

Radiography Assessment Committee Meeting Minutes
December 14, 2021
9:30am-11:00am

Members: Shawn Dixon, Program Director- Present
Dr. Rebecca Truelove, Dean of Accreditation & Research- Present
Dr. Nicky Michael, Executive Director of Indigenous Studies & Curriculum
Rhonda Barron, Library Director
Michael Elizondo, Bacone College School of Indian Art Director/Faculty Athletics Rep-replied by email
JM Goingsnake, 1st Year Advisor/Recruiter
Dr. Yaniv Cohen, Associate Professor of Biology

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| I. Welcome & Introductions | There are no new introductions at this time. The premise of the meeting was to review the outcomes assessment plans. Due to busy schedules, the plans were provided by email before the meeting. |
| II. Review of Minutes | There were no minutes to approve. The meeting was scheduled to review the outcomes assessment plans. |
| III. Assessment Plan Review | <p>2020-2021: Mission Statement-The statement had previously been reviewed and approved.</p> <p>Goals-Each goal was reviewed previously with no revisions.</p> <p>Assessment Plan-The following were assessed to reflect revisions, updates or note no changes:</p> <ul style="list-style-type: none"> • Measurement tool- A description and specific assignment/testing date was added to most of the measurement tools. This was done to aid the committee members in understanding how the tool correlates to the outcome. • Benchmark- Actual points/scores were added to show how the actual results were derived. • Timeframe-The Program Director reviewed to make sure they matched up with the correct measurement tool. All were correct. • Responsible party- No changes at this time. • Results-The actual points possible were added. All benchmarks were met except for 2.1; Tool 2, 2.2; Tool 1, 3.1; Tool 1, 5.2, 5.4, and 5.5. • 2.1-Tool 2- The discussion included that this cohort is all Native American students and public speaking is a hard task for them. The college is primarily made up of Native American students so this is not limited to the program. The Director is looking into ways to get |

the students more engage with this aspect of completing assignments. This was the first actual speaking presentation so the scores may reflect a different score at the end of the program.

- **2.2-Tool 1-** This tool is a continues the discussion from 2.1; Tool 2. This is the written portion of the assignment. The instructor specified what an outline format should be and the noted that students said they understood. The work does not reflect it. The students all submitted late work but the format was not correct. The instructor may need to the students to complete the first draft in class and give a critique at that time.
- **3.1-Tool 1-**The Program Director noted that the assignment had not been completed because of the hiatus in clinic due to COVID. The students needed to catch up getting competencies completed so the assignment was waived in order to put the focus on testing. A research paper is assigned to each semester of clinic and it will continue. This was an extenuating circumstance due to the pandemic.
- **5.2-**The committee reviewed the pass rate and noted the benchmark was not met. The acknowledgement of how low enrollment can affect scores or how the pandemic may have affected the learning cycle for some students. It is noted that if the ARRT results reflect the edits to include those exams taken after six months of graduation then the benchmark will be met. The Program Director stated that the low numbers can be increased by recruitment, increase in clinic sites, and the hiring of a Clinical Coordinator.
- **5.4-** Graduates have not returned surveys. The Program Director said there has been no communication lately from the graduates. The Program Director is wanting to see about electronic surveys or another avenue to get more of a response from graduates.
- **5.5-** None of the graduates live around this area or work at current clinic sites. It has been difficult to get a response from them. The same suggestion is to see about electronic surveys or how others are getting a good response.

All members of this committee are or have been a part of the college's assessment or their own external accreditation so they have an understanding of what the program is dealing with at this time. Dr. Truelove stated that the assessment plan looked good but some of the language needed to be formalized. We sat down and went through the plan and made the edits as necessary. As for the benchmarks, the majority have been met and those that were not lead to the discussion of why they were not met and suggestions were made to increase those results.

2021-2022:

Mission statement- The mission statement was revised to reflect the change with the college's new mission statement. "Culturally diverse" replaces "Christian environment." The change wants to seek tribal status so the change had to be reflected for the application.

Goals- The goals did not change from the last assessment plan.

Assessment Plan- The following were assessed to reflect revisions, updates or note no changes:

- **Measurement Tool-** The changes were made to:

1.2; Tool 2- The line item # was changed to reflect an updated competency form. The line item still address shielding.

2.1; Tool 1- The tool was changed to reflect a specific verbal command with a variety of exams. The students are graded on respiration commands. The previous plan focused on explaining the exam overall. The line item # did change.

2.1; Tool 2- A new rubric was used. It added the sections of eye contact and elocution.

2.2; Tool 1- A new rubric was used. It added the section of mechanics.

2.2; Tool 2- The tool was changed from a line item on the clinical competency form to line items on the clinical research paper. The previous addressed completion of paperwork and the new plan addresses APA format and following directions, which seems to correlate more with the outcome.

3.1; Tool 1- The tool stayed the same but the title of the research paper changed, along with the line item being assessed.

- **Benchmark-** There are no changes to the benchmarks. Information was updated to current.
- **Timeframe-** The Program Director reviewed timeframes to ensure that any changes were reflected.
- **Responsible party-** No changes at this time.
- **Results-** As of current results, all benchmarks have been met except for **2.1; Tool 1, 2.1; Tool 2, 3.3; Tool 2, 4.1; Tool 2, and 4.2; Tool 2.**
- **2.1; Tool 1-** The students were being evaluated on giving a specific verbal command with a variety of exams. Many forgot that there are respiration commands with their exams. It is noted that students get comfortable with the clinical aspect and tend to forget what the textbook states. There needs to be remediation of this area.
- **2.1; Tool 2-** The category being scored is eye contact and elocution.

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| | <p>The students did not score low scores but the points reflect that they need to work on eye contact and connecting with the audience. The students tend to focus on the instructor or speed through the presentation. The students also need to take the time to learn how to pronounce the terminology correctly. The instructor may have the students present more often to get them comfortable with speaking in the class using terminology.</p> <ul style="list-style-type: none"> • 3.3; Tool 2- This tool shows that the student did not think the professional behavior and attitudes were met. Per the evaluation, not quite sure if the comments are directed at the techs (which should reflect on the site evaluation) or the student is noting their attitude toward clinic. The student does state that some techs give them more of their time than others. Student may need a review of how to answer the questions on the survey. • 4.1; Tool 2- The student does not feel confident with exposure techniques, as far as increasing and decreasing. The student can do imaging critiquing but is not implementing those adjustments changes at clinic. The site visits needs to focus on this area when visiting the student. • 4.2; Tool 2- The student was given lower scores by the clinical instructor for trauma exams. The student can do the exams but needs to be more assertive. The student has shown some progress since the start of the program but tends to questions their choices. The site visit needs to focus on this area when visiting the student. <p>The plan will be reviewed again at a later date. The plan will be updated throughout the cycle and a final assessment will be scheduled with the assesement committee.</p> |
| IV. Additional Comments | The finalized 2020-2021 Outcomes Assessment Plan will be distributed to the clinical sites and added to program's webpage. |
| V. Adjournment | 11:00am- The next meeting will be scheduled for January. The Program Director will send out an email to see what day and time works for everyone. |