Program Review

Radiologic Technology Group

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Standing Requirements

Mission Statement

The mission of the Pasadena City College Technology is to prepare students for the entry level skills required of a Radiologic Technologist by proving high quality instruction with a commitment to multicultural sensitivity by promoting growth of the student as an individual.

Program Outcomes (Program Level)

Radiologic Technology Group Outcome Set

<table>
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<tr>
<th>Outcome</th>
<th>Mapping</th>
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<tbody>
<tr>
<td>Outcome #1</td>
<td>No Mapping</td>
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<tr>
<td>Radiologic Technology students will demonstrate competency in the clinical component through cognitive skills to analyze, synthesize and evaluate medical information for patient care.</td>
<td></td>
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<tr>
<td>Outcome #2</td>
<td>No Mapping</td>
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<tr>
<td>Radiology Technology Students will demonstrate effective communication skills through didactic and clinical environment</td>
<td></td>
</tr>
<tr>
<td>Outcome #3</td>
<td>No Mapping</td>
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<tr>
<td>The Radiologic Technology students who graduate will demonstrate knowledge in procedures to promote health, safety and optimal use of radiation for students, patients and the general public</td>
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Curriculum Map

Active Maps

- radiology-map
  - Alignment Set: Radiologic Technology Group Outcome Set
  - Created: 05/04/2011 9:41:01 am PST
  - Last Modified: 05/17/2011 2:48:27 pm PST
Program Review
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2010-2011 Program Review

SLO & Program Outcomes & Measures

SLO & Program Findings

Components, Outcomes & Measures

Introduction/Background

The Radiologic Technology Program submitted their written application and received approval to offer the Radiologic Technology Program many years ago. They received approval through PCC as well as through the State of California and the Joint Committee in Radiologic Technology Accreditation. Since that time the program has been reviewed with JRCERT every 5-7 years and with the State of California annually. It is unknown when the program actually started, but some of the archived records indicated that it was in the 1960’s.

The RADTC program is 70.5 units and is completed over a 24 month period of time. Graduates are awarded a Certificate of Achievement and/or Associate's Degree upon Completion in addition to specific occupational skills certificates as required by industry standards. Those include, Mammography Certificate, Computed Tomography certificate as well as Venipuncture and Fluoroscopic Certificate. The curriculum is up to date keeping up with the industry standards and is reviewed yearly by program officials.

The curriculum has been defined in terms of a mission statement, goals, learning outcomes, activities and evaluation procedures to measure program success.

To date we have a high pass rate of national boards upon completion as well as high completion rate from the program.

Components/Courses and Measures

Category 1. Faculty Development and Curriculum

Activity A. Faculty Development

Outcome #1

Full-time faculty assess need for and are given opportunity to pursue necessary professional development and growth

Measure: Licensure and CEU’s

**Description of Measure (WHAT data were used to measure the outcome?):** CEU units will be analyzed to determine if faculty is current with the Accreditation Board and the State of California. To be current with a license one needs to have a specific number of CEU's.

**Acceptable Target and Rationale:** 24 CEU's per 24 months according to State of California and American Registry of Radiologic Technologist. Half of the CEU's are required to be in the main discipline, while if another license or certificate is held the other half needs to be in that discipline. Certificates and licensure renewal is done on the individuals birth month every 14 months.

**Ideal Target and Rationale:** 30 CEU's is ideal according to State of California and American Registry of Radiologic Technologist.

**What steps were taken to analyze the data?:** Bi-annual review of licensure for faculty, this is done through submission of the current licenses and certificates from all All Clinical instructors, faculty as well as individuals who are involved with student instruction. The State of California and the Joint Committee on Education in Radiologic Technology (JRCERT) require documentation from the program when a new instructor is hired and when we go through the accreditation process.

**Key/Responsible Personnel (WHO analyzed the data?):** Program Director and Clinical Coordinator.

Activity B. Curriculum Management
**Outcome #1**
Program curriculum is current

**Measure:** Yearly review of RADTC courses

**Description of Measure (WHAT data were used to measure the outcome?):** Program review yearly to establish the need for continuing the courses within the CTE program. Each faculty submits a curriculum review for each class they taught in the previous semester. Participation in completing the forms and review indicates that each faculty is involved in the process. Courses reviewed after each semester the course if offered, such as the clinical and didactic portions. Course review includes review of the syllabus, text book, student outcomes, objectives. Students also have an opportunity to evaluate the course and instructor.

**Acceptable Target and Rationale:** 90% of the faulty teaching clinical/didactic/and laboratory courses complete the curriculum annually. Through this process the program officials will recommend changes and updates to the course.

**Ideal Target and Rationale:** 100% of the faculty will complete the form and participate in faculty discussion about the program, courses..

**What steps were taken to analyze the data?:** Program Director and faculty review the documentation and changes if needed. Information is presented to the Advisory Board annually for recommendations before submission to the Health Sciences Dean.

**Key/Responsible Personnel (WHO analyzed the data?):** Program Director and Clinical Coordinator

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**Category 11. Institutional Support**

**Activity A. Budget**

**Outcome #1**
Effective Allocation of the Division’s Resources to Meet the Requirements of the Program.

**Measure:** Budget Resources

**Description of Measure (WHAT data were used to measure the outcome?):** The Radiology Technology Program identifies a stable financial resources to support the program’s mission, goal and objectives based on the following resources allocated to the program.

RADTC Yearly budget # 1309 and expenses
RADTC ARCC funds through the Health Sciences Division
RADTC Foundation Grant and Mini Grant received for 2011-2012
WIA Grant was received to purchase major equipment for the program.

**Acceptable Target and Rationale:** Program should maintain an adequate budget to meet the mission statement, goals and objectives of the program. The funds should be utilized to purchase supplies, materials and equipment, replacement of equipment, faculty development, secretarial, student workers and tutoring in the RADTC program.

**Ideal Target and Rationale:** We are within the current budget allocation and resources. At this time due to our relocation we will adequately content with our current equipment. In the future we will need support for professional development activities. Grants have been written to assist faculty with obtaining current resources.

**What steps were taken to analyze the data?:** Review budget periodically
Review of faculty development
Discuss the budget needs and allocations with program faculty, Advisory Board Members and Health Sciences Division Dean.

**Key/Responsible Personnel (WHO analyzed the data?):** Health Sciences Division Dean, Program Director, Program Faculty and Advisory Board Members.

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**Category 111. Student Success and Achievement**

**Activity A. Student Success and Retention**

**Outcome #1**
Progress in student success and retention

**Measure:** Student Success and Retention

**Description of Measure (WHAT data were used to measure the outcome?):** Reviewed IPRO Success and Retention rate by age, gender, basic skills and ethnic background.

**Acceptable Target and Rationale:** 80% of students who apply to the RADTC Program should
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complete the program successfully.

**Ideal Target and Rationale:** 95% of students who apply to the RADTC Program successfully complete the program.

**What steps were taken to analyze the data?:** Program Director reviews information with Program Faculty, Advisory Board and Division Dean.

**Key/Responsible Personnel (WHO analyzed the data?):** Program Faculty and Program Director.

**Supporting Attachments:**

![Success by Demog - Radiologic Tech Group Review.xls](Microsoft Excel)

### Activity C. Progression and Awards Conferred

**Outcome #3**

Students are progressing through the Program’s sequence, based on Enrollment and Success data

#### Measure: Program Awards

**Description of Measure (WHAT data were used to measure the outcome?):** Number of certificates issued each year varies from one year to another. Currently the program sees a slight decline in the admission process due to the current nature of the economy.

**Acceptable Target and Rationale:** 10% increase in the number of students conferring achievements from the last application period

**Ideal Target and Rationale:** 50% increase in the number of students conferring achievements from the previous application period.

**What steps were taken to analyze the data?:** Program Director and faculty discussions, meetings and evaluations in fall and winter session to identify the number of students the clinical facility can utilize. Many of the clinical facilities has demonstrated a reduction of patients as well as services due to the nature of the economy. When clinical facilities indicate the number of students their facility needs our student selection is based on those numbers. Over the past few years there has been a decrease of 6 student accepted into the program in the spring semester.

**Key/Responsible Personnel (WHO analyzed the data?):** Program Director, Clinical Coordinator and Health Care Facilities Management.

**Supporting Attachments:**

![Certificates - Radiologic Tech Group Review.xls](Microsoft Excel)

### Activity D. Student Enrollment and Faculty to Student Ratio

**Outcome #1**

The Program demonstrates consistent enrollment based on demand and market

#### Measure: Enrollment

**Description of Measure (WHAT data were used to measure the outcome?):** Application grid compiled by the Health Sciences Division staff reflects consistent enrollment into the RADTC program.

**Acceptable Target and Rationale:** We will have at least 22 qualified applicants to enroll in the summer 2011 semester. We have a 5% increase from the number of applicants that previously applied. We have a pool of additional applicants (alternates to draw from for admission into the RADTC Program).

**Ideal Target and Rationale:** To have a larger pool of qualified applicants. In 2015 it will be ideal to have all students entering the program hold a Associate’s Degree or higher.

**What steps were taken to analyze the data?:** Program Faculty, Health Sciences Staff, Evaluation Staff and Dean of Health Sciences review the applications for pre-requisite courses. Program Faculty, Health Sciences Staff and Division Dean randomly select applicants from the pool to reach enrollment numbers. Enrollment numbers vary from year to year dependent on the clinical facilities.

**Key/Responsible Personnel (WHO analyzed the data?):** Program Director and Program Faculty.

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**USA- JRCERT- Standards for an Accredited Educational Program in Radiography (Copy 1)**

**Standard One: Integrity**

The program demonstrates integrity in the following:
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- Representations to communities of interest and the public,
- Pursuit of fair and equitable academic practices, and
- Treatment of, and respect for, students, faculty, and staff.

In support of Standard One, the program:

Objective 1.3
Provides timely, appropriate, and educationally valid clinical experiences for each admitted student.

▶ Measure: Monthly Clinical Documentation

Description of Measure (WHAT data were used to measure the outcome?): Attendance, clinical experiences and clinical hrs are assessed monthly. Students turn in their documents in a timely fashion.

Acceptable Target and Rationale: All students would complete the monthly documentation and total the clinical hours on an excel spread sheet according to the number of days per month they attend clinical.

Ideal Target and Rationale: Students attend two clinical experience days during the first year of the program with no monthly absences.

What steps were taken to analyze the data?: Monthly verification of clinical documents

Key/Responsible Personnel (WHO analyzed the data?): Clinical Instructor at each clinical facility
Clinical Coordinator at PCC
Program Director

Objective 1.4
Limits required clinical assignments for students to not more than 10 hours per day and the total didactic and clinical involvement to not more than 40 hours per week.

▶ Measure: Documentation of required clinical hours

Description of Measure (WHAT data were used to measure the outcome?): Student monthly clinical documents. If a second year student goes over the clinical hours of more than 40 hours per week and more than 10 hrs. per day, the student must sign a form indicating that they are doing so on a voluntary basis.

Acceptable Target and Rationale: During the first year all student maintain less than 40 hrs. per week between clinical and didactic. Second year students should have no more than 40 hrs. per week for clinical and didactic classes.

Ideal Target and Rationale: During the first year all student maintain less than 40 hrs. per week between clinical and didactic. Second year students should have no more than 40 hrs. per week for clinical and didactic classes.

What steps were taken to analyze the data?: Monthly evaluation of clinical documents and student records.

Key/Responsible Personnel (WHO analyzed the data?): Clinical Coordinator
Program Director

Objective 1.7
Assures that students are made aware of the JRCERT Standards for an Accredited Educational Program in Radiography and the avenue to pursue allegations of non-compliance with the STANDARDS

▶ Measure: Student Awareness

Description of Measure (WHAT data were used to measure the outcome?): Forms given to students and are collected.

Acceptable Target and Rationale: All students sign the information sheet for the brochure regarding acknowledgement of receiving the JRCERT brochure.

Ideal Target and Rationale: All students sign the information sheet for the brochure regarding acknowledgement of receiving the JRCERT brochure.

What steps were taken to analyze the data?: Collect the JRCERT forms and input the data on a spread sheet.

Key/Responsible Personnel (WHO analyzed the data?): Program Director

Supporting Attachments:

jrcert.org (Web Link)
JRCERT Standards for an Accredited Educational Program in Radiography. Effective January 1, 2011.
http://www.jrcert.org/acc_standards.html

Standard Four: Health and Safety
The program’s policies and procedures promote the health, safety, and optimal use of radiation for students, patients, and the general public.
In support of Standard Four, the program:

**Objective 4.3**
Assures that students employ proper radiation safety practices.

**Measure: Health and Safety**

**Description of Measure (WHAT data were used to measure the outcome?):** Radiation Protection course, student clinical evaluation forms, daily radiographic procedure logs for each student.

**Acceptable Target and Rationale:** The majority of RADTC students should adhere to the radiation protection competency form when completing the daily procedure logs and film evaluations. Student must complete and successfully demonstrate radiation protection policies in order to pass the competency.

**Ideal Target and Rationale:** All RADTC students should adhere to the radiation protection policies set forth by the program.

**What steps were taken to analyze the data?:** Daily procedure logs, clinical evaluations for the midterm and final evaluations as well as film critique.

**Key/Responsible Personnel (WHO analyzed the data?):** Program Director, Program Faculty and Clinical Instructors.

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**Review Findings and Recommendations**

**Category 1. Faculty Development and Curriculum**

**Activity A. Faculty Development**

**Outcome #1**
Full-time faculty assess need for and are given opportunity to pursue necessary professional development and growth

**Measure: Licensure and CEU's**

**Description of Measure (WHAT data were used to measure the outcome?):** CEU units will be analyzed to determine if faulty is current with the Accreditation Board and the State of California. To be current with a license one needs to have a specific number of CEU's.

**Acceptable Target and Rationale:** 24 CEU's per 24 months according to State of California and American Registry of Radiologic Technologist. Half of the CEU's are required to be in the main discipline, while if another license or certificate is held the other half needs to be in that discipline. Certificates and licensure renewal is done on the individuals birth month every 14 months.

**Ideal Target and Rationale:** 30 CEU's is ideal according to State of California and American Registry of Radiologic Technologist.

**What steps were taken to analyze the data?:** Bi-annual review of licensure for faculty, this is done through submission of the current licenses and certificates from all All Clinical instructors, faculty as well as individuals who are involved with student instruction. The State of California and the Joint Committee on Education in Radiologic Technology (JRCERT) require documentation from the program when a new instructor is hired and when we go through the accreditation process.

**Key/Responsible Personnel (WHO analyzed the data?):** Program Director and Clinical Coordinator.

**Findings for Licensure and CEU's**

**Summary of Findings:** Review of faculty information indicates that all faculty has met and exceeded the requirements for licensure and teaching qualifications as specified by the State of California Department of Public Health, Radiation Health Branch and JRCERT standards. Data used to measure faculty compliance with the State and Nationa Boards are as follows: Certificates and or documentation of CE courses Advanced skills courses CPR Certification Patient Care Certification of degrees received, state licenses Transcripts to verify degree Regularly reviewing information for subject matter and curriculum evaluation.

**Results:** Acceptable Target Achievement: Exceeded; Ideal Target Achievement : Exceeded
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Recommendations for Improvement: Continue to monitor, achieved the target achievement.

Reflections/Notes: All faculty members files were evaluated to maintain current licensure, CPR, and educational requirements as required by accreditation board and state.

Activity B. Curriculum Management

Outcome #1
Program curriculum is current

Measure: Yearly review of RADTC courses

Description of Measure (WHAT data were used to measure the outcome?): Program review yearly to establish the need for continuing the courses within the CTE program. Each faculty submits a curriculum review for each class they taught in the previous semester. Participation in completing the forms and review indicates that each faculty is involved in the process. Courses re-reviewed after each semester the course if offered, such as the clinical and didactic portions. Course review includes review of the syllabus, text book, student outcomes, objectives. Students also have an opportunity to evaluate the course and instructor.

Acceptable Target and Rationale: 90% of the faulty teaching clinical/didactic/and laboratory courses complete the curriculum annually. Through this process the program officials will recommend changes and updates to the course.

Ideal Target and Rationale: 100% of the faculty will complete the form and participate in faculty discussion about the program, courses.

What steps were taken to analyze the data?: Program Director and faculty review the documentation and changes if needed. Information is presented to the Advisory Board annually for recommendations before submission to the Health Sciences Dean.

Key/Responsible Personnel (WHO analyzed the data?): Program Director and Clinical Coordinator

Findings for Yearly review of RADTC courses

Summary of Findings: Each faculty member submits recommendations for the radiologic technology courses they taught for the semester. Participation in completing the curriculum review form verifies that faculty involvement is in process. The courses are reviewed after each semester with input from the individuals teaching he courses and them and is submitted to the Advisory Board for Recommendations. Current text, new test methods and current technology is also reviewed during that time.

Results: Acceptable Target Achievement: Met; Ideal Target Achievement: Approaching

Recommendations for Improvement: More adjunct faculty involvement in curriculum process, meet with adjunct faculty monthly. Articulate with a state university for acceptance of the courses. Currently the program director at CSUN accepts the graduates from the PCC Program into the BS Program without any articulate agreement.

Reflections/Notes: Part-time faculty are on campus a limited number of hours so to heir other employment responsibilities. We maintain communication mostly through emails and phone conversations.

Category 11. Institutional Support

Activity A. Budget

Outcome #1
Effective Allocation of the Division's Resources to Meet the Requirements of the Program.

Measure: Budget Resources

Description of Measure (WHAT data were used to measure the outcome?): The Radiology Technology Program identifies a stable financial resources to support the program’s mission, goal and objectives based on the following resources allocated to the program.

RADTC Yearly budget #1309 and expenses
RADTC ARCC funds through the Health Sciences Division
RADTC Foundation Grant and Mini Grant received for 2011-2012
WIA Grant was received to purchase major equipment for the program.

Acceptable Target and Rationale: Program should maintain an adequate budget to meet the
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mission statement, goals and objectives of the program. The funds should be utilized to purchase supplies, materials and equipment, replacement of equipment, faculty development, secretarial, student workers and tutoring in the RADTC program. The program must have adequate budget resources and provide a safe working environment to stimulate the radiologic technology environment.

**Ideal Target and Rationale:** We are within the current budget allocation and resources. At this time due to our relocation we will adequately content with our current equipment. In the future we will need support for professional development activities. Grants have been written to assist faculty with obtaining current resources.

**What steps were taken to analyze the data?:** Review budget periodically, Review of faculty development, Discuss the budget needs and allocations with program faculty, Advisory Board Members and Health Sciences Division Dean.

**Key/Responsible Personnel (WHO analyzed the data?):** Health Sciences Division Dean, Program Director, Program Faculty and Advisory Board Members.

### Findings for Budget Resources

**Summary of Findings:** The Radiologic Technology Program identifies a semi-stable financial resources semi-sufficient to support the program’s mission, goals and objectives. More supplies and equipment purchases are based on the the resources identified through CTEA, Mini-Grants, Foundation Grants, lottery and supply funds. Larger pieces of equipment will need to be purchased when the return to U building occurs in 3-5 years. At that time we will need to replace the current x-ray equipment due to age and depreciation. Currently we are up to date with resources except for the positioning mannequin which is being discarded after 20 years of use.

**Results:** Acceptable Target Achievement: Met; Ideal Target Achievement : Moving Away

**Recommendations for Improvement:** Increase program budget per year due to the increase in cost of supplies, film badges, and radiology equipment.

**Reflections/Notes:** Yearly increase in budget. Budget has been at the current amount for quite sometime and the need for supplies has increased tremendously.

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### Category 111. Student Success and Achievement

#### Activity A. Student Success and Retention

**Outcome #1** Progress in student success and retention

**Measure:** Student Success and Retention

**Description of Measure (WHAT data were used to measure the outcome?):** Reviewed IPRO Success and Retention rate by age, gender, basic skills and ethic background.

**Acceptable Target and Rationale:** 80% of students who apply to the RADTC Program should complete the program successfully.

**Ideal Target and Rationale:** 95% of students who apply to the RADTC Program successfully complete the program.

**What steps were taken to analyze the data?:** Program Director reviews information with Program Faculty, Advisory Board and Division Dean.

**Key/Responsible Personnel (WHO analyzed the data?):** Program Faculty and Program Director.

**Supporting Attachments:**

- Success by Demog - Radiologic Tech Group Review.xls (Microsoft Excel)

**Findings for Student Success and Retention**

**Summary of Findings:** Reviewed the IPRO Success and Retention Rate by age, gender, basic skills, ethnic and background. Currently the program demonstrated an adequate success rate for student success and student retention. Students who dropped from the program were mostly those individuals who we were not adequately prepared to enter the program. Students who generally apply to the program have all of the prerequisites completed with a 3.0 GPA or higher, a small percentage of students who enter with a 2.0 GPA are generally the one's that do not do well and are dropped or voluntarily withdraw from the program. In addition, students do not fully
understand what is required of the radiologic technologist before coming into the program and are often mislead prior to applying. Once hey are in the program they may realize that this field is not for them.

**Results:** Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded

**Recommendations for Improvement:** Recommendations not necessarily used for improvement:
- Increase GPA for entry level student to 2.5 GPA, increase the courses needed for entry, i.e. higher math class, Chemistry in addition Physics 10 & 10L, Speech and/or Communication class.
- Have interviews with students, tighten up the admission policies. Currently US Veteran’s have priority when applying to the program.

**Reflections/Notes:** In January of 2015 the entry level student will need to have their Associate's Degree of higher in order to sit for the national boards. The next application period in 2012, will require all students entering the program have all of the GE courses completed. Rationale: during the course of the two years the student does not have time to attend any classes on campus due to the structure of the didactic and clinical components.

**Substantiatiing Evidence:**

- All Radiology Group Review.xls (Excel Workbook (Open XML))

### Activity C. Progression and Awards Conferred

#### Outcome #3
Students are progressing through the Program’s sequence, based on Enrollment and Success data

#### Measure: Program Awards

**Description of Measure (WHAT data were used to measure the outcome?):** Number of certificates issued each year varies from one year to another. Currently the program sees a slight decline in the admission process due to the current nature of the economy.

**Acceptable Target and Rationale:** 10% increase in the number of students conferring achievements from the last application period.

**Ideal Target and Rationale:** 50% increase in the number of students conferring achievements from the previous application period.

**What steps were taken to analyze the data?:** Program Director and faculty discussions, meetings and evaluations in fall and winter session to identify the number of students the clinical facility can utilize. Many of the clinical facilities has demonstrated a reduction of patients as well as services due to the nature of the economy. When clinical facilities indicate the number of students their facility needs our student selection is based on those numbers. Over the past few years there has been a decrease of 6 student accepted into the program in the spring semester.

**Key/Responsible Personnel (WHO analyzed the data?):** Program Director, Clinical Coordinator and Health Care Facilities Management.

**Supporting Attachments:**

- Certificates - Radiologic Tech Group Review.xls (Microsoft Excel)

**Findings for Program Awards**

**Summary of Findings:** Review of the IRPO data to determine the enrollment, retention, and success rates of the students in the program indicates that the program has a high success rate upon completion of the RADTC program.
- 2005-2006-97.6% success rate
- 2006-2007-96.2 success rate
- 2007-2008-99.7 success rate
- 2008-2009-success rate
- 2009-2010-success rate Average-98.4%

Retention rate is at 100% for 2007-2010. Evaluation of the documents indicates that the program is stable.

**Results:** Acceptable Target Achievement: Exceeded; Ideal Target Achievement: Exceeded

**Recommendations for Improvement:** NA

**Reflections/Notes:** NA
Activity D. Student Enrollment and Faculty to Student Ratio

Outcome #1
The Program demonstrates consistent enrollment based on demand and market.

Measure: Enrollment

Description of Measure (WHAT data were used to measure the outcome?): Application grid compiled by the Health Sciences Division staff reflects consistent consistent enrollment into the RADTC program.

Acceptable Target and Rationale: We will have at least 22 qualified applicants to enroll in the summer 2011 semester. We have a 5% increase from the number of applicants that previously applied. We have a pool of additional applicants (alternates to draw from for admission into the RADTC Program).

Ideal Target and Rationale: To have a larger pool of qualified applicants. In 2015 it will be ideal to have all students entering the program hold a Associate’s Degree or higher.

What steps were taken to analyze the data?: Program Faculty, Health Sciences Staff, Evaluation Staff and Dean of Health Sciences review the applications for pre-requisite courses. Program Faculty, Health Sciences Staff and Division Dean randomly select applicants from the pool to reach enrollment numbers. Enrollment numbers vary from year to year dependent on the clinical facilities.

Key/Responsible Personnel (WHO analyzed the data?): Program Director and Program Faculty.

Findings for Enrollment

Summary of Findings: Application grid compiled by the Health Sciences Division staff reflects consistent enrollment into the RADTC Program. During the past application period in April 2011, the program recognized 137 individuals who applied to the RADTC Program. We are able to have to 56 students in the program, however in the past few years the numbers of accepted students have been decreased due to the decrease in patients entering the clinical facilities.

Results: Acceptable Target Achievement: Met; Ideal Target Achievement : Approaching

Recommendations for Improvement: Seek out new clinical facilities for the program in other areas of Southern California, increase the Occupational Skills Courses such as RADTC 121 Mammography, RADTC 123, Computed Tomography, RADTC 118, Fluoroscopy and RADTC 103C, Cross Sectional Anatomy. Having the increase enrollment in these elective courses will perhaps strengthen the job market.

Reflections/Notes: http://www.bls.gov/oco/ocos105.htm#outlook

USA- JRCERT- Standards for an Accredited Educational Program in Radiography (Copy 1)

Standard One: Integrity
The program demonstrates integrity in the following:
- Representations to communities of interest and the public,
- Pursuit of fair and equitable academic practices, and
- Treatment of, and respect for, students, faculty, and staff.

In support of Standard One, the program:

Objective 1.3
Provides timely, appropriate, and educationally valid clinical experiences for each admitted student.

Measure: Monthly Clinical Documentation

Description of Measure (WHAT data were used to measure the outcome?): Attendance, clinical experiences and clinical hrs are assessed monthly. Students turn in their documents in a timely fashion.

Acceptable Target and Rationale: All students would complete the monthly documentation and total the clinical hours on an excel spread sheet according to the number of days per month they attend clinical.

Ideal Target and Rationale: Students attend two clinical experience days during the first year of the program with no monthly absences.

What steps were taken to analyze the data?: Monthly verification of clinical documents
Key/Responsible Personnel (WHO analyzed the data?): Clinical Instructor at each clinical facility
Clinical Coordinator at PCC
Program Director

Findings for Monthly Clinical Documentation
No Findings Added

Objective 1.4
Limits required clinical assignments for students to not more than 10 hours per day and the total didactic and clinical involvement to not more than 40 hours per week.

Measure: Documentation of required clinical hours

Description of Measure (WHAT data were used to measure the outcome?): Student monthly clinical documents. If a second year student goes over the clinical hours of more than 40 hours per week and more than 10 hrs. per day, the student must sign a form indicating that they are doing so on a voluntary basis.

Acceptable Target and Rationale: During the first year all student maintain less than 40 hrs. per week between clinical and didactic. Second year students should have no more than 40 hrs. per week for clinical and didactic classes.

Ideal Target and Rationale: During the first year all student maintain less than 40 hrs. per week between clinical and didactic. Second year students should have no more than 40 hrs. per week for clinical and didactic classes.

What steps were taken to analyze the data?: Monthly evaluation of clinical documents and student records.

Key/Responsible Personnel (WHO analyzed the data?): Clinical Coordinator
Program Director

Findings for Documentation of required clinical hours
No Findings Added

Objective 1.7
Assures that students are made aware of the JRCERT Standards for an Accredited Educational Program in Radiography and the avenue to pursue allegations of non-compliance with the STANDARDS

Measure: Student Awareness

Description of Measure (WHAT data were used to measure the outcome?): Forms given to students and are collected.

Acceptable Target and Rationale: All students sign the information sheet for the brochure regarding acknowledgement of receiving the JRCERT brochure.

Ideal Target and Rationale: All students sign the information sheet for the brochure regarding acknowledgement of receiving the JRCERT brochure.

What steps were taken to analyze the data?: Collect the JRCERT forms and input the data on a spread sheet.

Key/Responsible Personnel (WHO analyzed the data?): Program Director

Supporting Attachments:

Jrcert.org (Web Link)
JRCERT Standards for an Accredited Educational Program in Radiography. Effective January 1, 2011.
http://www.jrcert.org/acc_standards.html

Findings for Student Awareness
No Findings Added

Standard Four: Health and Safety
The program’s policies and procedures promote the health, safety, and optimal use of radiation for students, patients, and the general public.

In support of Standard Four, the program:

Objective 4.3
Assures that students

Measure: Health and Safety
Program Review
Radiologic Technology Group

employ proper radiation safety practices.

**Description of Measure (WHAT data were used to measure the outcome?):** Radiation Protection course, student clinical evaluation forms, daily radiographic procedure logs for each student.

**Acceptable Target and Rationale:** The majority of RADTC students should adhere to the radiation protection competency form when completing the daily procedure logs and film evaluations. Student must complete and successfully demonstrate radiation protection policies in order to pass the competency.

**Ideal Target and Rationale:** All RADTC students should adhere to the radiation protection policies set forth by the program.

**What steps were taken to analyze the data?:** Daily procedure logs, clinical evaluations for the midterm and final evaluations as well as film critique.

**Key/Responsible Personnel (WHO analyzed the data?):** Program Director, Program Faculty and Clinical Instructors.

**Findings for Health and Safety**

*No Findings Added*

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**Overall Recommendations for Improvement**

The RADTC program recommends the following:

- Better classroom space
- Increase in clinical facilities so we can increase the number of students to enter the program.
- More current technology
- Skills laboratory
- Computer laboratory

These recommendations would ensure a positive learning environment that promotes student success and technical competency.

It is also recommended that the budget be increased to reflect the current needs of the program to help with supplies, materials, equipment and faculty development without using or depending on outside resources.

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**Program Responsiveness**

The RADTC program will continue to meet the needs of a diverse population of students by recruitment of various ethnicity's, workforce development and the Boots to Books Program on campus, and partnering with the PUSD as part of opening up the skills lab for those interested in the radiology field. The RADTC program helps fulfill the need industry as part of the developing workforce in medical imaging. The dedication of our faculty, both full time, part-time, adjunct faculty, clinical facility and Health Science Division Dean's commitment demonstrates strong ethics to help meet