

**Trinity Health Radiologic Technology Program/Advisory Committee Meeting Minutes
June 26, 2023 3 pm/Lewis and Clark Room**

In Attendance	Michelle Bratton (PD), Renae Stratton (Clin Preceptor), Jim Coffin (Radiology Dept Manager), Andrea Roedocker (Coor. Strategic Development); Abby Richardson (student rep); Axel Aceves (Clin Preceptor), Megan Ryals (Clin Preceptor), Cindy Milkey (Community member); Becky Hoes (Community member); Lonna Browne (Info Sys Coor); Janel Feehan (PACS Coor) By phone: Dawn Rubbelke (Rad Admin Rep) Absent: Jim Miller (Program Medical Director); Karen Zimmerman (CNO/VP Pt Care), Jess Anderson (Lead Tech)
Old business	None. 1/30/23 minutes were already approved and have been published on the website.
New business	Shelley Semrau is retiring so will no longer be on the committee. Lonna and Janel, who have both been part of the radiology department for MANY years were invited to join the committee and are present today. Welcome!
I. JRCERT Update	<p>A. JRCERT accreditation status: Program was granted an award of 8 years of accreditation in September of 2020. The program’s interim report was discussed at the May JRCERT meeting and accreditation was granted for the full 8 years. The next site visit will be first quarter of 2027.</p> <p>B. Updated main hospital and ortho site with JRCERT. Will monitor clinical sites and staffing to see if it is feasible to add a student per class in future.</p>
II. Program/ Master Plan Updates	<p>A. Policy Manual – Minor revisions will be done this year. Will limit printing of manual to program officials to keep in classroom and office and ensure latest version is sent to students by pdf and on Trajecsys as well.</p> <p>B. The Master Education Plan is updated annually mostly electronically so will be easier to find topics and less paper. A physical binder exists, but updates to it are simply noted as to where to find the material on the computer when possible.</p> <p>C. Didactic Curriculum: MB and RS adding to several courses – making Course 305- Ethics into 2 units- Unit I will be chapters 4 &5 from Pt Care Text, and Unit II from Ch 6 of Pt Care text and adding Merrill’s chapters on pediatrics and geriatrics. This will also address concerns in SLO 1.1 on stressing professionalism with the students and make the course more in depth overall. RS is adding material to the Patient care chapters on mobile/surgical work from Merrill’s chapters on the same as this is an area that students usually comment they need more time on.</p> <p>D. 2024 Class update: the 6 students are spending most of their 3rd semester this summer in clinical rotations. They are doing well.</p> <p>E. New juniors – class of 2025: The 2025 class of 6 students will begin August 21. They will be in class 5 days a week until 9/18 and then will begin clinical rotations 3 days a week.</p>
III. Resource /Staff Updates	<p>A. Trajecsys: No new updates.</p> <p>B. Developmental Tests and Registry Review: The class of 2023 utilized the traditional St Catherine’s tests, the Lange Review book, the review worksheets and mock exams. Each student had access to RadTech BootCamp but only about half used it routinely, visual learners seemed to like it. A Mosby registry review book that includes outlines of the material and lots of questions was also suggested to this class, the 2024 class will be using it more as they purchased their own copies. PD will continue to use all the same review materials but will start doing more physics review throughout the program. RadTechBootCamp access begins in last 6 months to use for review. St Cath tests are still useful but are becoming dated. MB will change the juniors schedule a bit the final 2 weeks before graduation so the seniors have some time in class every day.</p> <p>C. Website updates: Pete from marketing took some new photos for the program website that will be updated once the policy manual is complete.</p>

<p>Assessment Plan/SLOs</p> <p>DISCUSSION OF RESULTS of 2022-23 – areas of updated data</p>	<p>At the last meeting there was discussion of over half of the SLOs for 2022-2023. Data has been compiled for the remaining SLOs for discussion of juniors (class of 2024) in certain SLOs due to lack of enough data in 1st semester. The simple solution for next cycle is just to adjust the timing on collecting data on certain junior tools to the 2nd semester. This will also give the committee a chance to discuss progress at each meeting.</p> <p style="text-align: center;">GOAL 1: To graduate students who possesses effective verbal and written communication skills.</p> <p><u>Student Learning Outcome 1.1: Students will demonstrate effective patient communication skills.</u> Completion of the 2nd semester provided more performance evaluations and 6 random evals were scored for each student. The juniors easily met the benchmark with a class average of 99.3%.</p> <p>DISCUSSION: Changing the timing for any Performance Evals to the 2nd semester should work in the future when this is used as a SLO tool. It was mentioned at the last meeting that a potential tool for this SLO could be created with patient simulation. RS and MB discussed having the students create “scripts” for explaining procedures, especially fluoroscopy and exams that are not done very often, and then assigning time to practice these skills in a simulation. The committee members felt this would be a great way to address student comments that they are uncomfortable explaining some exams to patients due to lack of frequency. This may also be a way to measure patient communication skills in the future for this SLO.</p> <p>ACTION: RS to get this assignment to the students this semester as they are in clinical areas for July and August and are ready to begin assisting with sterile procedures and doing more digestive fluoro. She will bring the results and comments to next meeting to see how effective the assignment is.</p> <p><u>SLO 1.2: Students will demonstrate effective written and verbal communication skills.</u></p> <p>Completion of the 2nd semester added 4 junior graded grab bags for a total of 6 for 2 random procedures. It was noted that this is not an increase in the number of grab bags completed, just the addition of grading more of them with the rubric. Juniors met this goal with a class average of 83% but not individually (96.9, 90.7, 82, 81.25, 75, 72) when averaging all 6; however when looking just at the 2nd semester data averages, the students met the benchmark individually as well.</p> <p>DISCUSSION: Changing the timing of this tool to the 2nd semester will make the data more useful. RS will continue to do at least 2 <u>graded</u> grab bags each semester to build students’ verbal skills. In the past, they were not always graded with the rubric. There was general discussion about the different percentages in the Plan due to the different point scales used in tools. Program officials are working on making all tools a 5 point scale for consistent benchmark percentages. As the scales change, adjustments in the benchmark percentages may be necessary.</p> <p>ACTION: Change the collection of data for juniors to 2nd semester here and include at least 2 (4 exams) graded grab bags for the data to assist with student verbalization and critical thinking on positioning skills.</p> <p style="text-align: center;">GOAL 2: To graduate students who can apply critical thinking skills to professional practice.</p> <p><u>SLO 2.1 Students will exhibit necessary critical thinking skills in the positioning and performance of patient exams.</u></p>
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Critical thinking is assessed through tool A-clinical performance evaluations and tool B-grab bags on positioning graded by RS. We gathered data from the 2nd semester to give us enough data for tool A and to reevaluate the junior class for tool B.

DISCUSSION: Tool A: Completion of the 2nd semester provided more performance evaluations and 6 random evals were scored for each student. The juniors easily met the benchmark with a class average of **96.5% 31 evals 100%, 5 evals 75%** individually. Again, changing when we collect data from performance evals to the 2nd semester will give us enough data to use the tool appropriately.

Tool B: 1st semester there were 2 graded grab bags per student and they met the 75% benchmark as a class but not individually (87.5 x 3, 62.5 x 3). RS included 4 graded grab bags for the junior class in the 2nd semester. Whether all or just 2nd semester evals were averaged, the **class met the benchmark overall**. Individually 3 students did not meet it individually (all 6) and 2 did not meet it for the 2nd semester individually.

ACTION: Committee members again agreed that increasing the number of **graded** grab bags and also gathering data for both of these tools in the 2nd semester instead of the 1st would be appropriate so the juniors are more prepared to verbalize positioning skills and think through difficult procedures.

GOAL 3: To graduate students who are clinically competent entry level radiographers.

SLO 3.1: Students will produce images exhibiting accurate positioning and acceptable radiographic quality.

This is assessed on Trajecsys through tool A -student Performance Evaluations, tool B - RS Senior Performance Rechecks. Completion of the 2nd semester provided more performance evaluations and 6 random evals were scored for each student. The juniors easily met the benchmark with a class average of **99.3% (35 – 100%, 1-75%)**.

The senior performance recheck evals also were reassessed as there were only 3-5 per student instead of 6. The seniors met the benchmark and always do **98-100%**. RS noted that beginning the rechecks in the 3rd semester will address this issue.

DISCUSSION: Committee members discussed whether the performance evals from techs really assessed the student ability to evaluate image quality or not. Axel noted that he liked to take the time to go over the images with students after an exam (if there is time but that many techs do not. He suggested coming up with a form for different exams for techs to use to go over the images with students. RS noted that she wanted to begin discussing image quality with students individually on completed comp exams, where she could have them evaluate quality, positioning and identify anatomy as part of the grading process on her end.

ACTION: Again, changing when we collect data from junior performance evals to the 2nd semester will give us enough data to use the tool appropriately. The only change suggested for the senior tool is to begin rechecks in the 3rd semester so we have 6 available for seniors by the end of the 4th semester. As all positioning courses are complete in the 3rd semester and many were completed in the 1st semester, clinical staff can begin rechecking Chest, UE, LE and spines in the 3rd semester.

	<p>RS will work on including more image analysis evaluation individually with students, as it will be easier implementation than asking techs to try to complete another form during a student competency eval.</p> <p><u>SLO 3.2: To graduate students with effective radiation protection practices for self, patients and healthcare team.</u></p> <p>This is assessed on Trajecsys through Tool A -Performance Evaluation criteria entered by supervising diagnostic techs and Tool B – technologist evaluations on students during diagnostic and adv modality rotations (which was already discussed) Completion of the 2nd semester provided more performance evaluations and 6 random evals were scored for each student for Tool A. The juniors easily met the benchmark with a class average of 97.2% (32-100%, 4- 75%).</p> <p>DISCUSSION: The new gonadal shielding policy was discussed again now that it has been implemented and how that might affect this tool. The category on the performance evals scale includes proper collimation, protecting oneself, other staff as well as patients, so it should not be affected by the policy. No changes are needed for this tool. Committee members agreed that this tool works well on the performance and tech evals because collimation and repeats are the main issue, not gonadal shielding. More discussion on how the policy is being implemented by techs and what information to disseminate to students was discussed again. Dawn read the policy for those who had not seen it yet. Overall, the department needs to address how to inform patients about it. Cindy suggested signage on why gonadal shielding is not considered unnecessary. RS mentioned that the ASRT has good signage and information on how to educate patients. Janel mentioned that the issue might be a good one for the lead tech meeting so there is consistency.</p> <p>ACTION: The data will be changed to the 2nd semester for these tools to ensure there is enough per student. Once the lead techs have determined the best way to educate patients on the gonadal shielding policy program officials will incorporate that into student education. Students will continue to be responsible for the potential damage caused by ionizing radiation (per the ASRT curriculum and ARRT exam content, this is still necessary) but will also learn the reasons why it is now in diagnostic exams it is considered unnecessary.</p>
<p>IV. 2023 PED updates/ 2023 Grad Program evaluations & Student/Employer 6 months post grad surveys for class of 2021</p>	<p>A. Program Effectiveness Data (PED) 2023 class: All 2023 grads passed the ARRT registry exam on the first try with an average class score of 87.5, national average in 2022 was 82.4 (2023 info not available yet). 6 of 6 graduates are employed at Trinity currently. One will be going to Rad Therapy at Mayo in August. 2 are training in mammography. 3 are in diagnostic.</p> <p>B. Program Evaluation by 2023 Graduates: Students are asked to fill out a detailed Program Evaluation just before they graduate. A summary of the answers going back to 2017 tracks each class and compares responses.</p> <p>Clinical rotations- 2023 – All categories were marked adequate. There were comments that 1) more OR and o-arm time would be useful, 2) trauma experience (simulation not the same) 3) more skull and urinary procedures. These comments are common- program officials are incorporating more portable hands on clinics and simulations of exams that are not common, like skulls and urinary. RS is working on a “bingo” card with these types of activities on it to encourage students to use slow times to practice procedures that they don’t see often with each other to become more comfortable with them.</p> <p>Didactic coursework 2023: All categories were marked adequate. Only comment was that it would have been nice to do the circulatory unit around the Cath lab rotation. This has been addressed by adding basic artery</p>

worksheets to the Cath lab/IR rotation worksheets that students complete prior to observing in that modality. The circulatory unit is now in the 5th semester to allow for radiation biology to be completed earlier.

Other notable comments were: the designated “student room” at new hospital will be very beneficial; would like a skeleton in the clinical area to refer to when learning positioning; learning resources were great. All rated their satisfaction with their education as a 10 and were happy with it. There is a new resin skeleton that we would like to move to new hospital to the “student room.”

C. 6 month Post Grad surveys for 2022 class (4 graduates-2 employed at Trinity, 2 elsewhere):

Employer survey responses: The surveys were electronically sent out on Google forms again this year and 4 of 4 surveys were returned from employers. Scale is from 4 to 1 with 4 being the highest. 3 of 4 employers gave a “4” on overall satisfaction with new graduate employees (one was a “3”). Breakdown by category was

- Manual skills 4(3), 3 (1)
- Speed/competence 4(2), 3(2)
- Repeat exams 4(3), 3(1)
- Efficiency 4(3), 3(1)
- Initiative/attitude 4(3), 3(1)
- Attitude toward change/confidence 4(3), 3(1)
- Pt relationships 4(3), 3(1)
- Co-worker relationships 4(3), 3(1)
- Judgment 4(2), 3(1), 2(1)
- Prof Appearance 4(4)
- Overall satisfaction 4(3), 3(1)

The 2022 results were compared to the classes of 2017-2021, 1 new grad had mostly “3s” but overall the grads had more 4’s than the previous class. The lowest score of “2” was due to the new tech seeking others to help correct work issues – a confidence issue. The committee discussed how to improve confidence of the students, how to get them to take charge of exams they have “comped” on rather than depend on the techs. RS and MB will continue to emphasize to students that they need to be more responsible for telling techs when they are ready to comp on a procedure and what exams they can actually perform. RS can also talk to the techs and ask them to be more hands off, especially when students have completed all positioning coursework and/or are “comping” on a procedure.

2022 Graduate Survey responses: PD created a Google survey for the surveys this year and it was very easy to use and to review the responses. 4 of 4 surveys were returned.

- **The first part** is information about the registry and employment for 2022 grads. PD noted that 3 grads remained members of the ASRT and 1 with the NDSRT at the time of the survey.
- **The second part** has each grad score their educational experience 6 months later with ranges between 1-10 (very unsatisfied to extremely satisfied). All ranked their experience overall as 9-10 (extremely satisfied); 9-10 on registry preparation. 3 students were 10 and 1 was 9 for “prepared for the career.” These are typical responses.

	<p>When rating the technologists' professionalism 1 grad ranked this as a 10, 2 graduates ranked this as an 8 – very professional and 1 ranked it as a 7 (usually prof) (2021 grads all ranked this as 8). This continues to be an area for improvement and can depend on each student's general attitude and experience. In 2019, 2 students scored it lower than "good" or "excellent". In 2020, the scores were <i>extremely</i> professional (1 grad), <i>very</i> professional (3 grads) and <i>usually</i> professional (1). Upon discussion it was noted that overall most technologists do an amazing job of teaching and mentoring the students, some are better than others. There are a couple techs who just don't feel comfortable teaching.</p> <p>On tech supervision 3 grads said they had excellent supervision (10-1, 9-2) and one great (8) supervision.</p> <p>As for whether students were allowed enough independence when allowed to develop confidence, the 2022 class had 1 gave a 10 (excellent level of independence) and 3 gave 8 & 7 (above average level of independence). A common comment is that techs "take over" procedures and aren't as hands off as students sometimes would like. This is and can be addressed by program officials reminding techs to let the students do as much as possible during comp exams, and by the students communicating with techs when they are attempting a comp, where they should be in charge of the exam with as little interference as possible.</p> <p>Other noteworthy comments were to emphasize setting manual techniques more, do image analysis workbook sooner. Program officials do stress setting techniques and incorporate this in testing but in real practice the system often does the job for you and bad techniques are less likely to cause a repeat. Students are reminded to pay attention to techniques for each exam. Image analysis is stressed in senior semesters with a text and workbook. In addition, the discussion from the SLOs applies here</p> <ul style="list-style-type: none"> • The third part of the survey has the graduates score themselves on 7 questions related to critical thinking and job skills, with the highest score (90-100% "always to almost always") and the second highest (89-65% "mostly"). This class scored always and usually consistently, with one 7 (usually to mostly). This is a consistent trend in thinking outside the box for technique and positioning skills that take more experience and time to develop. The 2022 grads were all extremely satisfied with their career choice. <p>Summary: No big issues stand out that have not already been addressed in some fashion.</p>
V. Administrative Schedule/Open discussion	<ul style="list-style-type: none"> • Michelle Keller papers for class of 2024 are underway and will be submitted to judge in October for a November reveal of the winner of the scholarship. • GI bill updates: One student is currently using the GI Bill. <p>Update: Next meeting will be in January where we will discuss mostly SLO results for the senior class from the 4th semester and reserve most of the junior class analysis for after the 2nd semester due to changes in the timing of the tools discussed today.</p>
VI.Student Report	Abby had no new issues to report.