# Santa Rosa Junior College Program Resource Planning Process

# Radiologic Technology 2019

#### 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 to 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 Strategic plan listed below, the radiologic technology program embraces all, but is particularly invested in bulleted 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, social equity and environmental stewardship</u> 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 educating and graduating qualified students to become health care professionals in Radiologic Technology.

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

The program's operational hours span as early as 07:00 and as late as 18:00 Monday through Friday. We do allow some limited "swing shift" hours as a part of their clinical experience, but only if there is adequate supervision for the student available, and only when specifically requested and authorized.

The Joint Review Committee in Education of Radiologic Technology (JRCERT) defines traditional program hours Monday - Friday within the hours of 05:00 through 19:00. The JRCERT will also allow evening and weekend experience on occasion. No night shift. (JRCERT standard 1.3)

## 1.2 Program/Unit Context and Environmental Scan

Effective 2015, the American Registry of Radiologic Technologists (ARRT) required that all applicants seeking to challange the national board certifying exam in radiography and radiation therapy, have achieved at minimum an associate level education (AA or AS) though not necessarily the degree in radiologic technology.

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 (2018) indicates that our 5 year employment rate for our graduates is 90% at 12 months post graduation. In compliance with a JRCERT mandate regarding transparency, we have posted our mission statement, program SLO's and Program Effectiveness data on the Radiologic Technology homepage. https://radtech.santarosa.edu

Currently, we are affiliated with 20clinincal sites within a 75 mile radius of the college. We have discontinued our designation as a State of CA fluoroscopy school but this change does not affect our students ability to challange the State of CA Fluoroscopy permit exam.

# 2.1a Budget Needs

#### 2019-2020:

- 1. Faculty continue to visit students on a periodic basis, and we again request adequate funding for mileage reimbursement. We are budgeted for \$1,750.00 per year. Faculty have been directed to visit the students as often as necessary, but to limit their visits to students on site at minimum of twice per semester and more if necessary.
- 2. We request funding to affiliate with additional clinical sites as these opportunities become available. Any additional clinical placements nearby would be welcome additions and may also allow us to increase the size of our incoming cohort.
- 3. 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 organization, and their fee is \$850.00 per visit. With the new Carestream DR X-ray room, the cost may change. Unable to determine that at this time.
- 4. The State of CA has increased their fee for affiliated clinical sites. Presentlty we are associated with 20 sites. At the new rate of \$284 + \$164 per clinical site (20) we are projecting an annual invoice for \$3500.00 in August 2019. As this is the first rate increase in many years, we anticipate this present rate to remain stable.

We appreciate the VPAA's office for shouldering this expense, and we did make them aware of the price increase last year.

# Santa Rosa Junior College - Program Unit Review Radiologic Technology - FY 2017-18

### 2.1 Fiscal Year Expenditures

#### Santa Rosa Campus

Expenditure Category	Unrestricted Funds	Change from 2016-17	Restricted Funds	Change from 2016-17	Total	Change from 2016-17
Faculty payroll	\$87,964.00	5.34%	\$0.00	0.00%	\$87,964.00	5.34%
Adjunct payroll	\$177,622.69	7.96%	\$0.00	0.00%	\$177,622.69	7.96%
Classified payroll	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%
STNC payroll	\$0.00	-100.00%	\$0.00	0.00%	\$0.00	-100.00%
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)	\$48,072.82	-4.98%	\$0.00	0.00%	\$48,072.82	-4.98%
Supplies (4000's)	\$1,245.58	5.99%	\$1,028.33	0.00%	\$2,273.91	93.49%
Services (5000's)	\$4,909.33	17.75%	\$0.00	0.00%	\$4,909.33	17.75%
Equipment (6000's)	\$0.00	-100.00%	\$9,180.35	481.25%	\$9,180.35	393.82%
Total Expenditures	\$319,814.42	5.12%	\$10,208.68	546.36%	\$330,023.10	7.92%

#### **Expenditure Totals**

Expenditure Category	Amount	Change from 2016-17	District Total	% of District Total
Total Expenditures	\$334,528.55	7.91%	\$154,788,480.66	0.22%
Total Faculty Payroll	\$269,435.09	7.06%	\$50,884,933.44	0.53%
Total Classified Payroll	\$0.00	0.00%	\$22,270,301.15	0.00%
Total Management Payroll	\$0.00	0.00%	\$10,134,908.88	0.00%

Total Salary/Benefits Costs	\$318,164.96	5.07%	\$111,941,187.45	0.28%
Total Non-Personnel Costs	\$16,363.59	127.16%	\$16,406,746.64	0.10%

#### Radiologic Technology is ONLY taught on the Santa Rosa campus.

## 2.1b Budget Requests

Rank	Location	SP	M	Amount	Brief Rationale
0001	Santa Rosa	06	01	\$1,750.00	Mileage allowance for adjunct faculty to visit students on site.
0002	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. Physicist fee is \$850 in 2017.
0003	Santa Rosa	04	01	\$750.00	Budget to affiliate with clinical sites as those opportunities become
					available.

#### 2.2a Current Classified 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. Incidently, although we are not too
			demanding on this work resource, when we do use
			them they do an EXCELLENT job.

# 2.2d Adequacy and Effectiveness of Staffing

#### **UPDATED FOR 2019-2020**

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 8 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 38 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.

Finally, in 2018, I requested one (1) additional instructor to participate in positioning labs 61A and 61B. With the new DR room becoming available in 2019, the students can now start to make exposures on anatomical models and positioning phantoms as a part of lab. This will require the presence of a faculty who possesses a certification as a radiologic technologist. One instructor can work 1:1 with students making exposures, while the other instructor in the other lab can be working with small groups of students practicing radiographic positioning.

# Radiologic Technology - FY 2017-18

## 2.2 Fiscal Year Employee Data and Calculations

#### **Employee Head Counts**

Employee Category	Count	Change from 2016-17	District Total	% of District Total
Contract Faculty	1	0.00%	317	0.32%
Adjunct Faculty	7	-12.50%	1352	0.52%
Classified Staff	0	0.00%	525	0.00%
STNC Workers	0	-100.00%	427	0.00%
Student Workers	0	0.00%	506	0.00%
Mgmt/Admin/Dept Chair	0	0.00%	170	0.00%

## **Employee FTE Totals**

FTE Category	FTE	Change from 2016-17	District Total	% of District Total
FTE-F - Faculty	4.6375	3.92%	726.9903	0.64%
FTE-CF - Contract Faculty	1.0000	0.00%	314.0788	0.32%
FTE-AF - Adjunct Faculty	3.6375	5.06%	412.9115	0.88%
FTE-C - Classified	0.0000	0.00%	446.6005	0.00%
FTE-ST - STNC	0.0000	-100.00%	41.0691	0.00%
FTE-SS - Support Staff	0.0000	-100.00%	648.5309	0.00%
FTE-SW - Student Workers	0.0000	0.00%	160.8613	0.00%
FTE-M - Management	0.0000	0.00%	119.8350	0.00%
FTE-DC - Department Chairs	0.0000	0.00%	0.0000	0.00%

#### **Student Data**

Data Element	Value	Change from 2016-17	District Total	% of District Total
FTES-CR - Credit	98.7522	-5.52%	14738.9657	0.67%
FTES-NC - Non-Credit	0.0000	0.00%	2075.9009	0.00%
FTES - combined	98.7522	-5.52%	16814.8666	0.59%
Students Enrolled/Served	485	5.43%	30000	1.62%

#### **Calculations**

Data Element	Value	Change from 2016-17	District Total	% of District Total
FTE-S: FTE-F	21.2945	-9.09%	23.1294	92.07%
FTE-AF: FTE-CF	3.6375	5.06%	1.3147	276.68%
FTE-F: FTE-SS	0.0000	-100.00%	1.1210	0.00%
FTE-F: FTE-M	0.0000	0.00%	6.0666	0.00%
FTE-SS: FTE-M	0.0000	0.00%	5.4119	0.00%
FTE-ST: FTE-C	0.0000	0.00%	0.0920	0.00%
Average Faculty Salary per FTE-F	\$58,099.72	3.02%	\$69,993.96	83.01%
Average Classified Salary per FTE-C	\$0.00	0.00%	\$49,866.27	0.00%

Average Management Salary per FTE-M	\$0.00	0.00%	\$84,573.86	0.00%
Salary/Benefit costs as a % of total budget	95.11%	-2.63%	72.32%	131.51%
Non-Personnel \$ as a % of total budget	4.89%	110.51%	10.60%	46.15%
Restricted Funds as a % of total budget	3.05%	498.97%	17.08%	17.87%
Total Unit Cost per FTE-F	\$72,136.17	3.84%	\$212,916.84	33.88%
Total Unit Cost per FTE-C	\$0.00	0.00%	\$346,592.72	0.00%
Total Unit Cost per FTE-M	\$0.00	0.00%	\$1,291,680.07	0.00%
Total Unit Cost per FTE-S	\$3,387.56	14.22%	\$9,205.45	36.80%
Total Unit Cost per student served/enrolled	\$689.75	2.35%	\$5,159.62	13.37%

# 2.2e Classified, STNC, Management Staffing Requests

Rank	Location	SP	M	Current Title	Proposed Title	Type
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 5 active adjuncts on the roster. 2 adjuncts teach in the classroom and take clinical coordinator responsibilities. 2 adjuncts work soley as a clinical coordinator. 1 adjunct teachs in class and lab only.

# 2.3b Full-Time and Part-Time Ratios

Discipline	FTEF Reg	% Reg Load	FTEF Adi	% Adj Load	Description
Radiologic Technology	0.4700	0.7600	2.3900	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, four of five are within retirement age. The full time program director position is posted as an employment opportunity closing April 3, 2019 with interviews to be conducted in May 2019.

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

With our program now at full capacity, additional clinical coordinator time or positions will become necessary. Although we have 4 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)

#### 2018 Narritive

# (A) 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. That PD has announced his retirement effective July 20, 2019. 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 these requirements.

#### **Current Adjunct Faculty:**

Presently there are five adjunct faculty associated with radiology technology. There have been two other applicants for the radiologic technology pool in the past 12 months; one only has a certificate in radiologic sciencs and needs at least an AS degree to be eligible for hire, the other did not have the State of California Fluoroscopy certification and therefore did not meet minimum qualifications. Therefore, the PD and four adjunct faculty are overseeing 37 students in 20 clinical sites.

#### **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 spring 2019, we have 38 continuing students between the 2 cohorts. Our program has affiliation agreements with 19 clinical sites. Some of our clinical sites are only able to accommodate on 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 Lake county, 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 assigned hospital site 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 subsequent days.

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

Based on the geographic expanse of our affiliated clinical sites spanning 3900 square miles over 5 counties, 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 5 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 2018) 94% have successfully passed the national board certifying exam and are fully credentialed radiologice technologists. Of those 90% are gainfully employed.

**Bay Area:** LMI demand data indicates that there is currently an average of 142 Radiologic Technology awardees per year and 577 Radiologic Technology openings (new and replacements) per year, creating a supply gap of 435.

**ALL California:** There is an 8% estimated growth in our industry, which equals 2435 RT job openings, (new and replacement). It's predicted that there will be 633 graduates in California during the same time frame, leaving a supply gap of 1802 jobs to be filled.

**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 may not be identified as the program director."

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.

# (B) Position: Additional instructor in RADT 61A and 61B positioning labs

In an effort to better accommodate the needs of our clinical facility partners over concerns of patient safety, more efficiently use our equipment in the lab setting and provide students with more thorough hands-on practice, I am requesting that an additional instructor be assigned to the positioning labs in the first and second semesters. By adding one additional instructor for each lab, we can maintain the small instructor to student ratio (1:5), and with the installation of a new DR x-ray room we can now allow students to make exposures on anatomical models and anthropomorphic phantoms to have hands on experience with positioning and technique. However, students making exposures are required to have direct faculty supervision at all times, thus the presence of an additional instructor. This position can be assigned one of our existing, qualified adjunct instructors.

# Radiologic Technology - FY 2017-18

#### 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		291.00	0.5827
Diehl	Keith		189.00	0.2753
Lehrer	Richard		53.62	0.7775
Maslow	Rene		1.00	0.1653
McCann	Janet		369.00	0.4259
Patterson	Bonnie		441.50	0.4107
Robertson	Joanne		516.00	1.0000
Totals			1861.12	3.6375

# 2.3e Faculty Staffing Requests

Rank	Location	SP	M	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.
					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.
0001	ALL	01	01	One additional instructor in positioning labs	Positioning lab for the incoming students is their only opportunity to learn how to manipulate radiographic
				r and a second restriction of the second res	equipment and to position their patient's body in a non-threatening laboratory environment. In the first semester,
					there is a 3.0 hour lab associated with their Positioning 1 (RADT61A) and Positioning 2 (RADT61B) courses.
					This is designed to give all students the opportunity to practice and to make mistakes and to be guided by faculty
					and student proctors prior to interacting with actual patients in a hospital setting. The ratio is 1 instructor to 10
					students. The instructor demonstrates the "positions of the day" and then allows the students time to practice it.
					With 180 minutes in lab, and 45 minutes taken by demonstration, there is not adequate instructor per student time
					to obtain enough familiarity for each of the 58 positions taught in the fall and 63 positions in the spring semester.
					Additionally, in the fall, the students need to learn how to manipulate the equipment. I am requesting an
					additional instructor to participate in these labs which effectively takes the instructor to student ratio from 1:10
					down to 1:5, increase the hands on time with the students working in a more manageable and smaller group. The
					added benefit with the installation of the new DR x-ray room is the ability of students to make actual exposures
					on phantoms under direct supervision thereby observing the effects of positioning and technique changes.  Faculty load for this position calculated at the credit lab 4.7059 rate for a one (1) credit course in each of the fall
					and spring semesters = 4.7059 for fall and 4.7059 in the spring. The instructor of record can serve as the other
					lab instructor.
					iao instructor.

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

#### 2019-2020 - Priorities in descending order

Priority One - Fluke Dosimeter

Our dosimeter requires calibration to accurately measure radiographic exposures. Industry standards require that calibration be accomplished annually. Ours was last calibrated in March 2014.

Priorty Two - Anthropomorphic Skeletal Phantom

One anthropomorphic phantom is requested to allow students the opportunity to perform radiologic exams on various body parts using various image receptors and to observe the effects of changes to positioning and technical factor selection.

Priority Three - Instadose+ A wireless dosimetry device and base station to capture dosimetry readings of faculty and students for state and national compliance of radiation exposure monitoring. Automating the process of reporting and tracking this data will supply more accurate and complete data regarding possible radiation exposure, and allow users to pinpoint high dose exposures and anomalies faster.

Priority Four - ASRT Clinical Instructor Training Modules

JRCERT requires clinical instructors to meet orientation and supervison requirements. These comprehensive modules are desgined standardize the orientation and comply with annual recertification for our 60+ onsite clinical facility instructors.

Priority Last - Surgical Handwashing Sink

This is necessary to instruct in aseptic handwashing in preperation for surgical or other aseptic procedures. This equipment could be utilized by the nursing programs.

# 2.4c Instructional Equipment Requests

Rank	Location	SP	M	Item Description	Qty	Cost Each	Total Cost	Requestor	Room/Space	Contact
0001	Santa Rosa	01	01	Calibrate Fluke Dosimeter	1	\$1,750.00	\$1,750.00	Rich Lehrer	4047	Rich Lehrer
0001	ALL	00	00	ASRT Clinical Instructor Series	1	\$1,000.00	\$1,000.00	Rich Lehrer	4074	Rich Lehrer 4346
0002	Santa Rosa	02	01	anthropomorphic skeletal phantom	1	\$35,000.00	\$35,000.00	Rich Lehrer	4047	Rich Lehrer
0003	Santa Rosa	08	07	Instadose + Base Station dosimeter	1	\$3,500.00	\$3,500.00	Rich Lehrer		
0004	Santa Rosa	08	06	ASRT Clinical Instructor training series	1	\$1,000.00	\$1,000.00	Rich Lehrer		
0005	Santa Rosa	02	01	Surgical Handwash sink	1	\$5,000.00	\$5,000.00	Bonnie Patterson		

# 2.4d Non-Instructional Equipment and Technology Requests

I	Rank	Location	SP	M	Item Description	Qty	Cost Each	Total Cost	Requestor	Room/Space	Contact

# 2.5a Minor Facilities Requests

Rank	Location	SP	M	Time Frame	Building	Room Number	Est. Cost	Description
0001	Santa Rosa	04	01	Urgent	Race	4047	\$10,000.00	With the installation of a new digital x-ray room, some vendors have
								advised me that at the point where the old equipment is removed, it is
								likely that I may have to repair the floor by leveling with cement then
								replacing floor tiles. Additionally, the vendor has advised 2 new
								counters to accomidate the updated equipment and several new 120
								VAC outlets and data drops. It would also be the right time to re-paint
								the room which has never been done since the room was installed 15+
								years ago.

## 2.5b Analysis of Existing Facilities

In an effort to utilize existing space efficiently, 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. Rad Tech has also written a grant proposal through Strong Workforce Program to fund the installation of a new x-ray room in Race 4047.

#### 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.

HR tells us that currently (Spring 2018) there are no pending applicants seeking a faculty position in radiologic technology.

# 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. Additionally, each faculty member actively participates in Continuing Education, relevant to their individual areas of expertise, emerging educational technology as well as diagnostic and technological advances to Radiologic Sciences in general. In turn, faculty members share what they have learned by offering continuing education to our Clinical Instructors at our annual CI seminar.

## 3.4 Safety and Emergency Preparedness

As of April 2019: Chad Delucca BSC, Valarie Garcia BSC, Yvette Davis 3rd floor ASC and Rich Lehrer 2nd floor ASC

## 3.5 Establish a Culture of Sustainability

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

Spring 2018 - 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 program director is not aware of any radiologic technology faculty members using paper based scantron 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. Courses not showing recent asscessment will be entered at the end of the 2018-2019 academic year.

- 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.

# **C-SLO Assessment Tracking Document**

14 37 132 1,914 5,386 C-SLOs Tracked August 2018 Courses

CLU STE R	DEPAR TMENT	DISCIPL INE	COURS E	COURSE STUDENT LEARNING OUTCOME (C-SLO)	ASSESSME ENTEREI
HS	HSCI	RADT		2. Discuss the impacts of medical imaging on the	✓
			100	general and special populations.	
HS	HSCI	RADT		1. Discuss radiographic principles and how they	$\checkmark$
				apply to mammographic imaging.	_
HS	HSCI	RADT		2. List technical factors and positioning	<b>√</b>
			102	techniques that produce quality mammographic	
				images while keeping patient radiation exposure	
	11001	DADT	DADT	to a minimum.	
HS	HSCI	KADI		1. Apply radiographic principles in	<b>√</b>
LIC	LICCI	DADT		mammographic imaging.	
H2	HSCI	KADI		2. Utilize technical factors and positioning	<b>√</b>
			102L	techniques that produce quality mammographic	
				images while keeping patient radiation exposure to a minimum.	
ЦC	⊔נ⊂ו	DADT	DADT		,
113	HISCI	NADI	60	1. Ability to list the main functions of the x-ray tube on a diagram.	<b>V</b>
Нς	HSCI	RADT		2. Apply the principles of radiation protection in	<b>√</b>
113	11301	ΙΑΟΙ	60	radiology environments.	V
HS	HSCI	RADT		3. Summarize the personal traits and	./
115	11501	10 (5)	60	characteristics necessary of the radiologic	V
				technologist in the multicultural health care	
				setting.	
HS	HSCI	RADT	RADT	1. Competently perform radiographic procedures	<b>√</b>
				of the chest, abdomen, upper and lower	•
				extremities, shoulder, hips, and pelvis.	
HS	HSCI	RADT	RADT	2. Practice safe radiation protection measures for	✓
			61A	patients, self, and others.	
HS	HSCI	RADT	RADT	Competently perform radiographic procedures	of the dige
			61B	tract, urinary tract, vertebral column, rib	s, and sterr
HS	HSCI	RADT	RADT	Competently perform radiographic procedures of	✓
			61C	the skull, facial bones, mandible, sinuses, and	
				intracranial structures.	
HS	HSCI	RADT	RADT	1. Evaluate the performance of digital	
			63A	radiographic systems.	

HS HSCI RADT RADT 2. Apply principles of radiation physics in the 63A practice of general radiology. HS HSCI RADT RADT 3. Process and manipulate radiographic images 63A for diagnostic quality. HS HSCI RADT RADT 1. Explain the effects of radiation exposure on human tissues. 63B HS HSCI RADT RADT 2. Implement effective measures of radiation protection in any radiology department. 63B HS HSCI RADT RADT 3. Evaluate the performance of radiographic systems in relation to radiation safety. 63B HS HSCI RADT RADT 1. List the responsibilities and scope of practice of ✓ a radiologic technologist. 64 HS HSCI RADT RADT 2. Define infection control as put in practice in ✓ Radiology. 64 HS HSCI RADT RADT 3. Describe the difference between medical and **√** surgical asepsis and their practices. 64 HS HSCI RADT RADT 1. Properly set up and work with sterile fields while maintaining proper aseptic techniques. 64L HS HSCI RADT RADT 2. Handle patients using proper body mechanics 64L and safe practices. HS HSCI RADT RADT 3. Perform patient care skills within the scope of practice of a radiologic technologist. 64L HS HSCI RADT RADT 1. Identify common pathologies on images 65 HS HSCI RADT RADT 2. Present literary review to medical professionals ✓ 65 HS HSCI RADT RADT 1. Manipulate equipment in special procedure rooms; operate fluroscopes, digital equipment, 66 and computerized tomography. HS HSCI RADT RADT 2. Become eligible to sit for the State fluoroscopy ✓ 66 examination. HS HSCI RADT RADT 3. Provide patient education in various aspects of ✓ special modalities in Radiology. 66 HS HSCI RADT RADT 4. Competently perform venipuncture, as permitted by the State of California. 66

HS	HSCI	RADT	RADT	, ,
			68	achieve entry level employment as a radiologic technologic
HS	HSCI	RADT	RADT	, ,
			68	of Radiologic Technologist) licensing examina
HS	HSCI	RADT	RADT	Operate radiographic imaging equipment, and
			71A	position patients to perform radiographic
				examinations and procedures with minimum
				radiation exposure for the patient, self, and
				others.
HS	HSCI	RADT	RADT	Operate radiographic imaging equipment, and 🗸
			71B	position patients to perform radiographic
				examinations and procedures with minimum
				radiation exposure for the patient, self, and
				others.
HS	HSCI	RADT	RADT	Operate radiographic imaging equipment, and
			71C	position patients to perform radiographic
				examinations and procedures with minimum
				radiation exposure for the patient, self, and
				others.
HS	HSCI	RADT	RADT	At the intermediate/advanced level: Operate radiogra
			71D	imaging equipment, and position patients to perf
			, 10	radiographic examinations and procedures with minir
				radiation exposure for the patient, self, and oth
Нς	HSCI	RADT	RADT	Operate radiographic imaging equipment, and position pati
113	11301	וארטו	71E	to perform radiographic examinations and procedures
			/ 1L	minimum radiation exposure for the patient, self, and other
ЦC	חכט	D V D T	$D \wedge D T$	•
ПЭ	пэсі	RADT		Operate radiographic imaging equipment and access  devices position patients; modify standard procedure
			71F	devices, position patients; modify standard procedure

2. Perform tasks expected of an entry level radio HS HSCI RADT RADT 71F technologist as a collaborating member of a multidiscipli health care to

accommodate for patient condition exposure factors, and o

variables to perform radiographic examination and proced

with minimum radiation exposure for the patient, self,

oth

Apply relevant research methodologies, achieve the learning the selected topics, and provide reports or complete master examination.

# 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. Although this is a continual process, the most recent change to Student Learning Outcome Assessment has been this year. To better assess student achievement, the program director and faulty collaboratively revised the semester clinical evaluation forms from 9 areas of evaluation to 10. The revision of terminology and addition of the extra area presents a more fair and realistic view of student progress. The Bi-Weekly progress report is also currently evolving to better identify student goals in both short term and long range. Upon review of the Student assessment forms, it was decided to compose more concise wording for and adjust benchmarks to accurately reflect student achievement and comply with new JRCERT accreditation standards. In regard to guidance received from the JRCERT, benchmarks have become more explicit. Our clinical partners have supported the process and contributed to the overall effort of this evolution.

# 4.1c Student Learning Outcomes Reporting

Туре	Name	Student Assessment	Assessment Results Analyzed	Change 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	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
courses																1

## 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.

#### October 2018

Based on some changes within the college structure and district educational code, we have evaluated some of the prequisite requirements for the program. This includes eliminating recency of on two of the four pre-requisite courses where it had been required and allowing newly created coursework to fufill our prequisite requirements on an equivalency basis.

### 5.0 Performance Measures

The program has met all but one benchmark of its most recent assessment plan. The course in which this becnchmark mark was not met is currnetly onging and will be reevaluated at the end of this semester. Data will be available in May of 2019. We will continue to monitor assessment plans and revise, as needed, on an ongoing basis, (annually at a minimum). Please refer to the chart below.

## Santa Rosa Junior College Radiologic Technology Assessment Plan

Stu

den

t

Lea

rnin

g

Out

CO

me

S

201

7-

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

OUTCOME 1.1	Measurement Tool	Student Be	nchmark	Assessment Frequency	
Students will perform positioning skills with accuracy	Area E of the clinical evaluation form	Students will rece ≥ 8.5 on the scale	- End of the 3 <sup>rd</sup> semester - End of the 6 <sup>th</sup> semester		
Outcome 1.1	Results		Со	mments/Action P	
	8.95 overall for cohort of 20	19		Benchma	
	9.58 overall for cohort of 20	18	2019 =19	students	
			6 student	cs = 10.0	
			8 studen	ts = 9.5	
			3 studen	ts = 9.0	
Area E			2 studen	ts = 8.0	

OUTCOME 1.2	Measurement Tool 1	Student Benchmark	Asse	ssment Freque
Students will utilize s cills	Area H of the clinical	- End of the 3 <sup>rd</sup> ser		
in radiation	evaluation form	average ≥ 8.5 on the scale	of - End	of the 6 <sup>th</sup> sem
protection		7.5 to 10.		
Outcome 1.2 - Tool 1	Results			Comments/Act
	9.23 overall for cohort of 2	019		Benchi
	9.92 overall for cohort of 2	018	2019 =1	9 students
			10 stud	ents = 10.0
			7 stud	ents = 9.5
Area H			2 stud	ents = 9.0
OUTCOME 1.2	Measurement Tool 2	Student Benchn	nark	Assessme
				Frequenc
Students will utilize s cills	Practical final positioning	All students will receive s	scores	End of the 3 <sup>r</sup>
in radiation	skills evaluation	≥75% on the scale of 0-3	based on 3	semester
protection		projections. (9 pts. total)		
Outcome 1.2 – Tool 2	Re	sults		Comments/Ac
	100% of students scored	75% or higher summer	Method 8	& criteria chan
	2018		Benchmar	k met
RADT 61C	Class average = 7.53			

NOTE:

Consider the same cohort group and same end of semester Area H final clinical evaluation = 9.23.

61C instructor too harsh perhaps?

OUTCOME 1.3 Measurement Tool	Student Benchmark	Assessment Freq
------------------------------	-------------------	-----------------

Students will	Area D of the clinical evaluation	Students will receive an		
demonstrate proper	form	average ≥ 8.5 on the	- End of the 6 <sup>th</sup> sea	
equipment handling		scale of 7.5 to 10.		
Outcome 1.3	Results		Comments/Actio	
	9.13 overall for cohort of 2019		Benchmark n	
Area D	9.81 overall for cohort of 2018			
		2019 =19 students		
		10 students = 10.0		
		5 students = 9.5		
		2 students = 9.0		
		2 students = 8	.5	

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

OUTCOME	Measurement	Student Benchmark	Frequency	
	Tool			
2.1: Students will utilize	Area F of the	Students will receive an	- End of 3rd semester	-
critical thinking in	clinical evaluation	average ≥ 8.5 on the scale of	- End of the 6th	
recognizing image quality	form.	7.5 to 10.	semester	
2.1: Students will utilize	Radiation Physics	An average rating of <b>85%</b> in	- End of the 2nd	
critical thinking in	lab final exam	all students' evaluations.	semester	
recognizing image quality				

Outcome 2.1- Tool 1	Results	Comments/A
	8.60 overall for cohort of 2019	Benc
	9.42 overall for cohort of 2018	2019 =19 students
		3 students = 10.0
		3 students = 9.5
		9 students = 9.0
		2 students = 8.5
		1 student = 8.0
Area F		1 students = 7.5
		Comments/A
Outcome 2.1- Tool 2	Results	-
		Benchmark not met. Te
		verbal to written assessn
RADT 63A section 5817	83.58% overall – Spring 2018 = 19 students	Will track and evaluate r

OUTCOME 2.2	Measurement Tool	Student Benchmark	Assessment
			Frequency
2.2: Students will adapt	Area F of the clinical	Students will receive an average	- End of the 3rd
to	evaluation form.	≥ 8.5 on the scale of 7.5 to 10.	semester
non-routine			- End of the 6th
patients.			semester
Outcome 2.2	Results		comments/Action I

	8.60 overall for cohort of 2019	Benchmark met
	= 19 students	Tracking Area F as of this report
	9.42 overall for cohort of 2018	
Area F	= 18 students	

# Program Goal 3: Students will communicate effectively.

OUTCOME	Measurement Tool	Student Benchmark	Fre	quency	R
- 3.1: Students	Area B of the	-Students will receive	- End of 3r	d semester	- Clinical ir
will	clinical evaluation	an average ≥ 8.5 on	- End of th	e 6th	
demonstrate	form.	the scale of 7.5 to 10.	semester	-	
good					
communication in the					
clinical environment.					
Outcome 3.1	Results			C	Comments/
	9.08 overall for coho	rt of 2019			Bend
	9.83 overall for coho	rt of 2018		2019 =	19 student
				9 stud	dents = 10.0
				4 stu	idents = 9.5
				5 stu	idents = 9.0
Area B				1 stu	dents = 8.5

ОUTCOME	Measurement Tool	Student Benchmark	Frequency	
- 3.2: Students will demonstrate good <b>oral</b> communication.	Oral communication grading of the classes' project	- Students will receive an average ≥ <b>8.5</b> on the scale of 7.5 to 10	- End of 4th semester	1
Outcome 3.2				
Oral 63B ALARA proj ect	9.13 class average Fall 2018 19 students in the cohort ~ 14@ 9.0 & 5 @ 9.5		Ber	nchi

OUTCOME	Measurement	Student Benchmark	Frequency	
	Tool			
- 3.3: Students will	Written	An average rating of	- End of the 5th	- RT
Demonstrate good written	communication	85% in all students'	semester	
communication.	grading of the	evaluations.		
	classes' projects			
Outcome 3.3	Results			Comi
RADT 65 written project	91.56% clas	ss average Spring 2018		Ве

RADT 65 written project	91.56% class average Spring 2018	Ве
		Scores for coho
		5 students = 95
		2 students = 94
		4 students = 93
		5 students = 90

	1 student = 88
	1 student = 75

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

OUTCOME	Measurement Tool	Student Benchmark	Frequency	R
- 4.1: Students will	Area C of the clinical	-Students will	- End of 3rd	- Clinical in
demonstrate	evaluation form.	receive an average ≥	semester	
professionalism & ethical		8.5 <b>on</b> the scale of	- End of the 6th	
decision making.		7.5 to 10.	semester	
Outcome 4.1	Results		Cor	nments/Acti
	9.35 overall for coho	ort of 2019		Benchi
	_	, ====		
	9.86 overall for coho	•	2019 =1	9 students
	•	•		
Area C	•	•	13 stud	9 students

OUTCOME	Measurement Tools	Student Benchmark	Frequency	
- 4.2: Students w ill	- RADT 60 ASRT Ethics	- An average rating of	- Annually	-
demonstrate	Project & Test from an	85% in all students'		
understanding of ethical	ASRT Directed Reading	evaluations on the Ethics		
decision making.		exam of RADT 60.		
Outcome 1.2	Results		Comments/	'Ac
RADT 60	Fall 2017 Class average = 93%		Ber	ıch
			2017 = 19 students	
			5 students = 25	
			7 students = 24	
			3 students = 23	
			2 students = 22	
			1 student = 20	
			1	

# Santa Rosa Junior College Radiologic Technology Assessment Plan **Program Effectiveness Measures** 2017 - 2018

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
1: Consistent and	Completion rate results	The program will graduate at	Annually at
acceptable completion		least 80% of its students.	graduation
rate.			

Outcome 1	Results	Comments/Act
Class of 2016-2018	18 of 20 (90%) completed the program	Benchmark
		1 student voluntarily withdrew from
		dismissed for failure in didactic and o

OUTCOME	Measurement Tool	Program Benchmark	Frequency
2: Graduates will pass the	ARRT exam results	85% of program graduates will	Annually
credentialing		pass on the first attempt.	
exam.			

Outcome 2	Results	Comments/Acti
Class of 2016 - 2018	16 of 18 passed on first attempt = 89%	Mean cohort score = 85.0%

OUTCOME	Measurement Tool	Program Benchmark	Frequency
3: Graduates will	ARRT exam scores	ARRT exam score will be at or	Annually
pass			
credentialing exam at o		above the national	
		average.	
above national average.			

Outcome 3 Results		Comi
Class of 2016-2018	Cohort overall average = 85.1	В
	88.9% of the class passed on the first attempt	Students score
	(National average = 83.6)	

OUTCOME	Measurement Tool	Program B	enchmark	Frequ
4: Graduates will become employed within 12 months of after graduation (5-year average).	Graduate survey results	Of those seeking em program graduates we employed within 12 graduation.	vill become	Annual yea
Outcome 4	Results	•	Co	mments
12 month employment	9/9 = 100% ~ 7 of 7 responses p 5 year average 90.5% (no grad	-		Benchn

OUTCOME	Measurement Tool	Program Benchmark	Frequ
---------	------------------	-------------------	-------

satisfied with their education.		with their education	month gradu sur
Outcome 4	Results		Comments
2017 graduate satisfaction	7 of 7 Strongly ag	gree	Benchmark me

Graduate survey

85% of graduates will be satisfied

5. Graduates will be

OUTCOME	Measurement Tool	Program Benchmark	Frequency
6: Employers will be satisfied with their employee's education	Employer survey .	85% of employers will be satisfied with graduate employees education	Annually 12 months postgraduatio survey

Outcome 6		Comm		
2017 employer survey		Agree	St Agree	100% of emplo
5 responses	Patient care	1	4	No neutral, disa
	Ethics	1	4	
	Professionalism		5	
	Communication	1	4	
	Critical Thinking	3	2	
	Clinical Competency	3	2	Ве
	Reliability and Consist	ency 1	4	
	SRJC has effectively pr	epared 2	3 I	
	am satisfied with the			
	educational preparati	on of SRJC 2	3	

# 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. For example: we moved the Pathology course from Spring semester to Fall. Our program has now re-written CORs for the Physics, Introduction to Radiologic Technology and Survey of Medical Imaging courses to directly reflect industry technological advances, promoting a filmless environment and eliminating references to the obsolete film-screen model that inculded use of a darkroom and harsh processing chemistry.

# Radiologic Technology - FY 2017-18 (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	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S201
Radiologic Technology	58	160	119	73	157	107	66	155	1

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

Discipline	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	O	0	0	0	0	0	0	0	

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

Discipline	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	32	38	37	37	40	59	38	38	

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

Discipline	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	90	198	156	110	197	166	104	193	1

## 5.2a Enrollment Efficiency

Radiologic Technology is ONLY taught on Santa Rosa campus.

# Santa Rosa Junior College - Program Unit Review

Radiologic Technology - FY 2017-18 (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	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	58	160	119	73	157	107	66	155	1

# Santa Rosa Junior College - Program Unit Review Radiologic Technology - FY 2017-18 (plus current FY Summer and Fall)

**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	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	64.4%	106.2%	94.4%	81.1%	102.1%	85.6%	73.3%	100.7%	86.

# 5.2b Average Class Size

The program's class size is limited to no more than 20. 20 students start at the beginning of each fall semester.

# Santa Rosa Junior College - Program Unit Review

Radiologic Technology - FY 2017-18 (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	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	14.5	22.0	19.7	18.3	21.1	15.3	16.5	20.9	1

## 5.3 Instructional Productivity

# Santa Rosa Junior College - Program Unit Review Radiologic Technology - FY 2017-18 (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		X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S201
	FTES	5.60	17.72	14.17	5.14	17.63	12.94	5.07	17.29	12.
	FTEF	0.49	1.61	1.33	0.49	1.66	1.29	0.50	1.69	1.
	Ratio	11.35	10.97	10.68	10.42	10.62	10.02	10.13	10.24	9.

# 5.4 Curriculum Currency

Periodic revision and update of radiologic technology coursework has occurred most recently in the Spring 2019. All rad tech courses are within their approved limits of periodic review. Please refer to section 5.1 for a detailed description.

# 5.5 Successful Program Completion

Radiologic Technology - FY 2013-18 (plus current FY Summer and Fall)

Coursework is only held at Santa Rosa Campus.

	Total number	of Graduates	
2018	90%	18/20	
2017	100%	20/20	
2016	85%	17/20	
2015	80%	16/20	
2014	No graduating class		
2013	100%	16/16	
5 year average	90.6%	87/96	_

# Santa Rosa Junior College - Program Unit Review Radiologic Technology - FY 2017-18 (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	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	93.1%	90.0%	85.7%	95.8%	91.1%	95.3%	95.5%	95.4%	88.

#### 5.6 Student Success

Radiologic Technology - FY 2013-18 (plus current FY Summer and Fall)

Coursework is only held at Santa Rosa Campus.

	ARRT National Board Certifying Exam Pass Rate	
Graduation year	% passing on first attempt	Passing on 1st attempt
2018	89%	16/18
2017	100%	20/20
2016	100%	17/17
2015	87.5%	14/16
2014	0% No Graduating Class	0/0
2013	87.5%	14/16
5 year average	93.1%	81/87

There have been a small percentage of students who successfully passed the National Board Certifying Exam on the second attempt.

Santa Rosa Junior College - Program Unit Review
Radiologic Technology - FY 2017-18 (plus current FY Summer and Fall)

#### **Santa Rosa Campus**

Discipline	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	93.1%	93.8%	89.1%	95.8%	93.0%	95.3%	97.0%	96.0%	92.

# **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	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	93.1%	90.0%	85.7%	95.8%	91.1%	95.3%	95.5%	95.4%	88.

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

Discipline	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	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	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	94.1%	97.4%	100.0%	100.0%	97.5%	96.6%	100.0%	100.0%	100.

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

Discipline	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	93.5%	91.5%	89.1%	97.2%	92.4%	95.8%	97.1%	96.3%	92.

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

#### **Santa Rosa Campus**

Discipline	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	3.50	3.04	3.26	3.50	3.14	3.27	2.98	3.30	3.

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

Discipline	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018	
Radiologic Technology	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.	

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

Discipline	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018		
Radiologic Technology	3.91	3.91	3.77	3.73	3.78	3.62	3.91	3.78	3.		

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

Discipline	X2015	F2015	S2016	X2016	F2016	S2017	X2017	F2017	S2018
Radiologic Technology	3.74	3.35	3.50	3.63	3.41	3.46	3.47	3.49	3.

# 5.7 Student Access

# Santa Rosa Junior College - Program Unit Review Radiologic Technology - FY 2017-18 (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).

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

Radiologic Technology	Ethnicity	2015-16	Percent	2016-17	Percent	2017-18	Percent	2
	White	240	55.8%	234	50.6%	203	45.7%	
	Asian	25	5.8%	9	1.9%	16	3.6%	
	Black	18	4.2%	12	2.6%	19	4.3%	
	Hispanic	108	25.1%	168	36.4%	174	39.2%	
	Native American	0	0.0%	0	0.0%	0	0.0%	
	Pacific Islander	1	0.2%	1	0.2%	0	0.0%	
	Filipino	10	2.3%	9	1.9%	13	2.9%	
	Other Non-White	24	5.6%	23	5.0%	15	3.4%	
	Decline to state	4	0.9%	6	1.3%	4	0.9%	
	ALL Ethnicities	430	100.0%	462	100.0%	444	100.0%	

# **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	2015-16	Percent	2016-17	Percent	2017-18	Percent	2
	Male	152	35.3%	168	36.4%	127	28.6%	
	Female	278	64.7%	292	63.2%	317	71.4%	
	Unknown	0	0.0%	2	0.4%	0	0.0%	
	ALL Genders	430	100.0%	462	100.0%	444	100.0%	

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

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

Radiologic Technology	Age Range	2015-16	Percent	2016-17	Percent	2017-18	Percent	2
	0 thru 18	7	1.6%	5	1.1%	3	0.7%	
	19 and 20	30	7.0%	23	5.0%	39	8.8%	
	21 thru 25	153	35.6%	207	44.8%	141	31.8%	
	26 thru 30	95	22.1%	81	17.5%	133	30.0%	
	31 thru 35	74	17.2%	52	11.3%	62	14.0%	
	36 thru 40	26	6.0%	36	7.8%	31	7.0%	
	41 thru 45	22	5.1%	31	6.7%	21	4.7%	
	46 thru 50	16	3.7%	14	3.0%	10	2.3%	
	51 thru 60	6	1.4%	13	2.8%	4	0.9%	
	61 plus	1	0.2%	0	0.0%	0	0.0%	
	ALL Ages	430	100.0%	462	100.0%	444	100.0%	

## 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. Please refer to section 5.1 for examples.

# 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. Additionally, admissions and records can access any college data that any student may request.

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

The summary of the most recent employment statistics can be found in the chart below.

	Graduate Employment Rate measured at 12 months post-graduation	
Graduate class year	% graduates employed	Population
2018	89% (preliminary data)	18
2017	100%	20 (7 employed
2016	100%	17 (11 employed
2015	100%	16 (9 employed -
2014	No Graduating Class	
2013	69%	16 (9 employed
5 year Average	90%	36 employed /

### 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);
- $\bullet$  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.

The Interim report was sumitted on time in December 2018. JRCERT requested additional information in March 2019. This has been submitted and we are awaiting the outcome. The next scheduled periodic site visit will be fourth quarter 2022.

# 6.1 Progress and Accomplishments Since Last Program/Unit Review

Rank	Location	SP	M	Goal	Objective	Time Frame	Progress to Date
0001	Santa Rosa	01	01	New DR X-ray room	We were awarded a grant through the Strong	2018-2019	A deposit has been paid, equipment is on
					Workforce program. A vendor has been		order and we are awaitng confirmation from
					selected and installation scheduled to begin		the vendor for demolition of the exsisting
					end of May 2019 with a Fall semester 2019		room and installation of new DR equipment.
					completion date target.		
0002	Santa Rosa	01	05	Additional clinical site affiliations	Enough clinical affiliated sites to place	2016 and	A full time position in concert with additional
					students	beyond	clinical student placement sites would allow
							growth of our program.

## 6.2b PRPP Editor Feedback - Optional

4/10/18

This is Rich.

I have made our Dean aware that I will continue putting a request for a full time faculty clinical coordinator in our PRPP this year as I have for the past several. I do this to reinforce this need has continued for many years. Up to now we have been blessed with relatively compliant students legitimately concerned with taking our program seriously and becoming radiologic technologists. I am sure that the vast majority of our future students will be similarly disposed. My concern is that we will get someone in the program who does not have the high integrity to which our program has become accustomed, and who has their own agenda. My concern is that this student may be placed in a clinical site that has relatively lax supervision for students, and suddenly someone gets hurt. My feeling is that a full time clinical coordinator who has only this program as employment will better serve the needs of that student, our program and the clinical site, than will a part time or adjunct faculty clinical coordinator who is equally distracted with our program and his/her full time employment.

A job description for faculty clinical coordinators according to Standard 3.8, JRCERT is to provide:

Full-time Clinical Coordinator:

Correlates clinical education with didactic education,

Evaluates students,

Participates in didactic and/or clinical instruction,

Supports the program director to help assure effective program operation,

Coordinates clinical education and evaluates its effectiveness,

### Participates in the assessment process,

Cooperates with the program director in periodic review and revision of clinical course materials,

Maintains current knowledge of the discipline and educational methodologies through continuing professional development, and

Maintains current knowledge of program policies, procedures, and student progress.

# 6.3a Annual Unit Plan

Rank	Location	SP	M	Goal	Objective	Time Frame	Resources Required
0001	Santa Rosa	01	01	New DR X-ray room	We have proposed a grant through the Strong	2018-2019	Our grant proposal has been reviewed
					Workforce Program to obtain a new x-ray		favorably for up to \$200,000.
					room replacement for the existing one nearly		
					40 years old.		
0002	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.