

Trinity Health Radiologic Technology Program/Advisory Committee Meeting Minutes
June 29, 2021 2:00 pm

In Attendance in person or WebEx	Michelle Bratton, (PD), Renae Stratton (CI), Jim Coffin (Radiology Dept Manager), Andrea Roedocker (Coor. Strategic Development); Shelley Semrau (Dir. Organizational Development); Cindy Milkey (Community member); Arieka Connant Longakit (student rep) By phone: Karen Zimmerman (CNO/VP Pt Care), Dawn Rubbelke (Trinity employee); Becky Hoes (Community member); Absent: Jim Miller (Program Medical Director); Sarah Karhoff (co-Lead Tech); Jess Anderson (co-Lead Tech)
Old business	None. 1/15/21 minutes were already approved and were published on the website.
I. JRCERT Update	A. JRCERT: a web site update due to new JRCERT requirements that certain items be available on the home page or by a link; the new 2021 Standards so far have not required significant revision. An interim report will be due in 2023 (halfway through 8 year accreditation)
II. Master Education Plan	<p>A. Didactic Curriculum: PD stated that the patient care text was changed, and all courses will be updated. We utilized the McQuillen Radiographic Image Analysis workbook for general senior review for the 2021 class and they found it very helpful. We will be using the McQuillen text and workbook going forward. The core coursework will be the same for the new students but for a few of the units jumping into different semester course due to the switch from 6 to 5 semesters.</p> <p>B. New juniors: We will be beginning the 2023 class with 7 students this year on August 2. They will be in class until the week of August 30, when they will begin rotations clinically as well. Jim suggested that the department be informed when the new students are going to be starting in clinical rotations.</p> <p>ACTION: PD or CI to bring up the students clinical start date at a lead tech or diagnostic tech meeting.</p> <p>C. 2022 Class update: the 4 junior students are spending most of their 4th semester this summer in clinical rotations. They are doing very well and seem to be on the way to completing their required competencies ahead of schedule. There have been no major COVID restrictions on them since the last meeting. Good job class! Jim inquired whether these students would have an option to spend time in elective areas if they complete their competencies early. It was noted that the students have elective weeks in the 5th and 6th semester that always allow them to spend time in areas they choose.</p> <p>D. Policy Manual – The revised 2021 Policy Manual was disseminated to members just prior to the meeting. Revision highlights: 1) reducing the number of forms in the clinical plan portion of the manual as they are available on Trajecsys 2) addition of a GPA calculation for the semester and final grades; 3) changing PLD days to PTO hours; 4) as the Program has been approved to accept GI bill students under Title 38 of the US Code, we added a section on that; 5) updating the Communicable disease policy for COVID restrictions Members were asked to review the 2021 Manual prior to the next meeting in January and be prepared to comment on or approve it then. Any minor edits necessary will be implemented in the next printing of the PM. Andrea had a copy of her edits- one being updating some of the statistical information on the hospital and checking some of the hospital policies in our manual that essentially mirror the hospital as there have been revisions to several areas.</p>

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	<p>ACTION: PD will go over the hospital policies and check our manual for consistency with the same and call HR to update the stats on the first few pages of the PM</p> <p>E. ARRT: update to the ARRT radiography exam specs; major change was removing gonadal shielding from radiation protection section; understanding that it will still be taught but that the rationale for it is changing. Dawn noted that the issue of shielding has been discussed with Dr. Lewis but that the hospital policy has not changed to date. Members of the committee were interesting the reasoning of this trend. PD noted statements from the NCRP, AAPM, ARRT and ASRT which all agreed that gonadal/fetal shielding during abd/pelvic exams is unnecessary and, in some cases, may be detrimental (digital IRs and AEC), and that there is no evidence that medical radiation damages gonadal cells at the low doses that current equipment uses. From an education point of view, students will continue to be taught the same concepts, but in clinical practice, there is a trend towards this that will be noted since students may take a position elsewhere that has implemented this change. The AAPM issued FAQs that goes through the questions that may arise if a no shielding policy is in place to help explain to patients why the change is occurring. The ASRT is currently reviewing its radiography curriculum, PD expect updates to the radiation protection section as well.</p>
<p>III. Resource /Staff Updates</p>	<p>A. Trajecsys: Renae is now tracking PTO hour requests on Trajecsys</p> <p>B. Developmental Tests and Registry Review: The class of 2021 utilized the RadTech BootCamp website during review and on their and most felt it was a good resource for registry review, some used it more than others on their own. I want to utilize the exam prep function of this resource more next year. We continue to use the traditional St Catherine’s tests the Lange Review book, as well as many review worksheets. Students thought we had plenty of resources to assist in registry review.</p> <p>C. ASRT Education Institute: Due to COVID restrictions, PD has not yet been able to attend this event. It has been rescheduled several times and currently the in person is set for April 6-8, 2022. It consists of 5 online modules on education and curriculum management, and then an all-expense paid trip to attend a 2 day seminar in Albuquerque.</p>
<p>IV. Summary of 2020 Student/Employer 6 months post grad surveys and 2021 PED and Program evaluations</p>	<p>A. 6 month Post Grad surveys for 2020 class (5 graduates- 1 went to Rad Therapy school, 4 employed after grad): PD uses spreadsheets to track responses and compare to them to classes back to 2017. We used to use these responses in our SLOs, but new SLOs utilize more readily available resources while students are still in the program. Regardless of whether the results are used in SLOs, these responses are important for program development, improvement and comparison of responses of the previous classes assists with that.</p> <p style="padding-left: 40px;">Employer survey responses: 3 of 4 surveys were returned from employers. All employers gave a “4” (very satisfied) on overall satisfaction with new graduate employees. The employers also scored 4’s (very satisfied) and 3’s (satisfied) points on professionalism, attitude and relationships. The 2020 results were compared to the classes of 2017-2019 and it is noted that employer’s consistently score most grads at 4’s, with occasional 3’s. In the 4 classes that were compared, majority of 3’s are in relationships and confidence items- repeats, speed, efficiency.</p> <p style="padding-left: 40px;">2020 Graduate Survey responses: 5 of 5 surveys were returned from 2020 graduates.</p>

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- **The first survey** is about information about the registry and employment, which we already covered. PD noted that all grads remained members of the ASRT and 4 with the NDSRT at the time of the survey.
- **The second survey** now has each grad score their educational experience 6 months later with ranges between 1-10 (very unsatisfied to extremely satisfied). All ranked it overall as 9-10 (extremely satisfied); on registry preparation, 3 were extremely satisfied, 2 were very satisfied; all felt totally prepared for the career.
- When rating the technologists' professionalism in 2019, 2 students scored it lower than "good" or "excellent". In 2020, the scores were extremely professional (1 grad), mostly professional (3 grads) and usually professional (1), with 2 comments that 1 or 2 techs did not work well with them and/or showed disinterest in teaching them. Notably, 2 of the 2020 students (now 3 with another returning to Trinity) are techs teaching students.
This topic was discussed last year and again it is noted that overall most technologists do an amazing job of teaching and mentoring the students, some are better than others.
- We had discussed last year as well how the 2019 graduates had 2 low scores on level of tech supervision; the class of 2020 scored this as excellent (2) and great (3). This is an improvement. We have continued to stress the supervision policies and it has been added to the annual modules for the technologists.
- Suggestions from the 2020 class were to emphasize techniques more, more c-arm experience, work on the sick policy to make it more strict. As for techniques, this is something that is discussed during each positioning course, but students get confused because techs seem to have their own "style" when it comes to modifying techniques. The students do include average techniques in their pocket clinical positioning books that CI has them make, and there are updated technique charts available to them.

ACTION: none, the committee discussed this issue again and after some staffing changes, this issue of professionalism has been slowly improving. We will continue to stress supervision policies to both techs and students to ensure compliance. PD will also incorporate and emphasize more technique discussion in positioning courses.

- **The third survey** has the graduates score themselves on 7 questions related to critical thinking and job skills. We look for the highest score ("always") and the second highest ("usually") as how the old SLO benchmark was scored. The 2020 class response were mixed between "always" and "usually," with some comments that "usually" was not the best description but always was too strong. Comparing this class to the 2017-2019 classes shows this is a consistent trend.

ACTION: PD suggested that maybe a percentage range be assigned to the answer choices, so the grads have better options, or allow them to write in the percentage themselves. Committee agreed. PD will revise this section and review other sections to help clarify the answer choices.

- B. Program Evaluation by 2021 Graduates:** Students are asked to fill out a detailed Program Evaluation just before they graduate. A summary of the answers going back to 2017 was created to track each class and compare responses.

Clinical rotations- 2021 – All categories were marked adequate except:

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- Surgical experience: one student commented that there was not enough surgery exposure due the timing of her rotations. Another student found Southridge helpful for c-arm use.
- Trauma: 3 students wanted more trauma experience, which is just a matter of being at the right place and time and stepping up to participate.
- Physician assists: One student wanted more sterile tray/physician assists
- Advanced Modalities: 2 felt that one week in advanced modality rotations was enough for the most part.

Note that the lack of GI barium exam overheads was mentioned, which is a trend based on which radiologists are doing fluoro.

Summary: Overall, these comments are similar to the comments going back to 2017. C-arm experience has been addressed in several ways; Renae does a c-arm in-service with the students early on to help familiarize them, and the South Ridge rotation, which is where pain injections are done routinely, has been made more prominent since it is a less high stress c-arm experience that surgery. As for physician assists, the C-room fluoro schedule is very busy, the student had missed a lot of assists due to the timing of COVID and had the opportunity to make up those exams.

UPDATE: As to the comment on the advanced modality rotations, it should have been noted in the meeting that this schedule has been modified to only one week in Rad Therapy and NM, and rather than 2 MRI and CT rotations, the final rotation is a combined CT/MR rotation. This allows for 2 elective weeks for the 5 and 6th semester and is keeping with this class and prior class comments about advanced imaging rotations. No action necessary

Didactic coursework: All categories were marked adequate except for image evaluation, where 2 students felt that was inadequate, which is a trend from previous years as well. We have already addressed this issue by incorporating more image analysis, individual time with students and the CI evaluating images that the student has turned in for grading, and by utilizing the McQuillen workbook. The 2020 class liked this workbook, so as noted earlier, we are incorporating this workbook and text for both the 2022 and 2023 classes and hope that will fill this gap. Jim mentioned that we may be able to procure an unused reading station monitor to use for reviewing images with the students. It was also noted that we are still working on a process for the students to sit with a radiologist while reading. The radiologists are very busy, but we have implemented this during the AIC rotation if there is an opportunity.

Other noted comments: more anatomy and med terms review periodically, more practice transporting patients and dealing with the patient equipment earlier in program. PD mentioned that grab bag/review of old material is something to incorporate during class time, and that CI already does a lot of positioning review during clinical hours.

Summary: No big issues stand out that have not already been addressed in some fashion. We will continue to track these results and compare them to discuss areas of improvement.

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	<p>ACTION: PD will prepare some anatomy review activities to use in class and also incorporated some clinical time in the first few weeks for the new students to spend time with wheelchairs/stretchers in the department for more experience before they are transporting patients.</p> <p>C. Program Effectiveness Data (PED) 2021 class: 3 of the 4 graduates are now employed at Trinity, one took a position in Missouri. All 4 passed the ARRT registry exam on the first try with an average score of 89, national average is not available yet.; the 2020 class had an avg of 90, national average in 2020 was 83. PD noted that our program historically scores above the national average, which ranges from 85-83.</p>
<p>V. Administrative Schedule/Open discussion</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Tuition reimbursement incentive-Trinity approved a tuition reimbursement incentive as well as a sign on bonus agreement for radiography students who fill a position (if available) after graduations in the department. Thanks to Jim and Karen for their hard work on this. We should be able to use this information as an incentive to have more students apply to or choose our program over others. <input type="checkbox"/> PD informed the committee that NDSRT conference was online this year, we had the students come to the classroom on Saturday to attend 2 live presentations and the business meeting together. Student papers were videotaped and are available on the NDSRT website. (AR 1st, RB 2nd, MK, 3rd) The meeting will likely be in person next spring. Fundraising went well last year, PD will ask each class in the fall about this. <input type="checkbox"/> Cindy mentioned that the person who reads our students Michelle Keller Scholarship papers and covers the cost of the ASRT student memberships each year may be retiring Action: PD will reach out and see if he is still willing to read the papers and how to continue the ASRT foundation funding for the student membership fees. <input type="checkbox"/> It was noted that the limit for the program is 12 students, so the 2024 class will only have 5 unless that limit is increased. PD will look into that process with the JRCERT just to have the information available and see if reassessment of our clinical areas and 1:1 tech to student ratio has been increased or will be increased with the new hospital when completed in a few years. <input type="checkbox"/> The next Committee meeting will be in Jan 2021, where we will discuss results of the SLOs in the 2021-2022 (seniors 5th semester/Juniors 1st semester) Assessment Plan. Update: Jan 12, from 2:30-4 in Skywalk #1 is the next meeting date
<p>VI. Student Report</p>	<p>Ari had nothing to report for the senior students.</p>