00	0.00%	\$22,009,293.41	0.00%
Total Management Payroll	\$0.00	0.00%	\$9,770,442.32	0.00%
Total Salary/Benefits Costs	\$290,182.42	11.98%	\$102,858,006.58	0.28%
Total Non-Personnel Costs	\$8,831.03	-63.26%	\$16,325,691.74	0.05%

## 2.1b Budget Requests

Rank	Location	SP	Μ	Amount	Brief Rationale
0001	Santa Rosa	04	01	\$300,000.00	Replacement of Xray tube and table in room 4047. The existing
					installation is no longer operational and parts are no longer available for a
					35-40 year old unit.
0002	Santa Rosa	02	01	\$3,000.00	Faculty logged 5860 miles to participate in student site visits last
					academic year. Based on the college compensation for mileage @ .535, I
					am requesting \$3000 to compensate for mileage. This is distributed per
					faculty documentation of their actual mileage and increase of \$1225.00
					from 2016-17 level is needed to meet this obligation.
0003	Santa Rosa	02	01	\$1,200.00	Three additional clinical sites are required to ensure enough placements
					for student clinical education. Presently, one of our affiliated sites is
					experiencing financial difficulties and it's future is uncertain. Three other
					local clinical sites have made overtures of interest to affiliate with our
					program.
0004	Santa Rosa	04	01	\$850.00	Annual X-ray room annual radiation safety and performance check to be
					accomplished yearly per State of CA mandate. New physicist fee has
					increased since last year.

## 2.2a Current Classifed Positions

Position	Hr/Wk	Mo/Yr	Job Duties
None needed	0.00	0.00	

## 2.2b Current Management/Confidential Positions

Position	Hr/Wk	Mo/Yr	Job Duties
None needed	0.00	0.00	

## 2.2c Current STNC/Student Worker Positions

Position	Hr/Wk	Mo/Yr	Job Duties
Student Workers	0.00	0.00	The radiologic technology program is grateful to
			share the existing student workers in health sciences cluster.

## 2.2d Adequacy and Effectiveness of Staffing

A f/t clinical coordinator position is requested to accommodate two classes of students in the clinical site on different days, not at the same time. The end result is 2 trips to the clinical site rather than just one. Our clinical sites are spread out geographically from Marin to Willits and east to Napa. Radiologic Technology has requested this position for the past 4 years.

Additionally, it has become increasingly difficult to staff our didactic classes AND adequate clinical coordinator coverage utilizing adjuncts only. Radiologic Technology subscribes to the model of 1 clinical coordinator hour per student per week, and based on 39 students currently. According to the Faculty load conversion table (REV: 8/16/16 effective Spring 2017 \* Includes regular ADN program and KAD), 21.25 hours credit lab = 100%. Based on 40 students, that equates to 188% for clinical coordinator alone and this *in addition to* covering all of the classroom instruction. The program director is forbidden from acting as a clinical coordinator per our accreditation.

## Radiologic Technology - FY 2015-16

### 2.2 Fiscal Year Employee Data and Calculations

### **Employee Head Counts**

Employee Category	Count	Change from 2014-15	District Total	% of District Total
Contract Faculty	1	0.00%	306	0.33%
Adjunct Faculty	8	33.33%	1389	0.58%
Classified Staff	0	0.00%	541	0.00%
STNC Workers	0	0.00%	609	0.00%
Student Workers	0	0.00%	616	0.00%
Mgmt/Admin/Dept Chair	0	0.00%	176	0.00%

### **Employee FTE Totals**

FTE Category	FTE	Change from 2014-15	District Total	% of District Total
FTE-F - Faculty	4.6267	9.70%	743.0476	0.62%
FTE-CF - Contract Faculty	1.0000	0.00%	303.3500	0.33%
FTE-AF - Adjunct Faculty	3.6267	12.72%	439.6976	0.82%
FTE-C - Classified	0.0000	0.00%	450.7804	0.00%
FTE-ST - STNC	0.0000	0.00%	89.9729	0.00%
FTE-SS - Support Staff	0.0000	0.00%	714.9341	0.00%
FTE-SW - Student Workers	0.0000	0.00%	174.1808	0.00%
FTE-M - Management	0.0000	0.00%	128.9297	0.00%
FTE-DC - Department Chairs	0.0000	0.00%	50.0000	0.00%

### Student Data

Data Element	Value	Change from 2014-15	District Total	% of District Total
FTES-CR - Credit	95.7764	18.16%	15431.0806	0.62%
FTES-NC - Non-Credit	0.0000	0.00%	2170.0038	0.00%
FTES - combined	95.7764	18.16%	17601.0844	0.54%
Students Enrolled/Served	307	-30.86%	30000	1.02%

### Calculations

Data Element	Value	Change from 2014-15	District Total	% of District Total
		2014-15		Iotai

FTE-S : FTE-F	20.7007	7.71%	23.6877	87.39%
FTE-AF : FTE-CF	3.6267	12.72%	1.4495	250.21%
FTE-F : FTE-SS	0.0000	0.00%	1.0393	0.00%
FTE-F : FTE-M	0.0000	0.00%	5.7632	0.00%
FTE-SS : FTE-M	0.0000	0.00%	5.5451	0.00%
FTE-ST : FTE-C	0.0000	0.00%	0.1996	0.00%
Average Faculty Salary per FTE-F	\$51,028.52	1.75%	\$62,562.31	81.56%
Average Classified Salary per FTE-C	\$0.00	0.00%	\$48,824.87	0.00%
Average Management Salary per FTE-M	\$0.00	0.00%	\$75,781.16	0.00%
Salary/Benefit costs as a % of total budget	97.05%	6.05%	72.02%	134.74%
Non-Personnel \$ as a % of total budget	2.95%	-65.21%	11.43%	25.84%
Restricted Funds as a % of total budget	0.81%	-88.24%	16.55%	4.87%
Total Unit Cost per FTE-F	\$64,627.57	-3.74%	\$192,197.83	33.63%
Total Unit Cost per FTE-C	\$0.00	0.00%	\$316,810.88	0.00%
Total Unit Cost per FTE-M	\$0.00	0.00%	\$1,107,674.47	0.00%
Total Unit Cost per FTE-S	\$3,122.00	-10.64%	\$8,113.83	38.48%
Total Unit Cost per student served/enrolled	\$973.99	52.72%	\$4,760.40	20.46%

## 2.2e Classified, STNC, Management Staffing Requests

Rank	Location	SP	Μ	Current Title	Proposed Title	Туре
0000	Santa Rosa	00	00	none	none at this time	Classified

## 2.3a Current Contract Faculty Positions

Position	Description
FT faculty position	The current full time position has 23% release time for program coordination.
Adjunct faculty positions	There are presently 6 active adjuncts on the roster. 3 adjuncts teach in the classroom and take clinical coordinator responsibilities. 2 adjuncts work soley as clinical coordinators. One adjunct teachs full time at another program and has not accepted any SRJC teaching assignments offered in the past year. It is likely that she will drop from the active faculty list within the next academic year.

## 2.3b Full-Time and Part-Time Ratios

Discipline	FTEF Reg	% Reg Load	FTEF Adj	% Adj Load	Description
Radiologic Technology	0.4700	15.0000	2.5900	85.0000	There are no full time coordinator/instructors in the program with the exception of the program director.

## 2.3c Faculty Within Retirement Range

Of the core radiologic technology faculty, the program director and three instructors (adjunct) are within retirement age. One adjunct facuty has retired, but is continuing in an adjunct position with radiologic technology. The program director tentativly plans to retire in summer 2019.

## 2.3d Analysis of Faculty Staffing Needs and Rationale to Support Requests

While it is fairly difficult to recruit for PT teaching position, it will be very difficult to recruit master's degree prepared faculty in our discipline, particularly to replace the program director position.

With our program now at full capacity, additional clinical coordinator time or positions will become necessary. Although we have 6 adjunct faculty and all can function in the clinical coordinator capacity, these faculty have other jobs that preclude them from robust participation for SRJC activities The minimum qualifications for clinical coordinator include a baccalaureate degree, experience in supervision and curriculum design, 2 years clinical experience and certification in the professional discipline. (JRCERT standards 2.2, 3.8, 6.3)

### 2017 Narritive

### Position: Radiologic Technology Clinical Coordinator

Radiologic Technology requests one full time clinical coordinator (CC) position. Primary responsibilities of this position are to coordinate and oversee the student's clinical activities and to document student progress over the 2 year program. Additionally, this faculty member will be expected to teach in the discipline as well as maintain all of the other requirements and obligations that the college expects of a full time faculty. Radiologic Technology has requested a full time clinical coordinator position in our PRPP from 2013 to present.

### **Current Contract Faculty:**

Presently there is one full time program director (PD) position which is in place as is required by our accrediting agency the Joint Review Committee of Education in Radiologic Technology (JRCERT). Radiologic Technology is mandated by JRCERT Standard 2.2 to have a full time program director. All JRCERT accredited programs subscribe to this same model. The PD has 23% re-assigned time here at SRJC. The previous PD went on LOA in fall of 2011 and retired in spring 2012. The new PD started as adjunct that spring then full time in fall 2012. New PD is the only new contract position in the past seven years and conceivably longer than that. In addition to Standard 2.2 quoted above, JRCERT Standard 6.3 requires that clinical coordinator holds at minimum a baccalaureate degree, or an associate degree plus 6 years' experience. Existing faculty all meet this requirement.

### **Current Adjunct Faculty:**

Presently there are six adjunct faculty associated with radiology technology, three of whom have been hired within the past three years. Within the same period, three adjunct have voluntarily withdrawn with the college, five potential faculty have been interviewed but only two were offered positions notwithstanding their availability of less than 8 hours per week each.

There has been one applicant for the radiologic technology pool in the past 12 months, and she successfully interviewed and has accepted an adjunct position. Therefore, the PD and three adjunct faculty are overseeing 40 students in 16 clinical sites.

This past semester we are operating without two of our adjunct faculty; one was promoted to a more time intensive position with her full time employer and the other took a hiatus to work on other projects in preparation for her retirement. Whether these two adjunct faculty will accept employment in subsequent semesters is unknown at this time.

### Institutional Impact:

Primarily, this position will oversee all aspects of the clinical experience courses at our affiliated clinical sites. We are mandated by the college to accept a cohort once each fall semester of 20 students. As of the fall 2016, we have 40 continuing students between the 2 cohorts. Our program has affiliation agreements with 16 clinical sites, and is actively negotiating with one more in order to provide adequate observational experiences for our 2 cohorts. Some of our clinical sites are only able to accommodate one student from each class per semester. In two cohorts of 20 students each spread out in clinical sites from Kentfield to Willits and Napa to Sebastopol, it is logistically challenging to give all students' access to their CC on a monthly basis in their clinical setting. This is confounded by separating alternate cohorts on alternate days in the clinical sites. A 1<sup>st</sup> year student attends General Hospital on Tuesday and Thursday, and 2<sup>nd</sup> year student in the same hospital Monday, Wednesday and Friday. Cohorts of students are assigned alternate days based on the class schedule and JRCERT regulation. Therefore, clinical coordinators may need to make two trips to the same site on different days.

### **Department Needs and Goals:**

Based on the geographic expanse of our affiliated clinical sites spanning 3900 square miles over 5 counties, and with the addition of at least one more clinical site before the end of this academic year, Radiologic Technology requests a full time clinical coordinator position to primarily oversee activities for our students in their clinical site as well as teach in the classroom and to participate in college service activities as required of all full-time faculty. With 20 students in each cohort (40 total) and assuming one hour per week per student, the faculty load equals 94.118 load for each of the two cohorts for clinical coordination alone!

### **Degrees & Certificates:**

Counting the Radiologic Technology AS degree, the college certificate of completion, CT, MRI, venipuncture, mammography and fluoroscopy certifications all together for the past 4 years total more than 200 in a combined student population of 65. All have completed and graduated. As of 2015, the American Registry of Radiologic Technologist requires all graduates applying for registration as a radiologic technologist to have an associate degree level education at minimum.

Our Radiologic Technology program interfaces with the college strategic plan mission by providing responsive career and technical expertise in the field of diagnostic medical imaging and secondarily to support the economic vitality in our region. Additionally, as our graduates start their career, they grow professionally into essential members of the health care team.

### **CTE Positions:**

Health science sector shows projected growth in Sonoma county and nationwide. Ben Stone presented at the CTE meeting 9/26/14 and indicated 15% growth in the Health Sector for the period 2010 – 2020. This correlates well with BLS projection of 21% growth for radiologic technology the period 2012-2022 and the anticipated need of 48,000 jobs nationwide. Of the most recent graduating class (July 2016) 90% are already employed.

**Position Mandates**: Our accrediting agency JRCERT requires in Standard 2.2:

"A full-time program director is required... Additionally, a full-time equivalent clinical coordinator is required if the program has more than five (5) active clinical settings or more than thirty (30) students enrolled in the clinical component. The clinical coordinator position may be shared by no more than four (4) appointees. If a clinical coordinator is required, the program director may not be identified as the clinical coordinator. The clinical coordinator. The clinical coordinator may not be identified as the clinical coordinator."

Under our present model, the PD is acting as one of the 5 appointed clinical coordinators, and we have more than 4 appointees overseeing students in the clinical sites. Therefore, under the current model we are out of compliance with our accrediting agency standards. For all of the reasons stated above, Radiologic Technology requests one full time clinical coordinator position.

## Radiologic Technology - FY 2015-16

#### 2.3a Contract Faculty Positions Employees paid from a Contract Faculty OBJECT code

Name Last	First	Position	Hours	HR FTE	DM FTE
Lehrer	Richard	Faculty	0.00	1.0000	0.0000
Totals			0.00	1.0000	0.0000

### 2.3b Adjunct Faculty Positions Employees paid from an Adjunct Faculty OBJECT code

Name Last	First	Position	Hours	FTE
Alander	Tammy		371.50	0.3479
Diehl	Keith		180.00	0.3657
Garcia	Diane		126.50	0.3556
Lehrer	Richard		97.16	0.6350
Maslow	Rene		1.00	0.0000
Patterson	Bonnie		385.72	1.0000
Redmon	Ron		1.50	0.0000
Robertson	Joanne		571.00	0.9225
Totals			1734.38	3.6267

## 2.3e Faculty Staffing Requests

Rank	Location	SP	Μ	Discipline	SLO Assessment Rationale
0001	ALL	02	01	Clinical Coordinator - see 2.2d and 2.3d	Radiologic technology has 40 students program wide in hospital and clinical assignments from Marin all the way
					to Willits. The ability to evaluate every student in their assigned clinical site once per month at minimum has
					become difficult given the wide geographic distance between sites, the total number of students requiring that
					interaction, and that the students are not all in their clinical sites every day of the week. First year students
					alternate days with second year students. In an effort to adequately evaluate the student's familiarity with the
					listed SLO's, and to provide remediation to those who may require it, a full time clinical coordinator is necessary
					to provide student support in the clinical site and on campus. The program director has functioned as an
					additional clinical coordinator although this practice violates our accreditation standards (Standard 2.2). Our
					accrediting agency requires that faculty periodically evaluate students in the clinical setting. The site visits are
					especially valuable to our students from the perspective or reviewing their images for technical quality,
					positioning quality and radiation protection. This task cannot be accomplished here on campus, viewing the
					student images is the only way to do this.
					Student Learning Outcomes:
					1. Operate radiographic imaging equipment and accessory devices.
					2. Position patients and modify standard procedures to accommodate for patient condition exposure factors.
					3. Perform radiographic examination and procedures with minimum radiation exposure for the patient, self, and
					others.

# 2.4b Rationale for Instructional and Non-Instructional Equipment, Technology, and Software

### 2017-2018 - Priorities in descending order

### Priority Ranking1

The gurney will allow our students practice and familiarity with moving patients in and out of bed, or on and off the x-ray table and using equipment commensurate with the present industry standard. These are the patients who may be fractured, unconscious or too weak to move themselves. Additionally, the students learn how to transfer patients in such a way that they do not hurt their own backs. Health Sciences presently has 5 gurneys, and all are in various states of disrepair; side rails that do not stay latched, hydraulics that leak, and bent frames causing the gurney to not track in a straight line. All of these problems would be addressed in the hospital environment by either repair or replacement. The addition of this refurbished gurney will give all health science programs here at SRJC one fully functional and usable gurney, and allow us to discard old broken equipment. It is conceivable that this gurney can be housed on the 4th floor of the Race building.

### **Priority Ranking 2**

The mammography simulator is an essential resources for students to solidify their awareness of the fundamental aspects of mammography. Mammography and the presence of breast lesions can be explained just as driving a car can be explained. But once you are behind the wheel, the concepts become much clearer. The same is true of having tactile reinforcement to describe a breast lesion in a way that a spoken description cannot. A responsible aspect of offering career training in such a technical field as ours demands that we be instructing with equipment and resources such as will be encountered in the professional environment.

### Priority ranking 3

I have asked for some configuration of video projection or flat panel monitor connected to computer with Internet capability. Media supervisor Greg Wycoff has made a 70" or 80" large panel display computer and it's installation available to us. This equipment is a high priority to us.

### **Priority Ranking 4**

The iPad in the clinical environment will facilitate record keeping and documentation of student progress. Beyond that, the faculty can use this resource to impart understanding of specific program goals and SLO's to the clinical faculty. This translates globally as in-services to clinical staff and professional development for our faculty. The net result is better documentation and clearer expectations for the students and the clinical staff. Certainly the presence of the iPad in the classroom and clinical environment will facilitate record keeping and documentation of student progress.

### **Priority Ranking 5**

We also find that the window in room 4046 allows too much direct sunlight or glare on the projection area, and we are therefore asking for a blackout shade to be used during those classes. Mammography instruction is scheduled in that room, and Mammography requires the

most visibility of detail for all of the radiologic sciences. It is conceivable that identifying IELM funding is a potential source, but are open to other resources as well.

## 2.4c Instructional Equipment and Software Requests

Rank	Location	SP	Μ	Item Description	Qty	Cost Each	Total Cost	Requestor	Room/Space	Contact
0000	Santa Rosa	02	01	iPad Personalized iPad Air 2 Wi-Fi 32GB	5	\$623.60	\$3,118.00	Rich Lehrer	4074	Rich Lehrer
				tablet com						
0000	Santa Rosa	01	01	Stryker 1005 M-Series General Transport	1	\$2,590.00	\$2,590.00	Rich Lehrer	4047	Rich Lehrer
				Stretcher						
0000	Santa Rosa	01	04	M44 Visual-Tactile Breast Examination	1	\$515.00	\$515.00	Rich Lehrer	4046	Rich Lehrer
				Simulator						
0006	Santa Rosa	04	01	Flat Panel projection screen & computer	1	\$5,000.00	\$5,000.00	Rich Lehrer	4046	Rich Lehrer
				Race 4046						
0011	Santa Rosa	02	01	black out shade for Race 4046 48"x64"	1	\$500.00	\$500.00	Rich Lehrer	4046	Rich Lehrer

## 2.4d Non-Instructional Equipment, Software, and Technology Requests

### 2.5a Minor Facilities Requests

Rank	Location	SP	Μ	Time Frame	Building	Room Number	Est. Cost	Description

### 2.5b Analysis of Existing Facilities

The existing building is small for the needs of ALL the health sciences however, adjacency is very important for the programs.

In an effort to utilize existing space efficently, Radiologic Technology has taken over rooms 4046, 4047 and 4049 in the Race Building. Although we are the only ones currently using it, we are open to other groups having access to these rooms as well. Please coordinate with the program director.

### 3.1 Develop Financial Resources

Radiologic Technology has actively applied for funding through CTE for various accessories and to update computer based learning software.

## 3.2 Serve our Diverse Communities

The faculty represents a great deal of diversity that reflects the college community of interest. Faculty have experience in the majority of the medical imaging disciplines; CT, MRI, radiation therapy, diagnostic imaging, mammography and fluoroscopy. Additionally, we have faculty who have experience supervising employees in these areas. Presently, we do not have faculty versed in sonography nor nuclear medicine. Faculty with experience in these areas would be a welcome resource. The program continues to try to locate and recruit current graduates or others who might be interested in teaching.

## 3.3 Cultivate a Healthy Organization

The FT faculty of the program is doing his best to support, coach, and encourage faculty members to participate in professional development activities. The program director periodically disseminates educational and professional conference announcements to faculty.

## 3.4 Safety and Emergency Preparedness

Mary Kennedy, Shelly Masini, Linda Dunnivant and Rich Lehrer are identified as building safety coordinators. The radiologic technology classes participated in a safety drill in the spring of 2014 and 2015 on exiting the building in case of a disaster. In the spring of 2016, a faulty alarm caused evacuation of the Race building, and the students in all classes on all 3 floors responded efficiently and without panic.

## 3.5 Establish a Culture of Sustainability

The primary faculty communication tool between faculty and students has become e-mail.

Spring 2017 - Student records are scanned and electronically archived rather than copying paper documents to be archived. Additionally PowerPoint presentations can be electronically sent to students eliminating the necessity of print copies. The use of laptop and tablet computers in our classroom courses is

advocated. Finally, most faculty use SRJC computer based LMS Canvas for testing and grading archives. The proigram director iws not aware of any radiologic technology facuklty members using paper based scantronm testing for the current semester.

## 4.1a Course Student Learning Outcomes Assessment

All Rad Tech courses have been updated and approved by the Curriculum Review Committe within the past 6 years as per policy. These revisions are triggered by the accrediting agency and the State of California Public Health Department and reflect current trends in our industry.

- 1. Adapt and use this template for department tracking of SLO assessment and augmenting the SLO Assessment section of the PRPP.
- 2. Indicate which SLOs were assessed ("all," "#1,3,4," etc.)
- 3. Add columns with department-specific information if needed (method of assessment, comments on results, etc.)
- 4. If participating faculty have not yet been identified for an SLO assessment, write "TBA" and enter names later.
- 5. For "Year of Next Assessment," keep in mind that the required cycle of formal assessment is every 6 years, but some courses may require more immediate follow-up or more frequent assessment based on the results.

Course	SLO #s	Participating Faculty	Semester Initiated or to Be Initiated	Semester Completed	Comments	Year of Next Assess ment
RT 60	1&3	Lehrer, Robertson	F 2013	F 2013		2019
RT 61A	all	Lehrer	F 2013	F 2013		2019
RT 61B	1&4	Robertson	S 2014	S 2014		2020
RT 61C	1&4	Lehrer	X 2014	X 2014		2020
RT 63A	2&3	Diehl	S 2014	S 2014	Change SLO 1 to eliminate film based model	2020
RT 63B	all	Diehl	F 2012	F 2012		2018

RT 64	all	Patterson	F 2013	F 2013		2019
RT 64L	All	Patterson	F 2013	F 2013		2019
RT 65	1, 2, 3	Patterson, Lehrer	S 2013	S 2013		2019
RT 66	3&4	Lehrer	S 2013	S 2013	COR changed starting F 2016 to 3.5 hr. lecture and 1.5 hour lab.	2019
RT 68	1&2	Lehrer	X 2013	X 2013	Nat. Board Certifying exam pass rate for 2015 = 87.5%. Continue to monitor for one more year.	2019
RT 61.1 AL	1	Lehrer	F 2013	F 2013	New clinical courses starting F 2016 71 (A-F)	2019
RT 61 BL	1, 2, 3	Lehrer	S 2014	S 2014		
RT 61 CL	1, 2, 3	Lehrer	X 2014	X 2014		2020
RT 62 AL	1, 2, 3	Lehrer	F 2012	F 2012		2018
RT 62 BL	1, 2, 3	Lehrer	S 2013	S 2013		2019
RT 62 CL	1 & 2	Lehrer	X 2013	X 2013	Will start to track clinical evaluation for student organization X 2015	2015
RT 98	all	Patterson, Lehrer	F 2014	F 2014		2019
RT 100	all	McLarty	S 2013	S 2013		2019
RADT 102		Patterson	F 2016		New F 2016	

RADT	Patterson	F 2016	New F 2016	
102L				

## 4.1b Program Student Learning Outcomes Assessment

Our students are learning didactically and clinically. Didactically, students are mostly served with all available modes of learning (sensory, lecture sessions, lab activities, and library like learning environment). Clinically, our students are gaining their hands-on experience at the local hospitals and clinics. Every semester, student learning outcomes are assessed with evaluation tools made available to health care providers in the community.

In addition, the program is under a constant assessment plan that evaluates whether the program is efficient in its teaching by assessing the outcomes of its students. This activity is completed by the employers and other members of the community of interest. Indeed, the results of this assessment plan helps identify areas of improvement. As the program has recently changed program directors, a decision was made not to change any benchmarks until at least one class matriculated through graduation (X2015), and review the statistics at that time. The program director supports this conservative approach.

As of summer 2015, statistics indicated possible opportunities for improvement. The program director and faculty agreed to review the data in light of the graduation class of 2016 compared to the 2015 data, and then act as appropriate.

## 4.1c Student Learning Outcomes Reporting

Туре	Name	Student	Assessment	Change
		Assessment	<b>Results Analyzed</b>	Implemented
		Implemented		
Course	Rad T 100	Spring 2013	Spring 2013	N/A
Course	Rad T 60	Fall 2013	Fall 2013	N/A
Course	Rad T 61.1 AL	Fall 2013	Fall 2013	N/A
Course	Rad T 61A	Fall 2013	Fall 2013	N/A
Course	Rad T 61B	Spring 2014	Spring 2014	N/A
Course	Rad T 61BL	Spring 2014	Spring 2014	N/A
Course	Rad T 61C	Summer 2014	Summer 2014	N/A
Course	Rad T 61CL	Summer 2014	Summer 2014	N/A

Course	Rad T 62AL	Fall 2012	Fall 2012	N/A
Course	Rad T 62BL	Spring 2013	Spring 2013	N/A
Course	Rad T 62CL	Summer 2013	Summer 2013	Summer 2015
Course	Rad T 63A	Spring 2014	Spring 2014	Spring 2015
Course	Rad T 63B	Fall 2012	Fall 2012	N/A
Course	Rad T 64	Fall 2013	Fall 2013	N/A
Course	Rad T 64L	Fall 2013	Fall 2013	N/A
Course	Rad T 65	Spring 2013	Spring 2013	N/A
Course	Rad T 66	Spring 2013	Spring 2013	N/A
Course	Rad T 68	Summer 2013	Summer 2013	N/A
Certificate/Major	Radiologic Technology	Summer 2014	Summer 2014	N/A

## 4.2a Key Courses or Services that address Institutional Outcomes

Course/Service	1a	1b	1c	2a	2b	2c	2d	3a	3b	4a	4b	5	6a	6b	6c	7
All clinical RADT	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х
courses																

## 4.2b Narrative (Optional)

The performance of radiographic procedures requires the synthesis of the district institutional learning outcomes. In response to the college mandate for reviewing and reporting SLO's, Radiologic Technology is completely compliant with all courses as of this date. Additionally the certificate/major assessment was also filed in 2014.

### 5.0 Performance Measures

The program has NOT met all benchmarks of its most recent asessment plan, and this is arttributed to both the transition from the previous to the present program director, as well as only having one cohort for the past 2 years. This assessment is conducted on an annual basis. The assessment to be completed and evaluated in the Summer of 2015 for the 2014-2015 academic year should be representative of the present status of our program under the leadership of the current program director.

Attached below.

## Santa Rosa Junior College Radiologic Technology Assessment Plan Student Learning Outcomes 2014-2015

**Program Goal 1**: Students will be **clinically competent**.

OUTCOM	IE 1.1	Measurement Tool	Student Benchn	nark	Assessment	Responsible
					Frequency	Authors
Students will perfo	orm	Area E of the clinical	Students will receive	an	- End of the 3 <sup>rd</sup>	- Clinical
positioning skills w	vith accuracy	evaluation form	average ≥ <b>8.5</b> on th	ne scale	semester	instructors and
			of 7.5 to 10.		- End of the 6 <sup>th</sup>	staff
					semester	
Outcome 1.1 Results			(	Comments/Action Pl	lan	
				Benchm	ark met	
9.41 average overa		II 2014 Continu		ntinue to monitor as current 2 <sup>nd</sup> year class		
Area E 9.56 overall average 2015 (B		Both cohorts)	progress	ses.		

OUTCOME 1.2	Measurement Tool	Student Benchmark	Assessment	Responsible
	1		Frequency	Authors
Students will utilize skills in	Area H of the clinical	Students will receive an	- End of the 3 <sup>rd</sup>	- Clinical
radiation protection	evaluation form	average $\geq$ <b>8.5</b> on the scale of	semester	instructors and
		7.5 to 10.	- End of the 6 <sup>th</sup>	staff
			semester	

Outcome 1.2 -		Comments/Action Plan
Tool 1	Results	
		Benchmark met
	9.84 average overall 2014	Continue to monitor as current 2 <sup>nd</sup> year class
Area H	9.97 overall average 2015 (Both cohor	t <b>s)</b> progresses.

OUTCOME 1.2	Measurement Tool 2	Student Benchm	ark	Assessment	Responsible
				Frequency	Authors
Students will utilize skills in radiation protection	Practical final evaluation form	85% of students will receive a 2 score on the scale of 0 to 4 scale.		End of the 3 <sup>rd</sup> semester	RT 61 C instructors
Outcome 1.2 – Tool 2	Results			<b>Comments/Action Pla</b>	n
			Benchma	rk met	
	94.1% of students s	cored 2 or higher 2014	Continue	to monitor as current .	2 <sup>nd</sup> year class
RADT 61C	97.1% of students s	cored 2 or higher 2015	progresse	25.	

Measurement Tool	Student Benchmark	Assessment	Responsible
		Frequency	Authors
ea D of the clinical aluation form	Students will receive an average ≥ <b>8.5</b> on the scale of 7.5 to 10.	- End of the 3 <sup>rd</sup> semester - End of the 6 <sup>th</sup> semester	- Clinical instructors and staff
ea al	easurement Tool a D of the clinical uation form	leasurement Tool       Student Benchmark         a D of the clinical uation form       Students will receive an average ≥ 8.5 on the scale of 7.5 to 10.	leasurement ToolStudent BenchmarkAssessment Frequencya D of the clinical uation formStudents will receive an average $\geq$ 8.5 on the scale of 7.5 to 10 End of the 3 <sup>rd</sup> semester - End of the 6 <sup>th</sup> semester

Outcome 1.3	Results	Comments/Action Plan
	9.63 average overall 2014	Benchmark met
Area D	9.70 average overall 2015 (Both cohorts)	Continue to monitor as current $2^{nd}$ year class progresses.

**Program Goal 2**: Students will demonstrate **critical thinking and adaptability**.

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OUTCOME	Me	asurement Tool	Student Benchmark		Frequency	Responsible Authors
2.1094400mes2w1it Tadlzte	Area	a F of the <b>Results</b>	Students will receive an	- E	nd of 3rd sem <b>estement</b>	s/Actional langtructors and staff
critical thinking in	eval	luation form9.46	and the scale of	- E	n Beonforthme conthranentnester	
recognizin <b>g</b> rienaafge		9.55 average	ថិvទៃសៅរ៉ា2015 (Both cohorts)		Continue to monitor a	s current 2 <sup>nd</sup> year class progresses.
quality		Poculto			Comment	s/Action Plan
2 1. Students will utilize	Radi	iation Physics lab	An average rating of <b>85%</b> in	- F	nd of the 2nd	- Rad T 63A Instructor
2.1. Students will utilize	nau	90% overall – Spri	na 2014 18 students' 16 studen	ts 🗅	Benchmärk met	Nau 1 05A Instructor
critical thinking in RADT 63A section 5815	final	exam	all students' evaluations. 5/30/2014	sei	nester Continue to monitor as	s current 2 <sup>nd</sup> year class progresses.
recognizing image						
quality						

OUTCOME 2.2	Measurement Tool	Student Benchmark	Assessment	Responsible
			Frequency	Authors
2.2: Students will adapt	Area I of the clinical	Students will receive an	- End of the 3rd	- Clinical instructors
to non-routine patients.	evaluation form.	average ≥ 8.5 on the scale	semester	and staff
		of 7.5 to 10.	- End of the 6th	
			semester	

Outcome 2.2	Results	Comments/Action Plan
		Benchmark met
		Continue to monitor as current 2 <sup>nd</sup> year class progresses.
		Faculty is reluctant to make changes in the benchmark
	9.69 average overall 2014	until at least one class matriculates to graduation under
Area I	9.67 average overall 2015 (Both cohorts)	the new program directors administration.

Program Goa	<b>3</b> : Students	will communicate	e effectively.
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	OUTCOME		Measuremen	t Tool	Studer	nt Benchr	nark –	Fi	requency	. /	Responsibility Author	5
Ουτο	Outgome 3.1 ME	Meas	unement Job	lini <b>Gl</b> u	destrigents	will fece	ive an	Frequent	<b>Commen</b> V <sup>il Semes</sup>	ter ler	on Fign Responsibility Authons staff	
- 3.2: S	tdemonstrate good	Oral c	Ryaluation .79 average ov	erall 20	ents will re 115 <b>(Both</b> g	ceiveant onorteo	<sup>he</sup> End	engnhark. of 4th sem ontinue to	Béféth se monitor d	m <mark>es<del>ter</del>:</mark> is curre	B instructor nt 2 <sup>m</sup> year class progresses.	
comm	clinical environmen	t <sub>classe</sub>	s' projects	scale o	f 7.5 to 10	).						
Outco	me 3.2											
Oral 63	3A ALARA project		97.5% class a	average	e Fall 2014				Ве	nchma	rk met	

OUTCOME	Measurement Tool	Student Benchmark	Frequency	Responsibility Authors
- 3.3: Students will	Written	An average rating of 85%	- End of the 5th	- RT 65 instructor
demonstrate good written	communication	in all students'	semester	
communication.	grading of the	evaluations.		
	classes' projects			
	classes' projects			

Outcome 3.3	Results	Comments/Action Plan
RADT 65 written project	88.9% class average Spring 2015	<u>Benchmark met</u>

## Program Goal 4: Students will exhibit professionalism and ethics.

OUTCOME	Measurement Tool	Student Benchmark	Frequency	Responsibility Authors
- 4.1: Students will	Area C of the clinical	-Students will receive an	- End of 3rd semester	- Clinical instructor and staff
demonstrate	evaluation form.	average ≥ <b>8.5</b> on the	- End of the 6th semester	
professionalism <u>&amp; ethical</u>		scale of 7.5 to 10.		
decision making.				

Outcome 4.1	Results	Comments/Action Plan
	9.78 average overall 2014	Benchmark met
Area C	9.83 average overall 2015 (Both cohorts)	Continue to monitor as current 2 <sup>nd</sup> year class progresses.

OUTCOME	Measurement Tools	Student Benchmark	Frequency	<b>Responsibility Authors</b>
- 4.2: Students will	- RADT 60 = Ethics Test	<ul> <li>An average rating of</li> </ul>	- Annually	- RT 60 instructor
demonstrate		85% in all students'		
understanding of ethical		evaluations on the Ethics		
decision making.		exam of RADT 60.		

Outcome 4.2	Results	Comments/Action Plan
		Benchmark met
RADT 60	100% of students achieved 85% or higher	Continue to monitor as current 2 <sup>nd</sup> year class progresses.

### Santa Rosa Junior College Radiologic Technology Assessment Plan Program Effectiveness Measures 2014 – 2015

Program Goal: To maintain the program effectiveness by reaching benchmarks set in these areas: completion and pass rates, employment rates, and employer satisfaction.

OUTCOME	Measurement Tool	Program Benchmark	Frequency	Responsibility Area
1: Consistent and acceptable completion rate.	Completion rate results	The program will graduate at least 80% of its students.	Annually at graduation	Program director

Outcome 1	Results	Comments/Action Plan
Class of 2013-2015	16 of 20 (80%) completed the program	<u>Benchmark met</u>

OUTCOME	Measurement Tool	Program Benchmark	Frequency	<b>Responsibility Area</b>
2: Graduates will pass	ARRT exam results	85% of program graduates	Annually	Program director
the credentialing		will pass on the first attempt.		
exam.				

Outcome 2	Results	Comments/Action Plan
Class of 2013 - 2015	14 of 16 passed on first attempt = 87.5%	<u>Benchmark met</u>

OUTCOME Measurement Too	Program Benchmark	Frequency	Responsibility Area
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3: Graduates will pass	ARRT exam scores	ARRT exam score will be 2	Annually	Program director
credentialing exam at		points above the national		
or above national		average.		
average.				

Outcome 3	Results	Comments/Action Plan
Class of 2013-2015	Data is pending	<u>??</u>

OUTCOME	Measurement Tool	Program Benchmark	Frequency	Responsibility Area
4: Graduates will become employed within 12 months of after graduation (5-year average).	Graduate survey results	Of those seeking employment, 75% of program graduates will become employed within 12 months after graduation.	Annually for 5 years	Program director Benchmark changed effective 2013 to within 12 months.

Outcome 4	Results	Comments/Action Plan
12 month employment	Preliminary results = 11/14 = 79%	Data available 2016

OUTCOME	Measurement Tool	Program Benchmark	Frequency	<b>Responsibility Area</b>
5: Graduates will be	Graduate Survey		Annually	Program director
satisfied with their		satisfied with their education	6 months post-	
education.			graduation	
			survey	

Outcome 5	Results	Comments/Action Plan
2015 graduate satisfaction		Pending December 2015

OUTCOME	Measurement Tool	Program Benchmark	Frequency	<b>Responsibility Area</b>
6: Employers will be satisfied with their employees education.	Employer survey	85% of employers will be satisfied with graduate employees education	Annually 6 months post- graduation survey	Program director

Outcome 6	Results	Comments/Action Plan
2015 employer survey		Pending December 2015

## 5.1 Effective Class Schedule: Course Offerings, Times, Locations, and Delivery Modes (annual)

The program is effective in its course offerings in terms of location and times. The program director has modified the schedule to regiment the first year and second year students to specific days on campus, and in clinical so that they do not compete with one another. This has also required modifying the timeframe when classes are scheduled with a goal of offering classes in the Race Building. Our program has now re-written COR for the clinical courses effective F 2016.

5.2a Enrollment Efficiency

## Radiologic Technology - FY 2014-15 (plus current FY Summer and Fall)

#### 5.1 Student Headcounts The number of students enrolled in each Discipline at first census (duplicated headcount).

#### Santa Rosa Campus

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
	-	-					-	-				
Radiologic Technology	36	28	92	21	139	85	65	164	119	58	160	1

#### Petaluma Campus (Includes Rohnert Park and Sonoma)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	0	0	0	0	0	0	0	0	0	0	0	

### **Other Locations** (Includes the PSTC, Windsor, and other locations)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	34	16	15	14	25	18	16	35	34	32	38	

### **ALL Locations** (Combined totals from ALL locations in the District)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	70	44	107	35	164	103	81	199	153	90	198	

5.2a Enrollment Efficiency The percentage of seats filled in each Discipline at first census based on class limit (not room size).

### Santa Rosa Campus

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	87.2%	94.1%	105.2%	100.0%	111.2%	81.0%	95.6%	105.5%	93.6%	64.4%	106.2%	

### Petaluma Campus (Includes Rohnert Park and Sonoma)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	

#### **Other Locations** (Includes the PSTC, Windsor, and other locations)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	87.2%	94.1%	93.8%	87.5%	30.1%	45.0%	100.0%	90.0%	85.0%	82.5%	63.9%	

### ALL Locations (Combined totals from ALL locations in the District)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	87.2%	94.1%	103.2%	93.8%	78.8%	71.0%	96.4%	102.2%	91.5%	70.0%	93.7%	I

### 5.2b Average Class Size

The program's class size is limited to no more than 20. 20 students did start at the beginning of both academic years 2013-2014, and 2014-2015

## Radiologic Technology - FY 2014-15 (plus current FY Summer and Fall)

5.2b Average Class Size The average class size in each Discipline at first census (excludes cancelled classes).

#### Santa Rosa Campus

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	17.0	16.0	27.0	16.0	23.2	21.3	21.7	21.9	19.5	14.5	22.0	

#### Petaluma Campus (Includes Rohnert Park and Sonoma)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	

#### **Other Locations** (Includes the PSTC, Windsor, and other locations)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	17.0	16.0	15.0	14.0	6.3	9.0	16.0	18.0	17.0	16.5	9.8	

ALL Locations (Combined totals from ALL locations in the District)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	17.0	16.0	24.0	15.0	16.4	17.2	20.3	21.0	18.9	15.2	17.5	

## 5.3 Instructional Productivity

## Radiologic Technology - FY 2014-15 (plus current FY Summer and Fall)

5.3 Instructional Productivity The ratio of Full-Time Equivalent Students (FTES) to Full-Time Equivalent Faculty (FTEF) in each Discipline at first census.

### Santa Rosa Campus

Radiologic Technology		X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
	FTES	1.30	3.17	7.92	0.43	14.60	9.29	4.41	17.61	13.60	5.60	17.72	
	FTEF	0.61	0.31	0.87	0.33	1.35	0.81	0.16	1.63	1.29	0.49	1.61	
	Ratio	2.14	10.20	9.14	1.31	10.83	11.52	27.99	10.83	10.51	11.35	10.97	

#### Petaluma Campus (Includes Rohnert Park and Sonoma)

Radiologic Technology		X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
	FTES	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	FTEF	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
	Ratio	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

### **Other Locations** (Includes the PSTC, Windsor, and other locations)

Radiologic Technology		X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
	FTES	14.05	16.00	13.50	5.71	8.50	9.00	4.22	18.50	22.71	11.14	21.86	
	FTEF	1.07	0.98	1.20	0.65	0.82	0.82	0.69	1.40	1.27	1.03	1.44	
	Ratio	13.07	16.36	11.25	8.79	10.34	10.95	6.11	13.22	17.93	10.85	15.13	

### ALL Locations (Combined totals from ALL locations in the District)

Radiologic Technology		X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
	FTES	15.35	19.17	21.42	6.14	23.10	18.29	8.63	36.11	36.31	16.73	39.58	
	FTEF	1.68	1.29	2.07	0.98	2.17	1.63	0.85	3.03	2.56	1.52	3.06	
	Ratio	9.13	14.88	10.36	6.28	10.64	11.23	10.18	11.93	14.18	11.02	12.94	

### 5.4 Curriculum Currency

Periodic revision and update of radiologic technology coursework has occurred most recently in the fall of 2014. All rad tech courses are within their approved limits of periodic review.

### 5.5 Successful Program Completion

The program's successful course completion is at 95%.

## Radiologic Technology - FY 2014-15 (plus current FY Summer and Fall)

5.6b Successful Course Completion The percentage of students receiving a grade of A,B,C, or CR in each Discipline (duplicated headcount).

#### Santa Rosa Campus

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	94.4%	89.3%	94.6%	95.0%	86.3%	90.5%	83.3%	86.0%	93.3%	93.1%	90.0%	

### Petaluma Campus (Includes Rohnert Park and Sonoma)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	

#### Other Locations (Includes the PSTC, Windsor, and other locations)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	97.1%	93.8%	87.5%	92.9%	92.0%	88.9%	100.0%	97.2%	100.0%	94.1%	97.4%	

#### **ALL Locations** (Combined totals from ALL locations in the District)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	95.7%	90.9%	93.5%	94.1%	87.2%	90.2%	86.6%	88.0%	94.8%	93.5%	91.5%	

### 5.6 Student Success

In 2015, 100% of students graduated and 87.5% (14/16) passed the national board certifying exam. 5 year average = 97.5%

## Radiologic Technology - FY 2014-15 (plus current FY Summer and Fall)

5.6a Retention The percentage of students receiving a grade of A,B,C,D,CR, or I in each Discipline (duplicated headcount).

### Santa Rosa Campus

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	97.2%	96.4%	96.7%	95.0%	89.9%	92.9%	86.4%	87.8%	95.0%	93.1%	93.8%	

#### Petaluma Campus (Includes Rohnert Park and Sonoma)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	

### **Other Locations** (Includes the PSTC, Windsor, and other locations)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	100.0%	100.0%	87.5%	92.9%	92.0%	88.9%	100.0%	97.2%	100.0%	94.1%	97.4%	

### **ALL Locations** (Combined totals from ALL locations in the District)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	98.6%	97.7%	95.4%	94.1%	90.2%	92.2%	89.0%	89.5%	96.1%	93.5%	94.5%	

### 5.6c Grade Point Average The average GPA in each Discipline (UnitsTotal / GradePoints).

### Santa Rosa Campus

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	2.89	3.46	2.91	2.82	2.87	2.84	2.73	3.16	3.37	3.50	3.04	

### Petaluma Campus (Includes Rohnert Park and Sonoma)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	

### Other Locations (Includes the PSTC, Windsor, and other locations)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	3.75	3.50	3.33	3.64	3.81	3.22	3.88	3.76	3.76	3.91	3.91	<u> </u>

### ALL Locations (Combined totals from ALL locations in the District)

Discipline	X2012	F2012	S2013	X2013	F2013	S2014	X2014	F2014	S2015	X2015	F2015	S2016
Radiologic Technology	3.51	3.49	3.08	3.30	3.05	2.96	3.26	3.37	3.54	3.74	3.35	

### 5.7 Student Access

Students are accepted to the program on a lottery system. Thus, all accepted students have equal access to the instruction offered.

## Radiologic Technology - FY 2014-15 (plus current FY Summer and Fall)

5.7a Students Served - by Ethnicity The number of students in each Discipline at first census broken down by ethnicity (duplicated headcount).

Radiologic Technology	Ethnicity	2012-13	Percent	2013-14	Percent	2014-15	Percent	2015-16	Percent
	White	145	67.1%	175	61.8%	230	56.2%	246	56.2%
	Asian	5	2.3%	18	6.4%	32	7.8%	25	5.7%
	Black	10	4.6%	14	4.9%	12	2.9%	21	4.8%
	Hispanic	20	9.3%	65	23.0%	118	28.9%	109	24.9%
	Native American	0	0.0%	0	0.0%	1	0.2%	0	0.0%
	Pacific Islander	0	0.0%	0	0.0%	0	0.0%	1	0.2%
	Filipino	2	0.9%	1	0.4%	2	0.5%	11	2.5%
	Other Non-White	0	0.0%	2	0.7%	14	3.4%	24	5.5%
	Decline to state	34	15.7%	8	2.8%	0	0.0%	1	0.2%
	ALL Ethnicities	216	100.0%	283	100.0%	409	100.0%	438	100.0%

### **ALL Locations** (Combined totals from ALL locations in the District)

5.7b Students Served - by Gender The number of students in each Discipline at first census broken down by gender (duplicated headcount).

#### **ALL Locations** (Combined totals from ALL locations in the District)

Radiologic Technology	Gender	2012-13	Percent	2013-14	Percent	2014-15	Percent	2015-16	Percent
	Male	96	44.4%	118	41.7%	140	34.2%	154	35.2%
	Female	120	55.6%	163	57.6%	269	65.8%	284	64.8%
	Unknown	0	0.0%	2	0.7%	0	0.0%	0	0.0%
	ALL Genders	216	100.0%	283	100.0%	409	100.0%	438	100.0%

5.7c Students Served - by Age The number of students in each Discipline at first census broken down by age (duplicated headcount).

Radiologic Technology	Age Range	2012-13	Percent	2013-14	Percent	2014-15	Percent	2015-16	Percent
	0 thru 18	1	0.5%	3	1.1%	4	1.0%	7	1.6%
	19 and 20	8	3.7%	24	8.5%	28	6.8%	32	7.3%
	21 thru 25	51	23.6%	67	23.7%	161	39.4%	155	35.4%
	26 thru 30	38	17.6%	56	19.8%	70	17.1%	97	22.1%
	31 thru 35	32	14.8%	46	16.3%	72	17.6%	75	17.1%
	36 thru 40	13	6.0%	22	7.8%	25	6.1%	26	5.9%
	41 thru 45	23	10.6%	16	5.7%	14	3.4%	22	5.0%
	46 thru 50	21	9.7%	15	5.3%	23	5.6%	17	3.9%
	51 thru 60	28	13.0%	28	9.9%	11	2.7%	6	1.4%
	61 plus	1	0.5%	6	2.1%	1	0.2%	1	0.2%
	ALL Ages	216	100.0%	283	100.0%	409	100.0%	438	100.0%

**ALL Locations** (Combined totals from ALL locations in the District)

## 5.8 Curriculum Offered Within Reasonable Time Frame

The program curriculum and clincial instruction are offered during business hours. The clinical instruction portion adheres to strict student supervision under the State Law and JRCERT requirements.

### 5.9a Curriculum Responsiveness

The program curriculum reflects all current changes that are regulated by the State of California Minimum Standards in Radiologic Technology, as well as the curricular requirements of the American Registry and American Society of Radiologic Technologists.

## 5.9b Alignment with High Schools (Tech-Prep ONLY)

The program curriculum is not directly articulated with the local High Schools. The program director does offer outreach to HS classes who request a presentation on the profession of radiologic technology.

5.10 Alignment with Transfer Institutions (Transfer Majors ONLY)

The program prerequisites are articulated with ten other community colleges, eighteen independent colleges and universities and nineteen out of state colleges and universities. Addi=tionalkly, admissions and records can access any college data that any student may request.

### 5.11a Labor Market Demand (Occupational Programs ONLY)

The labor demand is slightly decreased, due to the economic downturn being experienced by the medical care industry. However, the Class 2009's employment rate is at 95%. April 2013: The labor market has rebounded a bit since 2009, but employment rates for our graduates in 2011 and 2012 are a ~80% with most reporting positions other than full time. February 2014: Of those graduates responding 69% have found employment as a radiologic technologist with most reporting positions other than full time. April 2015:

The next meaningful update on this is scheduled for summer 2016 to see the empoyment rates of the graduating class of 2015.

April 2016: Unofficially 12 of 14 from last graduating class (86%) have found employment as a radiologic technologist.

### 5.11b Academic Standards

The JRCERT has visited our program for our periodic site visit and accreditation renewal. Their preliminary report indicated that we were substatinally compliant with standards of the JRCERT with 2 minor exceptions:

- That we did not have a formal process for sharing student feedback on the clinical site and the clinical instructor (hospital supervisor employee);
- That the JRCERT was not clearly identified as a last resort for grievence resolution.

We have addressed those shortcomings and have documented our resolution as of April 1, 2015. The JRCERT has awarded an eight (8) year accreditation effective December 2014. Interim report due 2018, nest periodic site visit fourth quarter 2022.

## 6.1 Progress and Accomplishments Since Last Program/Unit Review

Rank	Location	SP	Μ	Goal	Objective	Time Frame	Progress to Date
0002	Santa Rosa	01	01	Large panel display computer for 4046	More instructional functionality in an	2016-2018	Tables and rolling chairs for 10 students has
					awkward space		been installed. Still need large panel
							computer with display video.
0005	Santa Rosa	01	05	Additional clinical site affiliations	20 or more clinical student placements within	2017 and	Availability of funding to affiliate with
					a 50 mile radius of the college.	beyond	additional clinical sites as they become
							available. Having 20 clinical placements
							within a 50 mile radius would allow our
							program to grow. Presently we have 17
							clinical student placemeents within a 50 mile
							radius of the college.

## 6.2a Program/Unit Conclusions

Location	Program/Unit Conclusions
Santa Rosa	Course and program SLOs have been analyzed and reported effective Fall 2014. This is an ongoing process which
	has continued into 2017.
Santa Rosa	The positioning sponges and miscellaneous accessories obtained last year have helped Rad Tech demonstrate
	positioning and procedures commensurate with the industry standard.

## 6.2b PRPP Editor Feedback - Optional

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## 6.3a Annual Unit Plan

Rank	Location	SP	Μ	Goal	Objective	Time Frame	Resources Required
0001	Santa Rosa	01	05	Additional clinical site affiliations	Enough clinical affiliated sites to place	2016 and	A full time positioin in concert with
					students	beyond	additional clinical student placement sites
							would allow growth of our program.