2016-17 Academic Department Annual Report

Academic Department: Click here to enter text.
Document Prepared By: Click here to enter text.

Annual Report Submission Instructions:

This Annual Report of your Academic Department is intended to serve as a summary of departmental activities over the past year and as an outline of plans for the upcoming year.

Please note that responses are limited to the space provided below for each prompt and do not need to be written in narrative form (you are welcome to use bullet points/lists, as appropriate).

Please submit your Academic Department 2016-17 Annual Report to your Dean via email by May 31ˢᵗ.

For your reference, prior year reports (2011-2015) can be found on the Instructional Support website, http://www.grcc.edu/instructionalsupport/departmentyearendreports.   If you have any questions about the 2015-16 reports entered into WEAVEonline, please contact Sheila Jones, Dean of Instructional Support, sheilajones@grcc.edu or x4289.

Part I: Report on 2016-17 Progress

Part I is intended to provide a "big picture" overview of your department's activities during this past academic year. When completing the sections below, please consider the main points/highlights of each category.

Current Year Goals & Outcomes

This section asks you to provide details about the status of your department's goals and outcomes for this past year. Please limit your response to the space provided in the text boxes below.

> Goals:
> 1. Implement new equipment in room 328, Amrad room. **Met**
> 2. Recording of scenario lab work. New scenarios have been developed. Recording has not yet taken place.
> 3. Introduce adolescent phantom into Rad Tech Lab courses. The phantom curriculum is in place. The actual phantom did not arrive until the end of winter semester.
> 4. Curriculum work regarding RT 212 and RT 213. The program hoped to enlist speakers

for the RT 212 course. After much discussion and deliberation, there was not enough time during lecture to include speakers. Since the labs are divided into two sections this was also not an option. Moving forward, we will start with one speaker and combine the lab sections. This will be listed in the syllabus and schedule at the beginning of the semester. The modality we have chosen is Interventional Medicine. RT 213 had the course description and title (Radiologic Technology Capstone) changed to focus on the capstone of the program. Ethics and law were omitted and incorporated into RT 100, additional time was spent on Resumes and Cover letters and mock interviews were incorporated for catalog year 2017/18.

5. Plan and implement Clinical Instructor Retreat. Clinical Instructor Retreat-We revised competencies, which directly included curriculum revisions based on the changes that came through the registry board, the American Registry of Radiologic Technologist (ARRT). We also completed our annual handbook revision and updates. The outcome of this work aligned semester's competencies to our accrediting body and registry board. We evaluated each semester with the required competencies for that semester, along with addressing the possibilities for achieving those competencies with each clinical instructor.

6. Plan and implement Disaster Drill Simulation.
This project was originally pitched to several departments in October of 2012. Unfortunately, participation was not at a level to warrant pursuing the project. In the spring of 2016 a proposal was written for the "Liz McCormick faculty Innovation Learning Resource Fund". The Rad Tech Department received this grant and immediately started to include as many members as possible. We (Rad Tech, Theater, Nursing, Dental, OTA, Criminal Justice, Police Academy and administrators) met on March 2, 2016. A date was determined and a scenario prepared for the Disaster Drill. Over the summer connections were made with an Ambulance company, MSU and several area hospitals. We were able to borrow stretchers, immobilization devices, sterile packages, and gowns. By late August, most departments had declined to participate for various reasons. We continued to plan along with the Theater department and worked towards our goal for October 7, 2016.
We used four different imaging scenarios. Each scenario had at least one family member involved along with the patient. Theater students acted the part of patient and family members. In addition, the Theater Department provided a make-up artist that provided patients with injury specific make-up. Patients were brought to a Triage area and then to the Radiology rooms.

Students were provided with a patient history, Health Provider orders for imaging, Learning Outcomes, a supply list and questions to help them prepare for the scenario. Spectrum Clinical Instructors were on hand to provide support as needed as well as Julie and myself. Once students completed a projection, they were shown an image to evaluate. Some of these images required repeats. Patients were returned to the Triage area after completion.

Once scenarios were complete, students worked together to determine if minimal expectations were met and answered questions regarding the entire scenario. Lunch was served and then all Theater and Radiology students met with staff for debriefing.

Departmental Professional Development

In this section, please provide details about your department's emphasis for professional development during this year. Please limit your response to the space provided in the text box below.

The MSRT conference is prepared for Radiologic Technology Instructors in Michigan. It offers an Instructor track and a student track. This is a great place for networking with other Instructors across the state. A new virtual anatomy table was demonstrated. We researched the cost of the Anatomage (update technology) and its application for RT 110, RT 112, RT 111, RT 113, RT 210, RT 212, RT 240 and RT 211. This piece of equipment could be used to view the body in all of the various ways used in Radiology. For example: CT slices, MRI, Interventional and especially Radiology. It may also be used to develop Continuing Education credits for Healthcare. We also witnessed a successful elaborate Disaster Drill that incorporated multiple departments. Additionally, the Musculoskeletal Trauma and Suspected Bone Infections and Technique Selection and Adjustment in Digital Radiography were good review presentations.

Departmental Advising Plan & Outcomes

In this section, please describe your department's advising plan and outcomes for this year. Please limit your response to the space provided in the text boxes below.

Our departmental advising includes five two hour advising days during the fall/ winter semester and two during the summer semester. We also meet with students on a scheduled or as needed basis. Each semester, we meet with all students individually for a Behavioral/Advising Evaluation. In addition, students complete an exit interview at their completion of the program.

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Program Accreditation Updates

In this section, please provide details regarding any program accreditation or re-accreditation that occurred this past year, if applicable. Please limit your response to the space provided in the text boxes below.

The program will start the accreditation process in the 2017/18 academic years. The self-study will be completed in December and the site visit will occur in April/May.

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Perkins & Key Performance Indicators

In this section, please discuss Perkins and Key Performance Indicators for programs (total student enrollment, demographic profile, new students, student progress rate (transferred, graduated, enrolled), number of graduates, graduate employment rate, time to completion), if applicable. Please limit your response to the space provided in the text boxes below.

All Perkins Core Indicators have met the Standard requirements. Specifically noting a score of 100% for 1P1 (course completion), 2P1 (Registry first time pass rate) and 4P1 (employment).
See below.

GRCC Perkins Core Indicator Status Update –2016

*-*Program: Radiology Technology – 305 – 51.0911

1P1: If there was no technical skill assessment available, please enter N/A.

CORE INDICATOR (Perkins IV)	Performance Levels		
	State Performance Level Expected 2016-2017	Program	Met Standard?
1P1: % of CTE concentrators who passed technical skill assessments that are aligned with industry-recognized standards, if available and appropriate, during the reporting year (that can be identified -	91.74%	100.00%	YES
2P1: % of CTE concentrators who received an industry-recognized credential, a certificate, or a degree during the reporting year.	31.00%	100.00%	YES
3P1: % of CTE concentrators who remained enrolled in their original postsecondary institution or transferred to another 2- or 4-year postsecondary institution during the reporting year and who were enrolled in postsecondary education in the fall of the previous reporting year.	71.00%	76.92%	YES
4P1: % of CTE concentrators who were placed or retained in employment, or placed in military service or apprenticeship programs in the 2nd quarter following the program year in which they left postsecondary education (i.e., unduplicated placement status for CTE concentrators who graduated by June 30, 2008 would be assessed between October 1, 2008 and December 31, 2008).	87.00%	100%	YES
5P1: % of CTE participants from underrepresented gender groups who participated in a program that leads to employment in nontraditional fields during the reporting year.	26.00%	39.49%	YES
5P2: % of CTE concentrators from underrepresented gender groups who completed a program that leads to employment in nontraditional fields during the reporting year.	21.50%	33.33%	YES

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Learning Outcomes Assessment Data & Findings on Past Year's Projects

In this section, please summarize your department's assessment work for this year, outlining the Program Learning Outcomes (PLOs) or Institutional Learning Outcomes (ILOs) assessed, the assessment measure, the findings, and the improvements planned based on the findings. Please limit your response to the space provided in the text boxes below.

Project: Continuation of departmental assessment of registry scores for 2014
Purpose: To improve the average score for 2017 registry scores in Equipment Operation and Quality Control and Radiographic Imaging.
Brief Description: In the past three years our curriculum was compared to the ASRT curriculum and additional assessments and activities were added to the Imaging course, RT 111. These assessments were continually revised and improved. This year, we will compare the 2014-2016 registry scores regarding Radiographic Imaging.
Course Learning Outcomes being assessed:

1. Program Goal #3 – The Student/Graduate will be clinically competent.
   (Radiographic Imaging and Equipment Operation and QC)
2. Course Outcome #3 – Describe quality assurance and quality control and relate them to Repeat Image Studies, purchasing equipment and monitoring equipment.
   (Radiographic Imaging)
3. Course Outcome #4 – Describe and compare various exposure systems.
   (Equipment Operation and QC)
4. Course Outcome #5 – Describe and compare the special imaging systems and modalities used in Radiology.
   (Equipment Operation and QC)

National Direct Measures:
Registry scores for Radiographic Imaging:
-2014   National average Radiographic Imaging 8.2   Program Average 8.2   Percentile Rank 45
-2015   National average Radiographic Imaging 8.2   Program Average 8.4   Percentile Rank 64
-2016   National average Radiographic Imaging 8.3   Program Average 8.4   Percentile Rank 53
Registry scores for Equipment Operation and QC:
-2014   National average Equipment Operation/QC 8.1 Program Average 7.9   Percentile Rank 45
-2015   National average Equipment Operation/QC 8.0 Program Average 8.5   Percentile Rank 64
-2016   National average Equipment Operation/QC 8.2 Program Average 8.1   Percentile Rank 53
Student scores still remain above our 75% benchmark for the program for the individual registry categories of Radiographic Imaging and Equipment Operation and Quality Control. This also means all Course Learning Outcomes assessed were above the benchmark for the program of 75%.
Our students are compared to 11,740 students nationally for the registry exam. In 2014, our program scores matched the national average for Radiographic Imaging. The scores for 2015 and 2016 improved to above the national average.
For Equipment Operation and Quality Control our scores were below the national average for 2014. They improved to above national average for 2015 and then dipped below again in 2016. Both areas still remain at a higher average than that of 2014. In addition, the program had a 100% pass rate for the last two years.

The annual pass rate for each year is substantially higher than the national average. (See below) Where the National pass rate has declined each year our Program pass rate has improved to 100% both years.

2014   National pass rate 88.9%   Program pass rate 96.2%
2015   National pass rate 88.4   Program pass rate 100%
2016   National pass rate 87.2   Program pass rate 100%

Moving forward: Since all scores registered above the national average, we will continue to monitor for specific areas of program improvement.

Activity: RT 240-Sectional Anatomy – Increase the scores and overall retention of sectional anatomy.

In RT 240, students struggle with the orientation and identification within sectional images. By the end of the course, the:

- Student will be able to demonstrate knowledge of multiplanar reconstructions of human anatomy.
- Student will be able to apply knowledge of multiplanar reconstructions of human anatomy in various imaging situations.

They need to identify pieces of anatomy radiographically in coronal, sagittal, and axial orientations. These orientations are not consistent throughout diagnostic radiography, so the students are presented a considerable amount of difficultly when adapting their visual perception to sectional images.

Throughout each chapter, I went through 1/3 of the material that would be specifically covered on the test and I would incorporate group/class activities to recap the material that was just covered. I would do this in the form of sectional images that had the identification markers removed. I would have the class break up into small groups and they would collectively, within their small groups, identify as much of the unidentified anatomy as they can recall. They then change their boards with another group and that group critiques their work. They can "change" their answers, or they can agree with what the other group has listed. Their boards are given back and the original group can decide to keep their answers they have written, or they can keep the other groups suggested answer. We then as a whole class go over each of the missing identification markers.

The groups found this to be beneficial by working in groups and having the opportunity to see anatomy in another's perspective. It assisted them to see things differently within the images so that they could then establish a pattern on anatomy identification, along with critiquing other's work. Their work was all reaffirmed by reviewing the correct material within the whole class.

The overall final grade percentage increased by four percent. The students have also shown an increase in overall retention. I have incorporated sectional images within other classes to continuously improve retention. When asked about identification within these images, the students are very quick to respond with correct answers. Overall, a huge improvement in retention and scores. **Moving forward:** Due to the testing scores increasing, and the overall retention of material, I will continue to keep this change within RT 240-Sectional Anatomy and continue to think of more methods to incorporate within the class.

Part II: Plan for Upcoming Year

Part II is intended to provide a guide for your department's plans for the upcoming year with regards to the following: Operational Goals and/or Plans, Curriculum Goals and/or Plans, Learning Outcomes Assessment Plans, and Advising Plans. When answering the questions or completing the sections below, please consider the main points/highlights of each category.

A. Operational Goals and/or Plans

What are your departmental goals and plans for 2017-18?

1. Successfully complete the JRCERT accreditation self-study and maintain our eight-year accreditation status.

2. Transition Clinical Coordinator to the Program Director role.

3. Transition new faculty into Clinical Coordinator role.

4. Complete Portfolio for tenure for Program Director.

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What new information from external sources has influenced your planning for next year?

New roles and faculty play a role in our goals. Also, the program's external accreditation. Starting the new Clinical Coordinator as early as possible would help to acclimate them to GRCC technology, curriculum, Radiologic Technology lab equipment and clinical sites prior to the fall semester.

Are your goals targeting any Perkins or Key Performance indicators? If yes, please explain.

Our goals do not target any specific Key Performance indicators, however, they will be a large part of our accreditation report. Perkins has been requested for both faculty to attend the accreditation seminar in November.

What resources do you need to accomplish your departmental goals for the upcoming year?

The program will need assistance with completing the accreditation self-study and compiling information for the required site visit. Starting the new Clinical Coordinator as early as possible would help to acclimate them to GRCC technology, curriculum, Radiologic Technology lab equipment and clinical sites prior to the fall semester.

Do you need support from other departments to accomplish these goals? If yes, please explain.

Yes, we will need help from the Center for Teaching Excellence and IT. These areas will help the new faculty member to get up to speed regarding Blackboard, Syllabi, college access and a computer.

Do you need professional development in order to accomplish these goals? If yes, please explain.

Both faculty will need to attend the Accreditation seminar in Chicago on November 4, 2017.

For each of your departmental goals/plans/projects, please list the name of the lead faculty member(s) involved.

Each of the following goals will be lead by Julie Lackscheide:

1. Successfully complete the JRCERT accreditation self-study and maintain our eight-year accreditation status.

2. Transition Clinical Coordinator to the Program Director role.

3. Transition new faculty into Clinical Coordinator role.

4. Complete Portfolio for tenure for Program Director.

For each of your departmental goals/plans/projects, please provide a brief timeline for completion.

1. Successfully complete the JRCERT accreditation self-study and maintain our eight- year accreditation status. The self-study is due on December 4, 2017 and the site visit will be scheduled for April/May of 2018.

2. Transition Clinical Coordinator to the Program Director role. This will be completed over the course of the 2017/18 school year.

3. Transition new faculty into Clinical Coordinator role. This will be completed over the course of the 2017/18 school year.

4. Complete Portfolio for tenure for Program Director. This will be completed in the fall of 2017.

B. Curriculum Goals and/or Plans

What are your departmental curriculum development goals and plans for 2017-18?

We are on the schedule to complete the following revisions in Curriculog:
1. MRI 200
2. MRI 201
3. MRI 220
4. MRI 222
5. MRI 230
6. MRI 232
7. MRI 240
8. MRI 241
9. MRI 260
10. MRI 261
11. MRI 262
12. MRI 263
13. MRI 295
14. RT 207
15. RT 210
16. RT 215
17. RT 230

Given that it is an accreditation year, along with having a new faculty member, we would like to discuss postponing MRI or hiring additional help for this large task.

Several courses will have new instructors. These instructors will need updating regarding last year's curriculum changes.

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Review of Department's Curriculum Transferability

Please note: this section should be completed by all SAS Departments, Business, and CIS.

Using transferability data provided by Instructional Support, please summarize your perceptions of how courses in your department transfer to our four-year university partners and how this understanding will impact your curriculum goals for the upcoming year.

NA

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What new information from external sources has influenced your curriculum development planning for next year?

NA

Are your curriculum development goals targeting any Perkins or Key Performance Indicators? If yes, please explain.

Our curriculum goals are only related to our Rad Tech review and revision schedule.

What resources do you need to accomplish these curriculum development goals?

To accomplish these curriculum development goals, we need substitute faculty members to allow the director two full days to complete the MRI courses.

Do you need support from other departments to accomplish these curriculum development goals? If yes, please explain.

We will need outside help from the MRI Consortium and/or MCCO for curriculum material.

For each of your departmental curriculum development goals/plans/projects, please list the name of the lead faculty member(s) involved.

For all goals/plans/projects, Julie Lackscheide will be the lead faculty member. Jeff Lloyd will assist on the revision for RT 215 and RT 207. The new faculty member will assist in RT 230 and RT 210.

For each of your departmental curriculum development goals/plans/projects, please provide a brief timeline for completion.

Our plan is to complete all of the MRI course revisions early in the fall semester. The completion of the RT course will be done early in the winter semester.

C. Learning Outcomes Assessment Plan for 2017-18

In this section, please outline your department's plan for learning outcomes assessment work for the upcoming academic year, outlining the Program Learning Outcomes (PLOs) or Institutional Learning Outcomes (ILOs) that will be assessed as well as the assessment instruments/measure that will be used. Please limit your response to the space provided in the text boxes below.

1. We will be using our exit interviews of the current graduating class to determine appropriate assessment projects. We will be completing the exit interviews on June 14, 2017.
2. PLO **Goal 3:** Student/Graduate will be clinically competent.
   Outcome 3: Students/Graduates will select appropriate technical factors.
   The instrument used RT 212 Technique test/chart.

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D. Departmental Advising Plan for 2017-18

In this section, please outline your department's advising plan for the upcoming academic year. Please limit your response to the space provided in the text box below.

> Our departmental advising plan includes four academic advising days in the fall and winter semesters, along with two in the summer. Each advising day consists of two hours of walk-in availability with a Rad Tech faculty member. In addition to this, all faculty have office hours for advising, and consistently participate in school sanctioned open houses. Students can also make appointments as needed.

Part III: 2016-17 Faculty & Staff Accomplishments/Awards

Part III is intended to provide a space to share the accomplishments, awards, and/or accolades achieved by faculty and staff in your department during the course of this past year.

- **The department successfully completed our Mass Casualty Disaster Drill in the fall of 2016.**
- **This year's clinical instructor retreat included a behind the scenes tour of the medical facilities at John Ball Zoo. Participants met with the on-site veterinarian, and were given an insight into their procedures for radiographing animals.**
- **The Rad Tech Advisory Board was given the Outstanding Advisory Award for this academic year.**
- **The MRI Consortium Program was awarded initial accreditation from the JRCERT.**
- **Deborah Nordman was awarded the rank of full professor with the completion of her portfolio.**

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Thank you for completing this report. Please submit to your Dean via email.