

MOORPARK COLLEGE

## Radiologic Technology Advisory Committee Agenda October 23, 2020 Zoom 1:00 am – 3:00 pm

MEMBERS	Representing	Attendance	Contact Information	MEMBERS	Representing	Attendan ce	Contact Information
Robert Darwin	Program Director Radiologic Tech	Present	rdarwin@vcccd.edu	Coleen Warn	C.I. SVH	Present	quickwcm@ah.org
Armine Torabyn	Clinical Coordinator Radiologic Tech	Present	atorabyan@vcccd.edu	Mike Bruce	Director-K-WH	Absent	Michael.1.bruce@kp.org
Carol Higashida	Dean of Health Sciences	Present	chigashida@vcccd.edu	James Mackey	Manager K-WH	Absent	
Christina Lee	Nursing Coordinator	Present	clee@vcccd.edu	Julie Maggio	C.I. K-WH	Present	juliack@roadrunner.com
Crystal Wirth	Office Assistant	Present	cwirth@vcccd.edu		Director-PSJMC		@providence.org
Rosario Marin	Clinical Coordinator Nuclear Medicine	Absent	rosario_marin1@vcccd.edu	Divij Sachdeva	C.I. PSJMC	Present	Divij.sachdeva@providence.org
Robert Pierret	Nuc Med Instructor	Absent	rpierret@vcccd.edu	Michael Flores	Director- K-PC	Present	Michael.l.flores@kp.org
Susie Galdzhyan	Nuc Med Instructor Kaiser-PC	Absent	Susana.x.galdzhyan@kp.org	Karen Ruballo	C.I. K-PC	Present	Karen.m.ruballo@kp.org
Bryan Henderson	Director- Valley Presbyterian Hospital	Present	bryan.henderson@valleypres.org	Rhianne Steins	Regional Dir Imaging Serv.	Absent	Rhianne.R.Steins@kp.org
Humberto Payan	CI VPH	Present	Humberto.payan@valleypres.org		Director- LRMC		
Kim Spencer	Director-SJOMC	Present	Kim.spencer@chw.edu	Omar Zavala	C.I LRMC	Present	omar.zavala@hcahealthcare.com
Roxie Baca	C.I. SJOMC	Present	roxie.baca@chw.edu	Dale Sue M.D.	Rolling Oaks Radiology	Absent	dsue3@verizon.net
Karl Bode	Manager SJOMC	Present	Gisho.tatsutani @providence.org	Melissa Martin, Phd	Therapy Physics	Absent	melissa@therapyphysics
Gisho Tatsutani	Director-HCMC	Present	David.guzman@providence.org	Meaghann Wendel- Smith	Level II student	Present	
Andrew Deihl	C.I. HCMC	Present	@chw.edu	Jessica Michener	Level II student	Present	
Shelly Gadbois	C.I. PVH	Present	Shelly.gadbois@dignityhealth.com	Jerret Gildon	Level I student	Present	
Julius Sokeno	Moorpark College Interim President	Present	jsokeno@vcccd.edu	Sarah Willard	Level I student	Present	
Mary Rees	Moorpark College Interim Vice President	Present	mrees@vcccd.edu	Lydia Basmajian	H.S.Counselor	Absent	lbasmajian@vcccd.edu, 805-553-4604
Katherine Hillard	Director – SVH	Present	Katherine.hillard@ah.org				

	AGENDA ITEM	DISCUSSION
I.	Welcome	Bob Darwin welcomed everyone to the advisory meeting and thanked them for attending. Class representatives from both levels were introduced to the committee. Level II students presented Kaiser Permanente Foundation as well as KPC and KWH with thank you plaques for their generous donations of scholarship money, board review books, and mammography labs.
		On behalf of the program, Bob thanked Kaiser Permanente Foundation as well as KPC and KWH for their generous donations of scholarship money, board review books, and mammography labs. Additionally, Bob thanked Los Robles for allowing the students to come into the radiology department for c-arm labs, IR labs, and flouro labs. Bob also thanked Holy Cross again for the donation of the x-ray portable machine. With this portable, Armine has taken the labs to a whole new level and uses with the life-like settings she creates to encourage critical thinking skills for the students.
II.	Approval of October 25, 2019 Minutes	Gisho Tatsutani approved the minutes; seconded by Davij Sachdeva.
III.	COVID Update	After the college closed down due to COVID and a lot of worrying about the program's class of 2020 completing their hours and competencies, Bob received an email from JRCERT. The email stated that the California Department of Public Health - Radiologic Health Branch would permit senior students who have completed all graduation requirements (i.e. didactic course work and/or clinical competencies regardless of program's required clinical hours) be allowed early release. Additionally, The RHB is allowing flexible scheduling in clinical education, such as evening and weekend rotations that may exceed 25% of total clinical clock hours. Also allowed was granting clinical assignments to more than 10 hours per day, however this would be on a voluntary basis on the part of the student. All of this will be in effect only until the COVID-19 crisis is over and schools and schedules are able to go back to normal.
		With the new allowances in place, Armine and Bob (with the approval of the college) simulated the remaining competencies on campus in lab on May 4 <sup>th</sup> . There was a total of 13 students that simulated their remaining exams on campus. On June 1 <sup>st</sup> , the Class of 2022 began. They had and continue to have lectures online via Zoom and labs on campus. Students are screened as soon as they get to campus, practice social distance, and use PPE. There were no clinical rotations. The level 2 Class of 2021 students were able to attend clinical rotation early on July 8 <sup>th</sup> . Clinical rotations for the fall semester began on August 17 <sup>th</sup> with a modified schedule for level ones. With Kaiser not allowing clinical rotations at that time, the program's other clinical sites took on additional students at their facility until Kaiser reopened up to students. To make up lost

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	hours, students are allowed to rotate evenings and weekends and more than 10 hours a day to make up for lost clinical hours. While the RHB requires 1850 clinical hours, the Moorpark College Radiologic Technology program has a total of 2000 clinical hours embedded within the curriculum. Level one students lost 120 clinical hours, while level two students lost approximately 300 hours. The extra clinical hours that the program requires brings the loss down to 150 total which will need to have been made up by May 2021 by doing extra hours and clinical rotations on weekends
	The program would like to thank each site's clinical directors, managers, and instructors for being amazingly flexible and for the dedication everyone has for the students.
IV. Radiologic Technology Certification Committee (RTCC) Update	As of October 1, 2020, a CRT who graduated from either a JRCERT accredited radiography program or an ARRT recognized educational program in radiography and has passed the ARRT radiography examination need not obtain a fluoroscopy permit. There may be a possible transition process for existing CRTs without a fluoro permit.
	As of July 1, 2020, DPH-10-005 requirements for the use of x-ray in mammography. New Online Licensing Application (NOLA) was supposed to begin; however, it has been delayed due to COVID.
V. Program updates	24 students were accepted to begin the program this year in June (class of 2022). During the application period in February, there were 30 qualified applications submitted bringing the total to 130 students that are currently on the waitlist.
VI. Clinical updates	There continues to be a need of more hospital sites so that an additional number of students can be admitted into the program each year.
	The program continues to advocate more release time for clinical instructors to review exams with students.
	Valley Presbyterian Hospital became a new clinical site in 2019 and the program was able to add Henry Mayo Newhall Hospital as a clinical site as of this fall. The Nuclear Medicine Program is already doing rotations there and Rad Tech will be starting rotations next fall.
VII. Curriculum updates The following are good examples of: <b>Objective 4.2</b> – The program provides a well-structured curriculum	The program's curriculum was revised in 2017 to align with mandated ASRT curriculum. Film/screen and processing was removed while there was more digital technology added as well as new textbooks. ASRT revises curriculum every 5 years, with the next update coming in 2022.
that prepares the students to practice in the professional discipline	3

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VIII. JRCERT update The following are good examples of: <b>Objective 1.5</b> – The program assures that students and faculty are made aware of the JRCERT standards for and accredited educational program in radiography and the avenue to pursue allegations of noncompliance with the standards.	DISCUSSION         More emphasis on communication and critical thinking skills. The program has seen the survey's done by the employers and have heard the clinical sites here at the advisory meetings and understand how important these are to each site.         Next year, the program has its self-study due to JRCERT by April with a site visit happening in November.         There will be new JRCERT standards for 2021.         Bob reviewed the Direct/Indirect Supervision Policy with the committee:         • Direct Supervision: (JRCERT Standards)         • Direct Supervision defined: A qualified radiographer is physically present during the conduct of the procedure and reviews and approves the procedure and/or images.         • Direct Supervision by a qualified radiographer is required until a student achieves competency in any given procedure,         • Direct Supervision by a qualified radiographer is required for all repeat exams		
The following are good examples of: <b>Objective 5.4</b> – The program assures that medical imaging procedures are performed under the appropriate supervision of a qualified radiographer	• Direct Supervision by a qualified radiographer is required until a student achieves <b>competency</b> in any given procedure,		
	<ul> <li>California Code of Regulations, Title 17</li> <li>§ 30417(f) Persons providing direct or indirect oversight:</li> <li>(2) Shall have at least two years of radiologic technology experience.</li> </ul>		
IX. ARRT proposed changes The following are good examples of: <b>Objective 4.2</b> – The program provides a well-structured curriculum that prepares the students to practice in the professional discipline	<ul> <li>ARRT proposed competency the following changes for 2022:</li> <li>Candidates who complete program after 12/31/2023 (class of 2024)</li> <li>Eligible for simulation</li> <li>Maximum of 10 simulations</li> <li>Remove Zygomatic arches</li> <li>Abdomen supine</li> <li>Mobile studies</li> <li>Peds upper or lower extremity</li> </ul>		

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X.	Student Progress	There continues to be a struggle with high attrition. The program has been proactive by having mandatory orientations before students begin the program, math and physics reviews, anatomy reviews, and counseling workshops for students whom are interested in the program. Additionally, there are two alternates that begin the program in the case that anyone withdrawals or fails in the first six weeks.
XI.	Assessment class of 2019	Program Effectiveness Measures
	The following are good examples of:	<b>ARRT Exam Pass Rate</b> – Benchmark met with 95% pass rate for the 2018 graduating class, which is up from last year. The 5 year average is 96 %. The average score was 88.7%. The program continues to meet its benchmark of 85%.
	<b>Objective 6.2-</b> The program analyzes and shares its program effectiveness data to	<b>Fluoroscopy Pass Rate</b> – Benchmark met with a 100% pass rate. The ASRT Fluoroscopy modules that have been incorporated into the fluoroscopy curriculum since 2015 have proven to contribute to student success.
	facilitate ongoing program improvement	<b>Employment Rates</b> – Benchmark met with a job placement rate of 100% (21/21) for the 2018 graduating class. The five year average is 95.7%.
	The following are good examples of: <b>Objective 1.6 -</b> The program publishes program	<b>Graduation Rate</b> – Benchmark met with 78% graduation rate. Counseling workshops held prior to applying, mandatory orientation for incoming students, and math and science review before beginning the program continue to help students be more successful and has assisted in lowering the attrition rate.
	effectiveness data on an annual basis	<b>Employer Satisfaction</b> – Benchmark met with 100% satisfaction. Adding more skill lab scenarios, purchasing a pediatric phantom, revising comp forms, and executing the action plan of implementing additional communication projects and utilizing the portable in lab have helped to contribute to the raise in employers' satisfaction. The five year average is 94%.
		Alumni Satisfaction – Benchmark met with 90% satisfaction. The five year average is 96%.
	The following are good	Student Learning Outcomes
	examples of: Objective 6.4- The program analyzes and shares student learning outcome data to facilitate ongoing program improvement.	<b>Goal 1 – Clinical Competence</b> – Students will demonstrate clinical competence when performing radiological procedures. All benchmarks were met except for 1.32 – <i>Takes appropriate precautions to minimize radiation exposure to patients, self and others</i> which fell below the 85% benchmark at 79%. The program continues to stress radiographic skills and support weak students by offering remediation labs and counseling. 1.3 <i>Action plan</i> :
		<b>Goal 2 – Communication Skills</b> – Students will communicate effectively with patients, health care team and others with sensitivity to age, gender and cultural diversity. All benchmarks were
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	met. The program added more oral presentations, including group oral teaching presentations for Level 2 students.
	<b>Goal 3 – Critical Thinking</b> – The student will demonstrate critical thinking and problem- solving skills needed to provide safe, high quality patient care. All benchmarks were met. The program followed through with last year's action plan as proposed by purchasing an infant phantom and increasing labs including pediatric scenarios.
	<b>Goal 4 – Professional Growth and Development</b> – The student will demonstrate professionalism and will be encouraged to pursue lifelong learning. All benchmarks were met for both levels. The program continues to model high work ethic in the lab and clinical settings and highly encourage students to be involved in the different radiology societies.
	<b>Goal 5 – Prepared for Employment</b> – The student will graduate and be prepared for employment as a competent entry-level Radiological Technologist. All goals were met.
The following are good examples of:	Attrition rate is still a problem due to economy, students not being prepared for the demands of the program, and insufficient math skills. Bob asked the student reps if there was anything more that can be done to help the students be more successful. They suggested that it would be beneficial to have more hands-on positioning in lab during the summer as well as having more time radiographing each body part.
<b>Objective 4.1</b> – The program has a mission statement that defines its purpose	Bob emphasized how important it is to hear back from everyone on the employer surveys. He reminded the committee that it does not just have to be for those employed by the hospital, but is also for the grads that are doing registry at their sites. He also encouraged everyone to please leave comments in the comments portion of the survey.
XII. Assessment Plan Review	Mission Statement – "The mission of the Moorpark College Radiologic Technology Program is to prepare the student to graduate as a qualified, competent, compassionate radiographer and member of the health care team."
The following are good examples of: <b>Objective 6.5-</b> The program periodically	The mission statement was updated two years ago. Bob asked the committee if everyone continues to agree with the program's mission statement. No changes will be made.
reevaluates its assessment process to assure continuous program improvement.	<ul><li>Program Goals – No changes at this time.</li><li>Assessment Plan – Bob asked the committee if there was anything that should be</li></ul>
	assessed that isn't already. The committee advised of no changes this year.
XIII. Nuclear Medicine	A new class of 15 students began in fall of 2020. Cottage Hospital, Henry Mayo Newhall Hospital, and St. Jude's Medical Center were additional sites added for clinical rotation this year.

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		The next class will begin in fall of 2022 with a total of 19 students.
XIV.	Additional Comments	Program Review:
		Some weaknesses the program currently has is the program completion rate being an average of 78% over the last 5 years. To help raise that percentage, the program continues to hold mandatory orientations. Additionally, there has been math and science reviews, counseling workshops, and bringing in alternates to start the program.
		Strengths of the program is that we have an Advisory Committee, clinical sites, clinical instructors, and college administration that are very involved and supportive of the program. The program has a state-of-the-art classroom to maximize the learning experience for the student. Additionally, there is a demand for the profession and Moorpark College's Radiology Program has an excellent reputation in the community.
		Bob thanked Christina Lee for her support and as well as the upper management at Moorpark College.
		Roxie Baca told the student reps to remind all students that take advantage of their time at the clinical site. Practice with each other, keep yourselves involved and please be open to learning during your clinical time.
		This year marks the 30 <sup>th</sup> anniversary of the Moorpark College Radiologic Technology Program. Since 1990, there have been 600 students to graduate.

Summary prepared and distributed by:	D
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