

Guide for Program Analysis

Name of Program: St. Petersburg College

Program Number: 0540

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The Guide for Program Analysis (GPA) is designed to facilitate and integrate the accreditation and site visit processes. It is based on the Joint Review Committee on Education in Radiologic Technology (JRCERT) **Standards for an Accredited Educational Program in Radiologic Sciences**, adopted January 1996; revised April 2001; implemented January 1, 2002.

Programs will use the GPA to demonstrate compliance with the **STANDARDS** and to prepare the Self-Study Report. Site visitors will use the GPA to assess the information and materials provided by programs prior to and during the site visit.



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Standard One:
Mission/Goals, Outcomes, and Effectiveness

1.1 Does the program have a mission statement that defines the purpose and scope of the program?

Explanation:

The program’s mission statement should be a broad statement of purpose or intent and may range in length from one sentence to a few paragraphs. The program’s mission statement should be consistent with that of its sponsoring institution.

Rationale:

Having a clear statement of the purpose or intent toward which a program’s efforts are directed assists the program in prioritizing its resources and efforts.

Compliance May Be Demonstrated by:

Providing a copy of the program’s mission statement.

Possible Site Assessment Methods:

- Review of published program materials
- Review of master plan of education
- Interviews with faculty

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

The mission statement for the St. Petersburg College (SPC) Radiography Program is as follows:

“The mission of the St. Petersburg College Radiography Program is to provide the knowledge, skills, and attitudes that will culminate in successful employment of the graduate as a Registered Technologist in Radiography or RT(R).”

The mission statement is located on page 2 of the Clinical Instructor Manual that is located in Section 14 of the Master Plan of Education. It is also located on page 3 of the Radiography Program Student Handbook that is located in Section 8 of the Master Plan of Education. The mission statement is documented on the program’s web site that is located at <http://www.spcollege.edu/Hec/rad/>. It is also posted in room 142 of the SPC Health Education Center (HEC) and at each clinical agency that is associated with our program.

1.2 Does the program have written goals that outline what the program is designed to achieve?

Explanation:

The JRCERT defines goals as tasks or direction statements adopted by a program that include the purpose or intent toward which the program's efforts are directed. A program's goals are a more specific expression of the program's intended student learning outcomes. The goals should be written using behavioral terms and should address the cognitive, affective, and psychomotor domains. They must be measurable, preferably through use of more than one measurement tool.

Rationale:

Goals provide direction to the program in focusing on educational efforts important to achieving its mission and provide a mechanism for determining if the program is accomplishing its mission.

Compliance May Be Demonstrated by:

Providing a copy of publications that contain the program's goals.

Possible Site Assessment Methods:

- Review of published program materials
- Review of assessment plan

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

The goals for the SPC Radiography Program are as follows:

1. The program will meet or exceed industry standards for student retention, national examination pass rates and graduate employment.
2. Students will develop an understanding of the role that proper communication skills play in the healthcare setting.
3. Students will develop the knowledge base required of an entry-level radiographer.
4. Students will develop the psychomotor skills required of an entry-level radiographer.
5. Students will develop the critical thinking and problem-solving skills required of an entry-level radiographer.
6. The program will promote professional growth within the field and encourage life long learning experiences.

The program's goals are located on page 2 of the Clinical Instructor Manual that is located in Section 14 of the Master Plan of Education. They are also located on page 3 of the Radiography Program Student Handbook that is located in Section 8 of the Master Plan of Education. The goals are documented on the program's web site that is located at <http://www.spcollege.edu/Hec/rad/>. They are also posted in room 142 of the SPC Health Education Center (HEC) and at each clinical agency that is associated with our program.

The program's assessment plan is employed to determine how well the mission statement and goals of the program are achieved. It is located within Section 20 of the Master Plan of Education and the assessment results are located within Exhibit 1 of the Self-Study Report.

1.3 Are the mission statement and goals readily available to students, faculty, administrators, and the general public?

Explanation:

The program can make its mission statement and goals available in a variety of ways, including program publications and/or a Web site.

Rationale:

Program accountability is enhanced by making its mission statement and goals available to the program's communities of interest.

Compliance May Be Demonstrated by:

- Describing how the program makes its mission statement and goals available to each of these communities of interest.
- Providing a copy of publications that contain the program's mission statement and goals. If the program makes its mission statement and goals available via a Web site, the program must provide the Web page address in its self-study report.

Possible Site Assessment Methods:

- Review of published program materials
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The following is a description of how the SPC Mission Statement and Goals are made accessible to interested parties:

1. **Potential students** can access the mission statement and goals online at <http://www.spcollege.edu/Hec/rad/>.

2. **Current students** have access online at <http://www.spcollege.edu/Hec/rad/> and by reviewing page 3 of the Radiography Program Student Handbook that is located in Section 8 of the Master Plan of Education. The mission statement and goals are also posted in room 142 of the SPC HEC and at each clinical agency that is associated with our program.
3. The **program faculty members** have access online at <http://www.spcollege.edu/Hec/rad/>, by reviewing page 2 of the Clinical Instructor Manual that is located in Section 14 of the Master Plan of Education, and by reviewing page 3 of the Radiography Program Student Handbook that is located in Section 8 of the Master Plan of Education. The mission statement and goals are also posted in room 142 of the SPC HEC and at each clinical agency that is associated with our program.
4. **College administrators** have access online at <http://www.spcollege.edu/Hec/rad/>. The mission statement and goals are also posted in room 142 of the SPC HEC.
5. The **general public** has access the mission statement and goals online at <http://www.spcollege.edu/Hec/rad/>.

1.4 Has the program developed and implemented an assessment plan that identifies benchmarks for the measurement of outcomes in relation to its mission statement and goals?

- **program completion rate;**
- **clinical performance and clinical competence;**
- **problem solving skills and critical thinking;**
- **communication skills;**
- **professional development and growth;**
- **graduate satisfaction; and**
- **employer satisfaction.**

Explanation:

The program should have an ongoing, systematic process to assess its outcomes. The assessment plan should incorporate the program's goals, supported by specific desired outcomes. An outcome, as defined by the JRCERT, is the expected end result of student learning. A benchmark must be established for each expected outcome to provide a standard against which the actual outcome can be evaluated. The assessment plan should also identify tools to be used and timeframes for data collection and analysis. The person and/or group responsible for the analysis should be identified.

Example:

<i>Goal: Graduates/students will be clinically competent.</i>				
<i>Outcomes</i>	<i>Measurement Tool</i>	<i>Benchmark</i>	<i>Time Frame</i>	<i>Person/ Group Responsible</i>
<i>1. Students will provide appropriate patient care.</i>	<i>1. Patient care written final examination</i>	<i>Average score $\geq 80\%$</i>	<i>1st semester</i>	<i>Didactic instructor</i>
	<i>2. End of term clinical instructor evaluation Questions 3, 4, 5</i>	<i>Average score for each question ≥ 3.5 on 5 point scale</i>	<i>4th and 6th semesters</i>	<i>Clinical instructor</i>
<i>2. Students will position patients to yield diagnostic images.</i>	<i>1. Positioning written final examination</i>	<i>Average score $\geq 80\%$</i>	<i>1st semester</i>	<i>Didactic instructor</i>
	<i>2. Laboratory final examination Section 1/Positioning</i>	<i>Average score ≥ 3.5 on 5 point scale</i>	<i>2nd semester</i>	<i>Laboratory instructor</i>
	<i>3. Terminal competency Section 1/Positioning</i>	<i>Average score ≥ 4.0 on 5 point scale</i>	<i>6th semester</i>	<i>Clinical Coordinator</i>
<i>3. Students/graduates will practice appropriate radiation safety principles for the protection of patients, selves, and others.</i>	<i>1. Turns in film badges to Radiation Safety Officer by due date every month</i>	<i>$\geq 95\%$ of film badges submitted by due date</i>	<i>1st and 4th semesters</i>	<i>Radiation Safety Officer</i>
	<i>2. End of term clinical coordinator evaluation Questions 9, 10</i>	<i>Average collective score for these questions ≥ 4.0 on 5 point scale</i>	<i>1st and 5th semesters</i>	<i>Clinical Coordinator</i>
	<i>3. Employer survey Question 5</i>	<i>Of the surveys returned $\geq 95\%$ indicate yes</i>	<i>Every other year/ 6 months after graduation</i>	<i>Program Director</i>

Rationale:

The use of an assessment plan assures that the program systematically gathers relevant data to evaluate its effectiveness.

Compliance May Be Demonstrated by:

Providing a copy of the program's assessment plan.

Possible Site Assessment Methods:

- Review of assessment tools
- Review of outcome data to support the assessment plan
- Interviews with faculty

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

The program's assessment plan is located within Section 20 of the Master Plan of Education and the assessment results are located within Exhibit 1 of the Self-Study Report.

1.5 Does the program document outcomes consistent with each of the following JRCERT policies?

- over the past five years, credentialing examination pass rate average of not less than 75 percent at first attempt
- over the past five years, job placement rate of not less than 75 percent within six months of graduation

Explanation:

Measurement of the above outcomes must be reflected in the program's assessment process. These outcomes can be used to support other program goals or established as separate, independent goals.

Rationale:

These outcomes are considered significant indicators of a program's effectiveness.

Compliance May Be Demonstrated by:

Providing a copy of the program's assessment plan that incorporates these required outcomes.

Possible Site Assessment Methods:

- Review of completed assessment tools
- Review of data to support reported outcomes

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

Please refer to page 1 of our assessment results that are located within Exhibit 1 of the Self-Study Report. The table found below contains a summary of the program's pass rate on the first attempt of the ARRT and the graduate job placement rate for the past five years.

Class of:	ARRT pass rates	Job placement Rate
2004	100% (20/20)	100% (20/20)
2005	93% (14/15)	100% (15/15)
2006	100% (13/13)	100% (13/13)
2007	88% (15/17)	100% (17/17)
2008	95% (18/19)	95% (18/19)

1.6 Does the program regularly solicit feedback from students, faculty, radiologists/radiation oncologists, graduates, employers, and other communities of interest?

Explanation:

The program can use a variety of tools to obtain information from its communities of interest regarding activities and accomplishments. Communities of interest are defined by the JRCERT as institutions, organizations, groups, and/or individuals interested in educational activities in radiologic sciences.

Rationale:

Obtaining feedback from these individuals/groups allows the program to determine if it is meeting the expectations of its communities of interest and to assess the program's efforts in meeting its own desired outcomes.

Compliance May Be Demonstrated by:

Providing representative samples of appropriate meeting minutes, evaluations (e.g., of courses and faculty), and surveys (e.g., of graduates and employers of graduates).

Possible Site Assessment Methods:

- Review of meeting minutes
- Review of evaluations
- Review of surveys
- Interviews with members of various communities of interest

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The following is a description of how the program solicits feedback from interested parties:

1. **Students** provide feedback by completing evaluations on each course, faculty member, clinical site and clinical instructor near the end of each semester. Refer to Exhibit 2 within the Self-Study Report for a sample of these completed evaluations and summative data.
2. **Program faculty members** provide feedback informally on a weekly or as needed basis and formally via the faculty/clinical instructor meetings that are held at least three times each academic year and through the biannual advisory committee meetings. Refer to Exhibit 3 within the Self-Study Report to review the advisory committee and faculty/clinical instructor meeting minutes.

3. Our **medical advisor**, Dr. Robert Entel, provides informal feedback via the telephone or e-mail and formal feedback via the biannual advisory committee meetings. Refer to Exhibit 3 within the Self-Study Report to review the advisory committee meeting minutes.
4. **Graduates** of the program provide feedback by completing the programmatic graduate survey that is administered approximately six months post graduation. Refer to Section 20 of the Master Plan of Education to review both the surveys themselves and sample survey results.
5. Our **communities of interest** have an opportunity to provide feedback through our biannual advisory committee meetings. Refer to Exhibit 3 within the Self-Study Report to review the minutes to our advisory committee meetings.

1.7 Does the program analyze and use feedback from its communities of interest and outcome data for continuous improvement of its policies, procedures, and educational offerings?

Explanation:

The program should review actual outcomes in relation to expected outcomes and input from its communities of interest, analyze this information, and use the results of the analysis to make appropriate changes. Changes should be monitored to determine if the desired effect(s) has been achieved. A comparative analysis of data from one assessment cycle to another should be performed to identify trends in outcomes.

Rationale:

Analysis of outcome data and other feedback allows the program to identify strengths and areas for improvement to bring about systematic program improvement. This analysis also provides a means of accountability to communities of interest.

Compliance May Be Demonstrated by:

- Describing how the program analyzes input from its communities of interest and outcome data to identify areas for program improvement.
- Describing examples of changes that have resulted from the assessment process and discussing how these changes led to program improvement.
- Providing representative samples of appropriate meeting minutes and/or other appropriate documents.

Possible Site Assessment Methods:

- Review of program assessment plan
- Review of assessment tools
- Review of meeting minutes
- Interviews with faculty

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The program encourages feedback from communities of interest and analyzes data from program assessment in order to ensure that its policies, procedures, and educational offerings are current and provide the means for the program to satisfy its mission and goals.

For example, the program's advisory committee recommended that the program investigate the efficacy of acquiring a c-arm machine in order to help better prepare students for their operating room rotations at their clinical sites. An action plan was developed and implemented and the net result was the purchase of a remanufactured c-arm machine at a cost of approximately \$30,000 in July of 2008. The c-arm machine has since been incorporated into the program's lab classes and a simulation checklist has been developed. This checklist must be completed by each student prior to their first rotation through the operating room.

Following the success of the c-arm machine, the advisory committee then recommended that the program investigate the efficacy of purchasing a portable x-ray machine in order to better prepare our students for performing portable radiographic examinations at their clinical sites. Once again, an action plan was developed and implemented and the net result was the purchase of a remanufactured portable x-ray machine at a cost of approximately \$30,000 in May of 2009.

Exhibit 3 within the Self-Study Report contains sample minutes from these meetings.

1.8 Does the program periodically evaluate its mission statement, goals, and assessment plan and make revisions as necessary to achieve continuous quality improvement?

Explanation:

As part of the assessment cycle, the program should review its mission statement and goals to assure that they are appropriate and useful. The assessment plan should be reviewed to assure that assessment measures are adequate and that the assessment process is effective in measuring student learning outcomes.

Rationale:

Identifying and implementing needed improvement(s) in the mission statement, goals, and/or assessment plan leads to programmatic improvement and renewal.

Compliance May Be Demonstrated by:

- Describing how this review has occurred.
- Providing meeting minutes and/or other relevant documentation.

Possible Site Assessment Methods:

- Review of meeting minutes
- Interviews with faculty

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The program reviews its mission statement, program goals, and assessment plan on at least a yearly basis. This task is accomplished when outcome data is analyzed during advisory committee meetings and clinical instructor/faculty meetings. In fact, just this year the advisory committee recommended a change go one of the program's goals. This change has been successfully implemented. Exhibit 3 within the Self-Study Report contains sample minutes from these meetings.

Summary for Standard One

1. List the major strengths of **Standard One**, in order of importance.

Program officials have worked diligently to ensure that the program is successful at meeting its mission and goals. The program has consistently produced qualified practitioners as evidenced by employer and graduate satisfaction survey results, ARRT test scores, and job placement rates just to name a few.

2. List the major concerns of **Standard One**, in order of importance.

The impact of new proprietary radiography programs in the area combined with the current tough economic conditions has had an overall negative effect on the job market. As a result, there is concern that our current cohort of students may face an unprecedented challenge to find gainful employment as they matriculate into the workforce this December.

3. Provide the program's plan for addressing each concern identified.

The program's advisory committee has recommended that a letter to promote our graduates be sent to potential employers in our service area.

4. Describe any progress already achieved in addressing each concern.

An initial outline of this letter has been drafted and the final version is scheduled to be mailed to potential employers no later than the beginning of November of this year.

5. Describe any constraints in implementing improvements.

Since the cost of this action plan is negligible, there are no foreseeable constraints to its implementation.

Attach additional pages if necessary.

Standard Two:
Program Integrity

2.1 Does the program adhere to high ethical standards in relation to students, faculty, and staff?

Explanation:

Policies and procedures must be made known to students, faculty, and staff and be equitably applied.

Rationale:

High ethical standards help assure the rights of students, faculty, and staff are protected.

Compliance May Be Demonstrated by:

- Describing the procedure for making policies and procedures known.
- Providing copies of policies or procedures that assure students, faculty, and staff are treated equitably.

Possible Site Assessment Methods:

- Review of employee/faculty handbook
- Review of student handbook
- Review of course catalog
- Review of student records
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X	X			

The program adheres to high ethical standards regarding all aspects of the program by ensuring that students, faculty, and staff understand and abide by the policies and procedures of the college, the program, and the profession. A review of the following documents will serve as the means to substantiate the previous statement:

The SPC Faculty Handbook is located at the following web site:
<http://www.spcollege.edu/central/hr/facultymanual.htm>. This handbook contains all of the college’s policies and procedures and is thoroughly reviewed with faculty members when they are hired.

Section 8 of the Master Plan of Education contains a copy of the SPC Radiography Program Student Handbook. During the first semester in the program, each student must sign a form acknowledging that they have received the handbook and that they have read and understand all of the academic and clinical policies and procedures that it contains.

Section 3 of the Master Plan of Education contains a copy of the ARRT Standards of Ethics and it is also located at <http://www.arrt.org/web/ethics/standardethic.pdf>. The ARRT Code of Ethics is formally taught in RTE 1000 Orientation to Radiography.

Exhibit 4 of the Self-Study Report contains a pamphlet that the college employs to advertise the programs that are offered at the Health Education Center and it is entitled, "Health Education for the 21st Century." Information regarding the Radiography Program can be found on pages 38-39 and admission information can be found on page 47.

The SPC web site is located at <http://www.spcollege.edu/> and it contains information regarding every aspect of the college.

The SPC Radiography Program web site is located at <http://www.spcollege.edu/Hec/radiography/index.html> and it contains general program information.

2.2 Does the program assure that faculty recruitment and employment practices are non-discriminatory with respect to any legally protected status such as race, color, religion, gender, age, disability, and national origin?

Explanation:

Equal opportunity for employment should be offered to each applicant. Employment practices should be applied equitably to all faculty.

Rationale:

Recruitment and employment practices that are non-discriminatory assure fairness and integrity.

Compliance May Be Demonstrated by:

- Describing how non-discriminatory employment practices are assured.
- Providing copies of employment policies and procedures that assure non-discriminatory practices.

Possible Site Assessment Methods:

- Review of employee/faculty handbook
- Review of employee/faculty application form
- Review of institutional catalog
- Interviews with faculty

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X	X			

The program carefully follows the faculty recruitment and employment practices established by St. Petersburg College regarding legally protected status such as race, color, religion, gender, age, disability, and national origin. The college’s Equal Access/Equal Opportunity policy reads as follows:

“St. Petersburg College is dedicated to the concept of equal opportunity. The college will not discriminate on the basis of race, color, religion, sex, age, national origin, or marital status, or against any qualified individual with disabilities, in its employment practices or in the admission and treatment of students. Recognizing that sexual harassment constitutes discrimination on the basis of sex and violates this rule, the college will not tolerate such conduct. Should you experience such behavior, please contact Pamela Smith, the director of EA/EO at (727) 341-3261; by mail at P.O. Box 13489, St. Petersburg, FL 33733-3489; or by e-mail at eaao_director@spcollege.edu.”

The college's Equal Access/Equal Opportunity statement can be found throughout most materials that are produced by the college and it is made available to any interested party. Examples of the statements documentation can be found in the following:

The college catalog is located within Section 4 of the Master Plan of Education and page 2 contains the Equal Access/Equal Opportunity statement. The college catalog can also be found online at <http://www.spcollege.edu/webcentral/catalog/>.

The online adjunct teaching application can be found at <http://www.spcollege.edu/central/hr/adjunct.htm> and the Equal Access/Equal Opportunity statement can be found at the very top of the document.

Exhibit 4 of the Self-Study Report contains a pamphlet that the college employs to advertise the programs that are offered at the Health Education Center and it is entitled, "Health Education for the 21st Century." The Equal Access/Equal Opportunity statement can be found inside the front cover.

The college's Equal Access/Equal Opportunity web site is located at: <http://www.spcollege.edu/central/eao/>. It contains a plethora of policies and procedures that pertain to all types of discrimination and harassment.

2.3 Do the program’s published statements accurately reflect the program’s offerings?

Explanation:

The program’s published documents should reflect current information about the program’s offerings.

Rationale:

Maintaining current published information regarding the program’s offerings provides interested parties with an accurate overview of program requirements and expectations.

Compliance May Be Demonstrated by:

Providing program publications that reflect program offerings.

Possible Site Assessment Methods:

- Review of published program materials
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

The program’s curriculum is published in the following:

Section 4 of the Master Plan of Education contains the college catalog and the curriculum is published on page 181. The college catalog can also be found online at <http://www.spcollege.edu/webcentral/catalog/>.

The program’s web site is located at <http://www.spcollege.edu/Hec/radiography/index.html> and it contains a link to the curriculum.

Exhibit 4 of the Self-Study Report contains a pamphlet that the college employs to advertise the programs that are offered at the Health Education Center and it is entitled, “Health Education for the 21st Century.” The program curriculum can be found on page 39.

2.4 Does the program have due process procedures that are readily accessible, fair, and equitably applied?

Explanation:

Due process procedures outline the steps for formal resolution of a grievance or complaint. A due process procedure must identify timeframes for completion of each step and provide for final appeal to a source external to the educational program.

Rationale:

Due process procedures provide students with an unbiased avenue to pursue complaints or grievances and the opportunity to be heard in a timely manner.

Compliance May Be Demonstrated by:

Providing a copy of the program’s due process procedure.

Possible Site Assessment Methods:

- Review of student handbook
- Review of institutional catalog
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

The program diligently follows the college’s due process procedures that are outlined in the following documents:

Section 4 of the Master Plan of Education contains the college catalog and the Student Grievances and Academic Appeals procedure is published on page 59. The college catalog can also be found online at <http://www.spcollege.edu/webcentral/catalog/>.

Section 8 of the Master Plan of Education contains the student handbook and the Student Grievances and Academic Appeals procedure is published on pages 12 to 13.

Section 14 of the Master Plan of Education contains the clinical instructor manual and the Student Grievances and Academic Appeals procedure is published on pages 12 to 13.

A copy of the SPC Board of Trustees Rule governing the student appeals process to include a timeline can be found within Exhibit 19 of the Self-Study Report and is located online at http://www.spcollege.edu/central/botrules/R4/4_36.doc.

2.5 Does the program have a policy that assures timely and appropriate resolution of complaints regarding allegations of non-compliance with JRCERT STANDARDS and maintain a record of such complaints and their resolution?

Explanation:

Students must be made aware of the JRCERT **STANDARDS** and must be provided with a specific policy for resolution of allegations of non-compliance. The program must maintain a record of complaints and their resolution.

Rationale:

A policy for addressing complaints of non-compliance with the **STANDARDS** helps assure students have knowledge of the **STANDARDS** and an identified avenue to pursue allegations. USDE regulations require a record of such complaints.

Compliance May Be Demonstrated by:

- Providing a copy of the policy.
- Describing the procedure for making students aware of the **STANDARDS**.

Possible Site Assessment Methods:

- Review of complaint records
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X	X			

The student handbook and the current JRCERT Standards for an Accredited Educational Program in Radiologic Sciences are distributed and discussed with each student during RTE 1000 Orientation to Radiography. Students and the community at large are required to follow the college’s due process procedure and timeline when filing complaints regarding allegations of non-compliance with JRCERT Standards. The college’s due process procedures are outlined in the following documents:

Section 4 of the Master Plan of Education contains the college catalog and the Student Grievances and Academic Appeals procedure is published on page 59. The college catalog can also be found online at <http://www.spcollege.edu/webcentral/catalog/>.

A copy of the SPC Board of Trustees Rule governing the student appeals process to include a timeline can be found within Exhibit 19 of the Self-Study Report and is located online at http://www.spcollege.edu/central/botrules/R4/4_36.doc

Section 8 of the Master Plan of Education contains the student handbook and the Student Grievances and Academic Appeals procedure is published on pages 12 to 13.

Section 14 of the Master Plan of Education contains the clinical instructor manual and the Student Grievances and Academic Appeals procedure is published on pages 12 to 13.

The “Policy for Reporting Potential Non-Compliance of JRCERT Standards” document is located alphabetically in Section 15 of the Master Plan of Education.

The “Report of Noncompliance of JRCERT Standards” form is located alphabetically in Section 15 of the Master Plan of Education.

2.6 Does the program regularly evaluate program policies, procedures, and publications and revise as appropriate?

Explanation:

The evaluation/revision process should be documented. It is the program’s prerogative to determine the frequency of evaluation.

Rationale:

Routine review and evaluation assure that published program materials reflect current program offerings and practices.

Compliance May Be Demonstrated by:

Describing the procedure for review and revision of program materials.

Possible Site Assessment Methods:

- Review of meeting minutes
- Review of program policies, course outlines, etc.
- Review of student handbook
- Review of program brochure

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

Program policies, procedures and publications are evaluated on at least an annual basis through discussion at program Advisory Committee Meetings and Clinical Instructor/Faculty Meetings. Feedback is encouraged from all interested parties and the date that major documents are revised is usually included at the beginning of the document. For an example, refer to page 1 of the Clinical Instructor Manual that is located in Section 14 of the Master Plan of Education and note the date of revision.

2.7 Does the program document the continuing accreditation of the sponsoring institution?

Explanation:

The sponsoring institution is the facility or organization having primary responsibility for the educational program and granting the terminal award. A sponsoring institution must be accredited by a recognized agency or meet equivalent standards.

Rationale:

Accreditation helps assure educational quality.

Compliance May Be Demonstrated by:

Providing letters or certificates demonstrating the current accreditation status of the sponsoring institution.

Possible Site Assessment Methods:

- Review of documentation of appropriate accreditation

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

The program and college are regionally accredited through the Southern Association of Colleges and Schools and this documentation can be found in Exhibit 5 of the Self-Study Report.

2.8 Does the program document the continuing recognition of each clinical education setting by applicable regulatory agencies.

Explanation:

A clinical education setting is a facility recognized by the JRCERT as meeting appropriate criteria for delivering clinical education and evaluation of clinical competency. Clinical education settings may be recognized by The Joint Commission (TJE) or an equivalent agency or may hold a state issued license.

Rationale:

Recognition by a regulatory agency helps assure an appropriate environment for student clinical education.

Compliance May be Demonstrated By:

Providing letters or certificates demonstrating the current recognition status of each clinical education setting.

Possible Site Assessment Methods:

- Review of documentation of current recognition.

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

Exhibit 6 of the Self-Study Report contains the current accreditation documentation for each of the program’s fourteen clinical affiliations.

2.9 Does the program maintain JRCERT recognition of all clinical education settings?

Explanation:

A clinical education setting is a facility recognized by the JRCERT as meeting appropriate criteria for delivering clinical education and evaluation of clinical competency. Initial recognition of a clinical education setting requires submission of JRCERT Forms 104 and 102. A minimum of one (1) clinical instructor/supervisor must be identified for each recognized clinical education setting.

Rationale:

JRCERT recognition helps assure an appropriate clinical education environment for student clinical education.

Compliance May Be Demonstrated by:

Listing the clinical education settings used by the program.

Possible Site Assessment Methods:

- Review of JRCERT database
- Review of clinical records
- Interviews with faculty
- Interviews with clinical instructor(s)/supervisor(s)
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

Forms 102 and 104 for all fourteen of our clinical affiliations can be found within Exhibits 7 and 8 of the Self-Study Report. These forms document our compliance with this Standard.

The following is a list of each clinical setting and corresponding clinical instructor that is currently affiliated with the program:

	Clinical Affiliate	Clinical Instructor	Telephone Number
1.	All Children's Hospital	Cynthia Baldree	(727) 898-7451
2.	Bardmoor Imaging Center	Howard Pleines	(727) 394-5156
3.	Bayfront Medical Center	Roger Little	(727) 893-2845
4.	Carillon Outpatient Imaging Center	Karen Kreuter	(727) 561-2329
5.	Carlisle Imaging Center	Diane Hodges & Eileen Magrum	(727) 462-7514
6.	Largo Medical Center	Mary Wise (Fratone)	(727) 588-5850
7.	Mease Countryside Hospital	Trevor Johnson	(727) 725-6139
8.	Mease Dunedin Hospital	Megan Morris (McCauley)	(727) 734-6536
9.	Mease Outpatient Imaging Center	Kristopher Antonio (Pending JRCERT Approval)	(727) 725-6486
10.	Morton Plant Hospital	Mary Ciszak	(727) 462-7536
11.	Palms of Pasadena Hospital	Deborah Laneau	(727) 341-7533
12.	St. Anthony's Hospital	Anna Marie Colletti	(727) 825-1188
13.	St. Petersburg General Hospital	Jean Hartmaier	(727) 341-4853
14.	Tyrone Imaging Center	Robin Lee	(727) 345-2600

2.10 Does the program maintain JRCERT recognition of all applicable faculty appointments?

Explanation:

The JRCERT requires recognition of the program director, clinical coordinator, clinical instructors (radiography) and clinical supervisors (radiation therapy). Recognition requires the submission of Form 102, a current curriculum vitae, and documentation of current registration by the American Registry of Radiologic Technologists or equivalent.

Rationale:

Recognition helps assure appropriate education, evaluation, and supervision of students.

Compliance May Be Demonstrated by:

Listing current faculty appointments.

Possible Site Assessment Methods:

- Review of JRCERT database
- Review of program files
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

Exhibit 7 of the Self-Study Report contains Form 102 and related documentation for the program director, clinical coordinator and all fourteen of the program’s clinical instructors.

2.11 Does the program comply with requirements to achieve and maintain JRCERT accreditation?

Explanation:

Programs must comply with JRCERT policies and procedures to maintain accreditation.

No program response required.

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No

Summary for Standard Two

1. List the major strengths of **Standard Two**, in order of importance.
 - a. The college has maintained regional accreditation through the Southern Association of Colleges and Schools.
 - b. The college's due process procedures are employed by the program to ensure the timely and appropriate resolution of student complaints, grievances and/or academic appeals.
2. List the major concerns of **Standard Two**, in order of importance.
 - a. The program must endeavor to ensure that program policies and procedures are reviewed at least annually for content, accuracy and relevancy.
 - b. The program must also strive to ensure that college personnel, students, clinical instructors and staff radiographers maintain compliance with program policies and procedures.
3. Provide the program's plan for addressing each concern identified.
 - a. The program will continue to be nimble in responding to input from the accrediting agencies, college personnel, students, clinical affiliates, and communities of interest regarding program policies and procedures.
 - b. The program will also work diligently to ensure that all college personnel, students, clinical instructors and staff radiographers maintain compliance with program policies and procedures.
 - c. The SPC Radiography Clinical Policies and Procedures Tutorial will be administered to all staff radiographers that interact with students in order to ensure compliance with accreditation standards and program policies.
4. Describe any progress already achieved in addressing each concern.

The SPC Radiography Clinical Policies and Procedures Tutorial has been well received by the hospital and clinic staff affiliated with the program. It has proven to be an effective means to educate radiographers regarding program policies and procedures. Refer to Section 16 of the Master Plan of Education to review the training tutorial.
5. Describe any constraints in implementing improvements.

Thus far, we have not encountered any constraints with this Standard.

Attach additional pages if necessary.

Standard Three:
Organization and Administration

3.1 Do the institution’s and program’s organizational and administrative structures support the program’s mission and student learning outcomes?

Explanation:

It is the program’s prerogative to determine its organizational and administrative structure. These structures should facilitate the program’s mission and goals as they relate to student learning outcomes.

Rationale:

Organizational and administrative structures affect a program’s ability to meet its mission.

Compliance May Be Demonstrated by:

- Providing an institution’s and/or program’s organizational chart.
- Describing the program’s organizational and administrative structures and how they support the program’s mission and identified learning outcomes.

Possible Site Assessment Methods:

- Review of organizational charts of institution and program
- Review of meeting minutes
- Review of published program materials
- Review of master plan of education
- Interviews with faculty
- Interviews with clinical instructor(s)/supervisor(s)

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X	X			

St. Petersburg College’s organizational and administrative structures provide the foundation for the program to meet its mission and goals. Communication at all levels of management is essential in order to ensure continued program success. This is facilitated through the program’s advisory committee meetings that meet at least twice per year, clinical instructor/faculty meetings that are held at the end of each semester, and the health education center staff meetings that are held twice per month. Refer to Exhibit 3 of the Self-Study Report to review minutes from each of these meetings.

The organization flowchart for the St. Petersburg College Radiography Program is as follows:

<p>ST. PETERSBURG COLLEGE PRESIDENT:</p> <p>DR. THOMAS FURLONG</p>
<p>HEALTH EDUCATION CENTER PROVOST:</p> <p>DR. PHILIP V. NICOTERA, M.ED., M.D.</p>
<p>HEALTH EDUCATION CENTER ASSOCIATE PROVOST:</p> <p>GREG MCLEOD, M.ED.</p>
<p>RADIOGRAPHY PROGRAM DIRECTOR:</p> <p>JOHN FLEMING, M.ED., RT(R)(MR)(CT)</p>
<p>CLINICAL COORDINATOR:</p> <p>LINDA KELSEY, M.A., RT(R)</p>
<p>ADJUNCT FACULTY MEMBERS:</p> <p>APRIL BRADLEY, A.S., RT(R) MARIA ECHEVERRIA, A.S., RT(R) MARK HERBST, M.D. JENNIFER KNIEHASE, A.S., RT(R) TODD VAN AUKEN, B.S., RT(R)</p>
<p>MEDICAL ADVISOR:</p> <p>ROBERT ENTEL, M.D.</p>

3.2 Does the program establish and maintain affiliation agreements with clinical education settings?

Explanation:

The JRCERT defines affiliation agreement as a formal written understanding between an institution sponsoring the program and an independent clinical education setting. An affiliation agreement must identify the responsibilities of all parties and, specifically, must address responsibility for liability, student supervision, student evaluation, and adequate notice of termination of the agreement. An affiliation agreement is not needed for clinical education settings owned by the sponsoring institution; however, a memorandum of understanding between the clinical education setting and the sponsoring institution is recommended. At a minimum, the memorandum should address responsibilities of both parties and student supervision.

Rationale:

Formalizing relations between the program and the clinical education setting helps assure the quality of clinical education by delineating appropriate responsibilities of the program and the clinical education setting. An appropriate termination clause assures that students will have an opportunity to complete the clinical education component.

Compliance May Be Demonstrated by:

Providing copies of current signed affiliation agreements with each clinical education setting.

Possible Site Assessment Methods:

- Tour of clinical education setting(s)
- Interviews with administrative personnel
- Interview with program director
- Interviews with clinical education setting administrators

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

Exhibit 9 of the Self-Study Report contains the program’s current clinical affiliation agreements. Each contract contains the required elements that the JRCERT recommends. Form 100C-R has been attached to the front of each agreement.

3.3 Does the program assure the security and confidentiality of student records, instructional materials, and other appropriate program materials?

Explanation:

Student records must be maintained in accordance with the Family Education Rights and Privacy Act (Buckley Amendment).

Rationale:

Appropriately maintaining records and other materials protects students' right to privacy.

Compliance May Be Demonstrated by:

Describing how the program's policies/procedures for assuring the security, maintenance, and retention of program records are consistent with state and federal laws.

Possible Site Assessment Methods:

- Tour of program offices
- Tour of clinical education setting(s)
- Review of program's/institution's published policies/procedures
- Review of student academic and clinical records
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with clinical instructor(s)/clinical supervisor(s)
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The college complies with the provisions of the Federal Family Educational Rights and Privacy Act by ensuring that student records are kept confidential and in secure locations throughout all levels of the organization. The college maintains a permanent record of academic information on each student in the College Registrar's Office. The Admissions/Records Department of the Health Education Center secures student records in HC 178B. The program assures the security, maintenance, and retention of student records by providing secure record keeping areas located in HC 140B, E, and F. Clinical Instructors are counseled on the importance of maintaining the confidentiality of student records at each clinical site. A document entitled, "Job Description of the Clinical Instructor" is located alphabetically in Section 17 of the Master Plan of Education and on the next page for review. Item #19 states that the clinical instructor must maintain the confidentiality of student records by storing them in a secure area.

Job Description of the Clinical Instructor

To begin with, the clinical instructor (CI) is a hospital/clinic employee and as such, their duties will vary from facility to facility. With this in mind, the CI job responsibilities are listed below:

1. Conduct clinical seminars and film critiques.
2. Determine student room assignments.
3. Conduct practice check and competency evaluations.
4. Participate in the mid-semester student evaluation process.
5. Distribute and collect staff technologist evaluations of student radiographers.
6. Distribute and collect student radiographer evaluations of staff technologists.
7. Complete the end-of-semester student evaluations.
8. Monitor student progress.
9. Provide opportunities for student counseling related to the clinical areas.
10. Refer student related problems to the radiology manager, clinical coordinator and/or the program director.
11. Educate the hospital and/or clinic staff members about the radiography program.
12. Promote the affiliation among department personnel.
13. Advise the program director, clinical coordinator and clinical faculty members on matters related to clinical education.
14. Arrange hospital and/or clinic visitations for prospective students.
15. Maintain student attendance records.
16. Return student attendance records and other related paper work to the college every two weeks.
17. Abide by college and program policies.
18. Meet regularly with the program director, clinical coordinator and faculty members.
- 19. Ensure that student records are kept in a secure area.**

The professional qualifications of the CI are as follows:

1. Shall be a licensed radiographer in the State of Florida.
2. Shall be credentialed and in good standing with the ARRT.
3. Shall document the equivalent of two years full-time professional experience as a radiographer and be competent in instructional and evaluative techniques.
4. Shall meet the criteria for the position as established by the sponsoring institution.

3.4 Does the program assure an appropriate relationship between program length and the subject matter taught and the objectives for the degree or credential offered?

Explanation:

The JRCERT defines program length as the duration of the program, which may be stated as total academic or calendar year(s), or total semesters, trimesters, or quarters.

Rationale:

Consistency between program length and terminal award assures program integrity.

Compliance May Be Demonstrated by:

Describing the relationship between the program length and the terminal award offered.

Possible Site Assessment Methods:

- Review of course catalog
- Review of published program materials
- Review of class schedules
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The program of study that leads to an Associate in Science Degree in Radiography requires six semesters (24 months) to complete. The program consists of 77 credit hours as mandated by the Florida legislature. This information is published on page 181 of the college catalog that can be found in Section 4 of the Master Plan of Education and online at <http://www.spcollege.edu/webcentral/catalog/>. The website for the program also contains the curriculum template and it is located at <http://www.spcollege.edu/Hec/radiography/index.html>. It has also been inserted below and on the next page for review.

**Radiography
RAD-AS**

PRE-ENTRY REQUIREMENTS (7 credits) - Grade of C or higher required

<u>BSC 2085</u> - HUMAN ANATOMY & PHYSIOLOGY I	3
<u>BSC 2085L</u> - HUMAN ANATOMY & PHYSIOLOGY LABORATORY I	1
<u>MAC 1105</u> - COLLEGE ALGEBRA	3

GENERAL EDUCATION COURSES (18 credits)

* <u>Enhanced World View Requirement</u>	
<u>ENC 1101</u> - COMPOSITION I or (<u>Honors</u>)	3
<u>SPC 1017</u> - INTRODUCTION TO SPEECH COMMUNICATION	3
<u>or</u> (<u>SPC 1017H</u> , <u>SPC 1065</u> , <u>SPC 1608</u> , or <u>SPC 1608H</u>)	
* <u>Humanities/Fine Arts Approved Course</u>	3
* <u>Social & Behavioral Sciences Approved Course</u>	3
<u>PHI 1600</u> - STUDIES IN APPLIED ETHICS	3
<u>or</u> (<u>PHI 1602H</u> , <u>PHI 1631</u> , <u>PHI 2635</u> or <u>PHI 2649</u>)	
<u>CGS 1100</u> - MICROCOMPUTER APPLICATIONS	3

SUPPORT COURSES (4 credits)

<u>BSC 2086</u> - HUMAN ANATOMY & PHYSIOLOGY II	3
<u>BSC 2086L</u> - HUMAN ANATOMY & PHYSIOLOGY LABORATORY II	1

PROGRAM COURSES**1st TERM (10 credits)**

<u>RTE 1000</u> - ORIENTATION TO RADIOGRAPHY	3
<u>RTE 1418</u> - PRINCIPLES OF IMAGING I	2
<u>RTE 1418L</u> - PRINCIPLES OF IMAGING I LAB	1
<u>RTE 1503C</u> - RADIOGRAPHIC PROCEDURES I	3
<u>RTE 1503L</u> - RADIOGRAPHIC PROCEDURES I LAB	1

2nd TERM (6 credits)

<u>RTE 1513C</u> - RADIOGRAPHIC PROCEDURES II	2
<u>RTE 1513L</u> - RADIOGRAPHIC PROCEDURES II LAB	1
<u>RTE 1804L</u> - RADIOGRAPHIC CLINICAL EDUCATION I	3

3rd TERM (11 credits)

<u>RTE 1458</u> - PRINCIPLES OF IMAGING II	3
<u>RTE 1473L</u> - RADIOGRAPHIC QUALITY ASSURANCE LABORATORY	1
<u>RTE 1814L</u> - RADIOGRAPHIC CLINICAL EDUCATION II	5
<u>RTE 2385</u> - RADIATION BIOLOGY	2

4th TERM (7 credits)

<u>RTE 2613</u> - RADIATION PHYSICS	2
<u>RTE 2824L</u> - RADIOGRAPHIC CLINICAL EDUCATION III	5

5th TERM (6 credits)

<u>RTE 2782</u> - RADIOGRAPHIC PATHOLOGY	2
<u>RTE 2834L</u> - RADIOGRAPHIC CLINICAL EDUCATION IV	4

6th TERM (8 credits)

<u>RTE 2563</u> - ADVANCED MEDICAL IMAGING	3
<u>RTE 2844L</u> - RADIOGRAPHIC CLINICAL EDUCATION V	5

TOTAL PROGRAM HOURS**77**

3.5 Does the program measure the length of all didactic and clinical courses in clock hours or credit hours?

Explanation:

The clock hours or credit hours assigned to each didactic and clinical course must be identified.

Rationale:

Defining the length of didactic and clinical courses facilitates student transfer of credit and the awarding of financial aid.

Compliance May Be Demonstrated by:

Providing a list of all didactic and clinical courses with corresponding clock or credit hours.

Possible Site Assessment Methods:

- Review of published program materials
- Review of clinical and class schedules
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

The program length is measured in both credit hours and in contact hours (clock hours). The curriculum template contains a listing of all of the courses and corresponding credit hours offered in the program. It is published on page 181 of the college catalog that is located in Section 4 of the Master Plan of Education and online at <http://www.spcollege.edu/webcentral/catalog/>. The website for the program also contains the curriculum template and it is located at <http://www.spcollege.edu/Hec/radiography/index.html>. The contact hours for each course are located on pages 316 to 318 of the college catalog. The next three pages contain the course descriptions, number of credit hours, and number of contact hours for each course offered in the curriculum.

RTE 1000 ORIENTATION TO RADIOGRAPHY 3 credits

Prerequisite: Admission to the Radiography AS program. This course provides an orientation to the profession of radiography. Topics include the history and organization of the profession, medical terminology, body mechanics, emergency situations, infection control, aseptic techniques, evaluating patient physical needs, patient education, and venipuncture in radiography. Patient care in radiography will also be included. 47 contact hours.

RTE 1418 PRINCIPLES OF IMAGING I 2 credits

Prerequisite: [MAC 1105](#) with a grade of "C" or higher. Corequisite: [RTE 1418L](#). The objective of this course is to provide an introduction to basic principles of radiographic exposure and processing. Topics include radiographic density, contrast, definition, distortion, film, latent image formation and processing. 32 contact hours.

RTE 1418L PRINCIPLES OF IMAGING I LAB 1 credits

Prerequisites: Any course with a [MAC](#) or [MGF](#) prefix with a grade of "C" or higher and admission to the Radiography AS program. Corequisite: [RTE 1418](#). This course is designed to provide the student an opportunity to apply radiographic exposure principles in the energized laboratory. Topics include radiographic density, contrast, definition, distortion, film and processing. Two laboratory hours weekly.

RTE 1458 PRINCIPLES OF IMAGING II 3 credits

Prerequisite: [RTE 1418](#) with a grade of "C" or higher. Corequisite: [RTE 1473L](#). The objective of this course is to provide advanced, comprehensive instruction and discussion in principles of radiographic exposure. Topics include detailed instruction in the control of exposure and quality using kilovoltage peak (kVp), milliampere-seconds (mAs), Source Image Distance (SID), geometric factors, automatic exposure control (AEC) devices, beam restrictors, grids, filters, and screens, properties of x-ray tubes, principles of image intensification and fluoroscopy, and the production and characteristics of radiation. Tube rating charts, technique charts and selected topics in quality assurance are included. 47 contact hours.

RTE 1473L RADIOGRAPHIC QUALITY ASSURANCE LABORATORY 1 credits

Prerequisite: [RTE 1418](#) with grade of "C" or better. Corequisite: [RTE 1458](#). This course is a laboratory course providing the student an opportunity to apply radiographic principles and accessories in the energized laboratory. Topics include radiographic density, contrast, definition, distortion, radiographic grids, filters, film, processing, beam restrictors, screens, and the application of basic principles and radiologic physics, exposure and quality assurance, quality control and quality improvement. 32 contact hours.

RTE 1503C RADIOGRAPHIC PROCEDURES I 3 credits

Prerequisite: Admission to the Radiography AS Program. This course is a study of radiographic anatomy, physiology, and positioning for radiologic examinations of the chest, abdomen, pelvis, bony thorax, spine and extremities. 62 contact hours.

RTE 1503L RADIOGRAPHIC PROCEDURES I LAB 1 credits

Corequisite: [RTE 1503C](#). This is a laboratory study of basic anatomy and positioning of the chest, abdomen, pelvis, bony thorax, spine and extremities for radiographic procedures. 47 contact hours.

RTE 1513C RADIOGRAPHIC PROCEDURES II 2 credits

Prerequisite: [RTE 1503C](#) with a grade of "C" or better. This course is a study of radiographic anatomy, physiology, and positioning of radiologic examinations of the skull and facial bones. Procedures requiring the use of contrast materials within the digestive system, and urinary system, as well as the pharmacology of contrast agents will also be studied. 47 contact hours.

RTE 1513L RADIOGRAPHIC PROCEDURES II LAB 1 credits

Prerequisites: [RTE 1503C](#), [RTE 1503L](#) both with grades of "C" or better. Corequisite: [RTE 1513C](#). This is a laboratory study of basic radiographic anatomy. The course includes the positioning of the urinary system, digestive system, breasts and cranium. 45 contact hours.

RTE 1804L RADIOGRAPHIC CLINICAL EDUCATION I 3 credits

Prerequisites: [RTE 1000](#), [RTE 1503C](#) and [RTE 1418](#) all with grades of "C" or better. This is an introductory clinical course meeting at local hospitals to give the student an opportunity to apply theoretical concepts taught in classroom courses. Topics include basic positioning of the chest, abdomen, extremities and Gastrointestinal Series (GI)contrast examinations. Basic patient care procedures, radiation protection practices and radiologic exposure and processing principles are introduced. 227 contact hours.

RTE 1814L RADIOGRAPHIC CLINICAL EDUCATION II 5 credits

Prerequisites: [RTE 1804L](#), [RTE 1513C](#) both with grades of "C" or better. This course is a continuation of Radiographic Clinical Education I. Topics include positioning of the urinary tract, spine and basic skull exams. Intermediate-level patient care procedures, radiation protection practices, radiologic exposure principles and the use of radiographic accessories are introduced. 377 contact hours.

RTE 2385 RADIATION BIOLOGY 2 credits

Prerequisite: Admission to the Radiography AS program. The objective of this course is to provide the student with fundamental principles of radiobiology. Topics include early and late effects of radiation exposure, basic interactions of ionizing radiation with biological systems, factors modifying the body's response to radiation, principles of radiation protection and radiation monitoring. 32 contact hours.

RTE 2563 ADVANCED MEDICAL IMAGING 3 credits

Prerequisite: [RTE 1513C](#) with a grade of "C" or better. This course is the study of sectional anatomy, special radiographic procedures and advanced radiologic modalities. Topics specifically addressed include invasive and noninvasive specialized radiographic studies, Computed Tomography (CT), Magnetic Resonance Imaging (MR) and Cardiovascular procedures (CV) and Mammography. 47 contact hours.

RTE 2613 RADIATION PHYSICS 2 credits

Prerequisite: Admission to the Radiography AS program. The objective of this course is to introduce fundamental principles of radiologic physics including atomic and sub-atomic theory, interactions of radiation with matter, the nature of electricity and magnetism and properties of x-rays, diagnostic x-ray tubes, x-ray circuits, units of measurements and the structure of matter and the atom. 32 contact hours.

RTE 2782 RADIOGRAPHIC PATHOLOGY 2 credits

Prerequisite: Admission to the Radiography AS Program. The objective of this course is to introduce the disease processes most frequently encountered in the radiology department. The etiology, pathogenesis, treatment, and resolution of each disease is discussed with an attempt to relate recent advances in these areas. Emphasis is placed on radiologic diagnosis and the relationship of the radiographic appearance of the disease to its anatomic, physiologic, and pathologic characteristics. 32 contact hours.

RTE 2824L RADIOGRAPHIC CLINICAL EDUCATION III 5 credits

Prerequisites: [RTE 1814L](#), [RTE 1458](#), [RTE 1473L](#) all with grades of "C" or better. This course is a continuation of Radiographic Clinical Education II. Topics include advanced skull exams, contrast media exams, special procedures in the radiology department, adaptation of technical factors and positioning for difficult patients, advanced radiation protection procedures, and advanced patient care techniques. 377 contact hours.

RTE 2834L RADIOGRAPHIC CLINICAL EDUCATION IV 4 credits

Prerequisite: RTE 2824L with a grade of "C" or better. This course is a continuation of Radiographic Clinical Education IV. Topics include positioning of the traumatized patient, adaptation of technical factors to obtain optimum film quality, advanced specialized radiologic procedures, mobile radiography and surgical procedures. 242 contact hours.

RTE 2844L RADIOGRAPHIC CLINICAL EDUCATION V 5 credits

Prerequisite: RTE 2834L with a grade of "C" or better. This course is a continuation of Radiographic Clinical Education IV. The objective of this course is to prepare the student for a career as a medical radiographer. All clinical aspects are reviewed and emphasis is placed on radiography of the difficult patient, good radiation protection practices and application of sound patient care procedures in the radiology department. 377 contact hours.

Summary for Standard Three

1. List the major strengths of **Standard Three**, in order of importance.

The program is fortunate to have the organizational and financial support from both St. Petersburg College and the community that is required to meet its mission statement and goals.

2. List the major concerns of **Standard Three**, in order of importance.

Maintaining open communication between the college administration, faculty members, clinical instructors and students is imperative in order to facilitate continued success. This requires a collaborative effort to ensure that the needs and expectations of all interested parties are met.

3. Provide the program's plan for addressing each concern identified.

The program's plan to maintain a high level of communication is to ensure that objective input continues to be collected via graduate and employer surveys, student survey of instruction, student survey of their clinical experience, Advisory Committee Meetings, Clinical Instructor/Faculty Meetings and Health Education Center Staff Meetings.

4. Describe any progress already achieved in addressing each concern.

Data collected from all levels of program evaluation is collected and carefully examined to ensure that every effort is made to meet the needs of interested parties.

5. Describe any constraints in implementing improvements.

To date, the program has managed to overcome all obstacles that would prevent it from successfully meeting the objectives of this Standard.

Attach additional pages if necessary.

Standard Four:
Curriculum and Academic Practices

4.1 Does the program maintain a master plan of education?

Explanation:

The plan must provide documentation of the entire course of study and, at a minimum, must include didactic and clinical curricula, program policies and procedures, and strategies for assessing program effectiveness.

The plan may also contain the following documentation:

institutional and program philosophies and goals, curriculum sequence, course descriptions, course outlines and performance objectives, textbooks assigned by course, competency-based clinical education plan demonstrating integration and correlation with the didactic component, performance objectives for clinical education, graduate competencies, strategies and instruments used for evaluation of student behaviors in the cognitive, psychomotor and affective domains, and grading policy/derivation. While there is no prescribed format for the master plan, the component parts should be identified and readily accessible.

Rationale:

A master plan provides an overview of the program and allows for continuity among and documentation of all aspects of the program. In the event of new faculty and/or leadership to the program, it provides the knowledge needed to understand the program and its operation.

Compliance May Be Demonstrated by:

- Providing a Table of Contents for the program’s master plan.
- Listing the component parts of the master plan of education and their locations.

Possible Site Assessment Methods:

- Review of master plan of education
- Interview with program director
- Interviews with faculty

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

The table of contents for the program’s Master Plan of Education has been provided on the next page for review.

Master Plan of Education

Table of Contents:

1. ASRT's 2007 Radiography Curriculum & ARRT's 2005 Clinical Competency Requirements
2. JRCERT Standards for an Accredited Educational Program in Radiologic Sciences
3. ARRT Standards of Ethics
4. SPC College Catalog
5. Selective Admission Process and Application
6. Acceptance Letter, Drug Screening Form, Background Check Form, and Physical Form
7. Technical Standards
8. Radiography Program Student Handbook
9. Didactic Course Syllabi & Objectives
10. Lab Course Syllabi & Objectives
11. Clinical Course Syllabi & Objectives
12. St. Petersburg College Radiography Program Curriculum Map
13. JRCERT Curriculum Analysis Template
14. Clinical Instructor Manual
15. Clinical Forms
16. Clinical Policies and Procedures Training Tutorial
17. Job Description of Program and Clinical Personnel
18. Sample Clinical Student Rotation and Faculty Schedule
19. Protocol for Program Effectiveness
20. SPC Radiography Program Assessment Plan
21. Clinical Affiliate Contact Information
22. SPC Radiography Program Cooperative Education

4.2 Does the program follow a JRCERT recognized and accepted curriculum that prepares the student to practice in the professional discipline?

Explanation:

At a minimum, the curriculum must include the latest American Society of Radiologic Technologists (ASRT) professional curriculum or any other professional curriculum formally adopted by the JRCERT for the appropriate discipline. Expansion of the curricular content beyond the minimum is at the discretion of the program. The curriculum must be comprehensive and include current information.

Rationale:

Use of a standard curriculum promotes consistency in radiologic sciences education.

Compliance May Be Demonstrated by:

Providing evidence that the ASRT or another JRCERT adopted curriculum is followed.

Possible Site Assessment Methods:

- Review of course descriptions, outlines, syllabi, lesson plans
- Review of analysis of employer, graduate surveys
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

A review of our course descriptions, objectives, and syllabi will provide evidence that our clinical and didactic courses reflect the intent of the 2007 Radiography Curriculum designed by the American Society of Radiologic Technologists. These items are located within Sections 9, 10, and 11 of the Master Plan of Education.

The program strictly adheres to the ARRT’s 2005 clinical requirements. The clinical competency template is located alphabetically in Section 15 of the Master Plan of Education.

The program’s curriculum map is located in Section 12 of the Master Plan of Education.

Graduate pass rates on the ARRT as well as graduate and employer survey results will further substantiate our compliance with this Standard. This documentation can be found within the SPC Radiography Program’s Assessment Results that are located within Exhibit 1 of the Self-Study Report.

4.3 Does the program provide a curriculum that promotes professional values, life-long learning, and competency in critical thinking and problem solving skills?

Explanation:

The program’s curriculum must be designed to identify and foster professional values, instill life-long learning, and promote student development of competencies in critical thinking and problem solving skills. The curriculum should also promote the development of intellectual skills such as the ability to apply fundamental theory to practice, assess situations and make appropriate judgments, interact effectively in a culturally diverse world, and increase knowledge through continuing education.

Rationale:

These qualities are necessary for students/graduates to practice competently, make good decisions, assess situations, provide appropriate patient care, and keep abreast of current advancements within the profession.

Compliance May Be Demonstrated by:

Describing how the program promotes student development of professional values and life-long learning and competencies in critical thinking and problem solving.

Possible Site Assessment Methods:

- Review of master plan of education
- Review of curriculum competencies
- Review of course descriptions, outlines, syllabi, lesson plans
- Review of analysis of student, graduate, and employer surveys
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

A unit on **professional values** is presented to the students during their first semester in our program in RTE 1000, Orientation to Radiography. This course specifically addresses the nuances of professionalism and ethics specific to the field of Radiography. While the students progress through the clinical component of the program, each clinical course specifically addresses and encourages their professional development on mid semester and final evaluation forms. Additionally, each student must pass PHI 1603, Applied Ethics as an institutional requirement for graduation.

The aspects of **life-long learning** are also presented to the students during their first semester in our program in RTE 1000, Orientation to Radiography. Students are provided with information regarding the career ladder in Radiography under the premise that this will not only encourage them to aspire to continue their education but also to endeavor to continue to set new career goals. This philosophy is also fostered during their final clinical course in the program. As a course requirement, each student must spend up to two weeks observing one or more imaging modality of his or her choice. Furthermore, RTE 2563, Advanced Radiography not only helps prepare students for the ARRT examination but it also provides more specific information regarding the nuances of the major imaging modalities available to graduates upon matriculation into the workforce. Finally, second year students are encouraged to attend the Student/Educator Seminar that is offered in Orlando and Atlanta on alternate years. The notion here is that not only will students acquire additional preparation for the ARRT examination but they will also be exposed to one means of how continuing education can be achieved following graduation.

Critical thinking and problem solving strategies are taught in didactic courses throughout the curriculum. For example, students are given patient scenarios that they must solve in their Procedures lecture and lab classes. Transfer of these skills are then measured and evaluated during all five clinical courses on each practice check and competency form that is completed by the student and on mid-semester and final course evaluations.

4.4 Does the program provide a well-structured, competency based curriculum that supports the program’s mission and goals?

Explanation:

The curriculum, whether offered in a traditional manner or via an alternative learning option (Refer to Policy 10.800, Statement 10.803), must be appropriately sequenced and provide for assessment of student achievement of a specified level of proficiency. Clinical and didactic education must be appropriately correlated.

Rationale:

A well-structured curriculum allows for effective student learning by providing a knowledge foundation prior to performance of procedures and/or competency evaluation.

Compliance May Be Demonstrated by:

Describing how the program’s curriculum is structured.
 Identifying which courses, if any, are offered via distance education.
 Describing how the program's curriculum is delivered, including the method of delivery for distance education courses.
 Describing any alternative curriculum delivery options.

Possible Site Assessment Methods:

- Review of master plan of education
- Review of didactic and clinical curriculum sequence
- Review of course descriptions, outlines, syllabi, lesson plans
- Interviews with faculty
- Interviews with students
- Observation of a portion of any course offered via distance delivery.

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

Our competency based curriculum has been carefully designed by the program faculty, with input from the clinical instructors and members of the advisory committee, to ensure that the students are provided with the means to acquire the didactic, clinical, and professional skills required to secure and maintain gainful employment following graduation and matriculation into the workforce. The curriculum has been coordinated to ensure that students acquire a foundation of basic cognitive and psychomotor skills prior to their entrance into the clinical component of the program. Refer to page 181 of the college catalog that is located in Section 4 of the Master Plan of Education to review our course sequence. Additionally, our clinical objectives progressively challenge students to meet a minimum level of clinical competence before they can proceed to the next clinical course. Refer to Section 11 of the Master Plan of Education to review our clinical objectives.

Students are also rotated through multiple clinical sites during the course of the program. This measure is designed to ensure that by the end of the program, each student has had an opportunity to complete the ARRT's clinical requirements in a timely manner.

SPC uses the ANGEL platform to deliver online courses. SPC requires that all of the program's didactic, lab and clinical courses have an ANGEL component. This course requirement provides the means for the program to deliver the syllabus, forms, worksheets, notes and handouts to each student. ANGEL also provides the means for the students to communicate with their colleagues and with program officials. Additionally, all program testing is completed through ANGEL. This has proven to be a very effective means to help prepare students for the electronic format of testing that the ARRT employs.

RTE 2782, Radiographic Pathology is the only course in the curriculum that uses ANGEL to deliver assignments. This is considered a blended online course because it employs a combination of online assignments and face-to-face meetings to deliver course content.

4.5 Does the program’s curriculum reflect assessment of affective, cognitive, and psychomotor domains?

Explanation:

The curriculum must provide for evaluation of the extent to which students have learned desired behaviors.

Rationale:

Assessment of student performance is necessary to promote student achievement.

Compliance May Be Demonstrated by:

- Describing how the evaluation system assesses the affective, cognitive, and psychomotor domains.
- Providing examples of completed evaluation tools.

Possible Site Assessment Methods:

- Review of master plan of education
- Review of course descriptions, outlines, syllabi, and lesson plans
- Review of student competency evaluations
- Review of tools used for evaluation of the domains
- Review of grading policies/derivations
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X	X			

The methods employed to measure achievement of course objectives within the three learning domains varies within each of the didactic lab and clinical courses offered throughout the program. In general, **didactic courses** primarily employ the use of open-ended quizzes and multiple-choice tests to determine mastery of the course content. These tools measure achievement in the cognitive domain and in the affective domain to a lesser extent.

Lab courses are employed to provide the students with an opportunity to apply the knowledge base that they have acquired in the corresponding didactic course. Mastery of lab course objectives is assessed by having students complete lab experiments or simulations of radiographic procedures. The tools employed to determine student achievement of lab course objectives primarily emphasizes the measurement of skills within the psychomotor and cognitive domains.

The **clinical component** of the program provides students with an opportunity to apply the foundation of knowledge and psychomotor skills that they have developed through participation in didactic and lab courses. The assessment tools employed to determine if students have met their clinical objectives measure all three of the learning domains.

Refer to Exhibit 10 of the Self-Study Report to review a sample of the assessment tools employed to measure student achievement of didactic, lab and clinical course objectives within the cognitive, psychomotor and affective learning domains.

4.6 Does the program define and provide learning opportunities in current and developing imaging and/or therapeutic technologies?

Explanation:

The program must provide learning opportunities in current and developing imaging and/or therapeutic technologies. It is the program's prerogative to decide which technologies should be included in the didactic and clinical curriculum.

Rationale:

These learning opportunities provide students with knowledge about the procedures. Students also gain an awareness of potential advancements in the profession.

Compliance May Be Demonstrated by:

Describing how the program provides opportunities in developing technologies in the didactic and/or clinical curriculum.

Possible Site Assessment Methods:

- Review of master plan of education
- Review of course descriptions, outlines, syllabi, lesson plans
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The program employs several methods to provide learning opportunities in current and developing imaging modalities. To begin with, students are provided with an introduction to the Radiography career ladder within RTE 1000, Orientation to Radiography. More detailed information regarding the different career paths available to graduates is given to students in RTE 2563, Advanced Radiography. The final clinical course in the program also requires each student to spend up to two weeks observing one or more imaging modality of his or her choice. Mammography is the only modality that is not an option to any student because of our inability to find a clinical site that will allow a male student to shadow. Finally, all students are required to complete a three-week rotation through All Children's Hospital.

4.7 Does the program provide equitable learning opportunities for all students?

Explanation:

The program must provide equitable learning opportunities for all students. For example, if an objective is for students to perform breast imaging and/or therapeutic procedures, then both genders must be provided the same opportunities to attain the requirement.

Rationale:

The provision of equitable learning activities promotes fair and impartial education and reduces institutional and/or program liability.

Compliance May Be Demonstrated by:

Describing how the program assures equitable learning opportunities.

Possible Site Assessment Methods:

- Review of master plan of education
- Review of performance objectives
- Review of published program materials
- Review of student clinical assignment schedules
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The program goes to great length to ensure that all students are given equitable learning opportunities. For example, students are no longer allowed to rotate through the Mammography Department or participate in HSGs due to our inability to secure clinical sites that were willing to allow male students to participate. However, all students are formally taught Mammography and HSGs within the classroom setting of the program. Additionally, all of our students experience both hospital and outpatient clinical settings and complete a three week rotation at All Children’s Hospital.

Summary for Standard Four

1. List the major strengths of **Standard Four**, in order of importance.
 - a. The program is designed to ensure that equitable learning opportunities are made available to all students.
 - b. The program's curriculum and teaching strategies are also geared towards encouraging students to set additional career goals following graduation and matriculation into the workforce.
2. List the major concerns of **Standard Four**, in order of importance.
 - a. CR and DR technology is constantly improving and the program must endeavor to ensure that its curriculum is able to keep pace with these advances.
 - b. The ARRT is on the verge of mandating clinical competencies in CT and the program must work diligently to ensure that all students will be able to rotate through the CT Departments of their respective clinical sites.
3. Provide the program's plan for addressing each concern identified.
 - a. In regards to ensuring that the program's curriculum stays current, the college encourages faculty members to attend at least one national conference per academic year. This provides an opportunity for faculty members to familiarize themselves with any innovative trends that may be occurring in Medical Imaging.
 - b. In regards to securing CT clinical rotations, program officials have had and will continue to have formal discussions regarding this topic with members of the community via Advisory Committee Meetings and Clinical Instructor/Faculty Member Meetings.
4. Describe any progress already achieved in addressing each concern.
 - a. SPC prides itself on providing learning opportunities for faculty members to stay current with trends within their respective industries. Just this year, the program director and faculty member were granted release time to attend the WCEC Student/Educator Meeting in Orlando.
 - b. The foundation for implementing a formal CT clinical rotation has been laid. It is now up to program officials to work closely with hospital personnel to ensure that it comes to fruition.
5. Describe any constraints in implementing improvements.
 - a. With these difficult economic times, it is entirely possible that funds may be limited for staff and program development in the near future.
 - b. People are generally slow to changes and this will be a major adjustment for CT personnel at our clinical sites. Program personnel will have to work closely with them to ensure a smooth transition.

Attach additional pages if necessary.

Standard Five:
Resources and Student Services

5.1 Does the program provide classrooms, laboratories, clinical education settings, administrative and faculty offices, and other facilities to support its mission and goals?

Explanation:

Although a dedicated classroom and/or laboratory is not required, scheduled accessibility to facilities conducive to student learning must be assured. Faculty office space should be conducive to planning and scholarly activities.

Rationale:

Provision of appropriate learning environments and learning resources facilitates achievement of program outcomes.

Compliance May Be Demonstrated by:

Describing how classrooms, laboratories, clinical education settings, observation sites, and administrative and faculty offices support the program’s mission and goals.

Possible Site Assessment Methods:

- Tour of the didactic and clinical education settings
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

SPC supports the Radiography Program by providing access to a dedicated classroom, three energized x-ray labs, four offices, a student/faculty lounge area and three storage rooms. The program has ample computer hardware and dedicated Radiography related software for student and faculty use. The program also has access to a twenty-six-station computer lab that is employed for testing purposes. The Health Education Center’s library provides Internet access, Radiography software tutorials, periodicals and reference books. Additionally, the Health Education Center’s New Initiative Program has provided tutors for Radiography students on an as needed basis.

One of the real strengths of the program is the quality of its fourteen clinical affiliates. They have consistently proven to be very supportive of both the program and the needs of the students. Each clinical site provides at least one clinical instructor and a variety and quantity of procedures that gives each student an opportunity to meet their clinical objectives in a timely manner.

Collectively, SPC and the Radiography community form a collaborative alliance that work together to provide the means for the program to meet its mission and goals.

5.2 Does the program provide clinical observation sites, as appropriate?

Explanation:

An observation site is used for student observation of the operation of equipment and/or procedures. Competencies may not be performed during observational assignments, nor may students participate in patient care. An observation site does not require JRCERT recognition.

Rationale:

These sites provide opportunities for observation of clinical procedures that may not be available at recognized clinical education settings.

Compliance May Be Demonstrated by:

Describing how observation sites, if used, enhance student clinical education.

Possible Site Assessment Methods:

- Review of student assignment schedules
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

Currently, the program does not employ the use of clinical observation sites.

5.3 Do clinical education settings provide students with a variety and volume of procedures for competency achievement?

Explanation:

It is the program’s prerogative to identify student outcomes for competency achievement; however, clinical education settings must provide a sufficient variety and volume to allow all students to achieve required program competencies. Clinical education settings may include hospitals, clinics, specialty/imaging centers, orthopedic centers, radiation oncology facilities, and other facilities.

Rationale:

Students must have access to an adequate variety and volume of procedures to become competent in clinical practice.

Compliance May Be Demonstrated by:

Providing assurance that all students have access to a sufficient variety and volume of procedures to achieve competency.

Possible Site Assessment Methods:

- Review of published program materials
- Review of student clinical rotation assignments
- Review of student clinical records
- Review of surveys
- Interviews with faculty
- Interviews with clinical instructor(s)/supervisor(s)
- Interviews with clinical staff
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

One of the real strengths of the program is the tremendous support that it receives from its fourteen clinical affiliates. Each clinical site provides at least one clinical instructor and a variety and quantity of procedures that gives each student an opportunity to meet their clinical objectives in a timely manner.

In regards to student clinical rotations, the program director and the clinical coordinator work diligently to ensure that students are rotated through facilities in a fair and equitable manner. For example, as students progress through the program, they will be exposed to multiple hospital clinical settings, an outpatient clinical setting and complete a three week rotation through All Children’s Hospital.

5.4 Does the program review, evaluate, and maintain learning resources to assure the achievement of student learning outcomes and program goals?

Explanation:

Learning resources are media and reference materials utilized to support and enhance the educational program. If a print library is a primary resource, it must have a variety of materials published within the last five years. If computers are a primary learning resource, access must be assured. The JRCERT does not endorse any specific learning resource.

Rationale:

The review and maintenance of learning resources assure student knowledge of current and developing imaging/therapeutic technologies.

Compliance May Be Demonstrated by:

- Identifying available learning resources.
- Describing the procedure for review, evaluation, and maintenance of learning resources.

Possible Site Assessment Methods:

- Tour of learning facilities
- Review of learning resources
- Review of surveys
- Review of outcome assessment data
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

Learning resources play a vital role in providing students with an opportunity to meet their course objectives. As a result, the program evaluates its learning resources annually during Advisory Committee Meetings and Clinical Instructor/Faculty Meetings. An action plan is developed for every need that is identified. Within the last two years, the program has used this process to acquire both a c-arm machine and a portable x-ray machine for use in our labs. Refer to Exhibit 3 within the Self-Study Report to review sample minutes from these meetings.

5.5 Does the program review, evaluate, and maintain student services to assure the achievement of student learning outcomes and program goals?

Explanation:

Student services are provided at the discretion of the program; however, they should be sufficient to assure that student learning outcomes and program goals are met.

Rationale:

The provision of appropriate student services promotes student achievement.

Compliance May Be Demonstrated by:

Describing the correlation between available student services and the achievement of student learning outcomes and program goals.

Possible Site Assessment Methods:

- Review of surveys
- Review of meeting minutes
- Review of outcome assessment data
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The program determines its ability to assure the achievement of student learning outcomes and program goals via the use of graduate surveys, employer surveys, and student course evaluations. SPC provides the program with outstanding student services in the form of academic counselors, learning specialists and tutors just to name a few. Section 4 within the Master Plan of Education contains a copy of the college catalog and page 41 has a complete list of the student services that are available to Radiography students. The college catalog is also located online at <http://www.spcollege.edu/webcentral/catalog/>.

Summary for Standard Five

1. List the major strengths of **Standard Five**, in order of importance.
 - a. SPC provides adequate classroom space, offices, labs, student services, learning resources and funding to facilitate the program's ability to continue to meet its mission and goals.
 - b. The program's clinical affiliates provide a sufficient quantity and variety of procedures for students to have an opportunity to complete their clinical objectives in a timely manner.
 - c. The program is fortunate to have an Advisory Committee that is committed to maintaining a very high level of academic success.
 - d. Since the Radiography Program's inception, SPC has always been a staunch supporter. Even during these difficult economic times, we have recently been able to secure the funds necessary to purchase of a both c-arm machine and a portable x-ray machine.

2. List the major concerns of **Standard Five**, in order of importance.

The major concern for this standard is for the program to continue to ensure that students have adequate learning resources.

3. Provide the program's plan for addressing each concern identified.

The program will continue to use the Advisory Committee to evaluate its current learning resources and for future needs.

4. Describe any progress already achieved in addressing each concern.

Advisory Committee action plans have proven to be an excellent means for the program to ensure that adequate learning resources are made available for student use.

5. Describe any constraints in implementing improvements.

Securing adequate funding to purchase learning resources can be challenging but to date, it has not proven to be a roadblock for success.

Attach additional pages if necessary.

Standard Six:
Human Resources

6.1 Do all faculty and staff possess academic and professional qualifications appropriate for their assignments?

Explanation:

Faculty and staff must possess academic and professional qualifications appropriate for the assigned responsibility(ies).

Rationale:

Appropriate knowledge, proficiency, and certification (if appropriate) provide a foundation that promotes a sound educational environment.

Compliance May Be Demonstrated by:

Providing curricula vitae and copies of relevant professional credentials for individuals not identified in the program’s application for continuing accreditation (JRCERT Form 100).

Possible Site Assessment Methods:

- Review of published program materials
- Review of position descriptions for faculty and staff
- Interviews with faculty
- Interviews with clinical staff
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

The program director, clinical coordinator, adjunct faculty members and clinical instructors all possess the academic and professional qualifications appropriate for their job responsibilities. Form 102 has been completed for each of these individuals and they are located within Exhibit 7 of the Self-Study Report. A job description for each of these individuals is located alphabetically within Section 17 of the Master Plan of Education.

6.2 Are the responsibilities of administrative, faculty, and clinical staff delineated and do they support the fulfillment of the program’s mission and goals?

Explanation:

Administrative, faculty, and clinical staff responsibilities must be clearly delineated and must support the program’s mission and goals.

Rationale:

The clear delineation of responsibilities facilitates accountability.

Compliance May Be Demonstrated by:

Providing documentation that administrative, faculty, and clinical staff positions are clearly delineated and support the program’s mission and goals.

Possible Site Assessment Methods:

- Review of position descriptions
- Review of handbooks
- Interviews with faculty
- Interviews with clinical instructor(s)/clinical supervisor(s)
- Interviews with clinical staff
- Interviews with students

Assurance	Narrative		Yes	No
	X			

Section 17 of the Master Plan of Education contains the job descriptions of the program director, clinical coordinator, faculty members, clinical instructors and staff radiographers. Collectively, this group of radiography educators forms a cohesive team that diligently endeavors to produce graduates that are able to secure gainful employment as they matriculate into the workforce. Refer to Standard 1.4 for evidence regarding assurance that the program meets its mission and goals.

6.3 Does the program provide an adequate number of faculty to meet all educational, program, administrative, and accreditation requirements?

Explanation:

Faculty teaching loads must be consistent with those of comparable faculty in other health professions in the same institution. A clinical coordinator is required if the program has six or more clinical education settings or more than 30 students enrolled in the clinical component. A minimum of one clinical instructor/supervisor must be designated at each recognized clinical education setting. The radiography student to clinical staff ratio prior to student competency achievement must be 1:1. In radiation therapy the student to clinical staff ratio must always be 1:1.

Rationale:

An adequate number of faculty promotes sound educational practices.

Compliance May Be Demonstrated by:

Describing the adequacy of the number of faculty to meet identified accreditation requirements and program needs.

Possible Site Assessment Methods:

- Review of master plan of education
- Review of program’s staffing plan
- Review of position descriptions
- Interviews with faculty
- Interviews with clinical instructor(s)/clinical supervisor(s)
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The program director, full-time clinical coordinator, and adjunct faculty members all have contracts that follow SPC policy. Exhibit 11 of the Self-Study Report contains the procedure that SPC employs regarding faculty contracts and duty hours. Each clinical affiliate provides a clinical instructor. The clinical coordinator and the clinical instructors work diligently to ensure that all program policies are enforced including the policy which requires that there be a 1:1 qualified staff radiographer to student ratio maintained in clinic at all times.

6.4 Does the program provide support services to meet all educational, program, and administrative requirements?

Explanation:

Support services necessary to assist the program in meeting educational, program, and administrative requirements of the program must be provided.

Rationale:

Support services allow faculty to focus on academic and related organizational responsibilities.

Compliance May Be Demonstrated by:

Describing the availability and use of support services.

Possible Site Assessment Methods:

- Review of program’s staffing plan
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The college provides secretarial and computer hardware and software support that provides the means for the program to meet all educational, program and administrative requirements.

6.5 Does the program provide faculty with opportunities for continued professional development?

Explanation:

Opportunities that enhance and advance educational, technical, and professional knowledge must be available to program faculty.

Rationale:

Continued development results in more knowledgeable, competent, and proficient faculty.

Compliance May Be Demonstrated by:

Documenting that continued professional development opportunities are available to faculty.

Possible Site Assessment Methods:

- Review of institutional and program policies
- Review of program budget
- Review of evidence of faculty participation in professional development activities
- Interviews with administrative personnel
- Interviews with faculty

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The college has traditionally provided the financial means for the program director and clinical coordinator to attend at least one educational seminar per academic year. Staff and program development is strongly encouraged at SPC and this has allowed program personnel to attend multiple JRCERT accreditation seminars, the West Coast Educator’s Student/Educator Meeting in Orlando and the Atlanta Society’s Student/Educator Seminar in recent years.

6.6 Are didactic and clinical faculty performance regularly evaluated to assure instructional responsibilities are performed?

Explanation:

The performance of didactic and clinical faculty must be regularly evaluated.

Rationale:

Evaluation assures instructional responsibilities are performed and provides faculty and leadership with information to assess performance. Evaluation promotes proper educational methodology and increases program effectiveness.

Compliance May Be Demonstrated by:

Providing samples of evaluations of didactic and clinical faculty.

Possible Site Assessment Methods:

- Review of faculty evaluation materials
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

Students evaluate didactic and clinical faculty members at the conclusion of each semester. These evaluations then become part of an annual evaluation that is performed on each faculty member by the program director. The results of these annual evaluations are then forwarded to the campus provost for review. Refer to Exhibit 2 of the Self-Study Report for a sample of these evaluation tools.

Summary for Standard Six

1. List the major strengths of **Standard Six**, in order of importance.
 - a. Over the years, the program has benefited by maintaining a core of qualified administrators, full-time faculty members, adjunct faculty members and support staff.
 - b. The program has also benefited from the tremendous support that it receives from its clinical affiliates.
 - c. SPC encourages continued professional development by providing funding for the program director and clinical coordinator to attend at least one educational seminar each academic year.

2. List the major concerns of **Standard Six**, in order of importance.

Due to the tough economic conditions that currently exist, staff and program development funding has been reduced college-wide.

3. Provide the program's plan for addressing each concern identified.

To date, staff and program development funding has not been reduced to a point where opportunities to enrich the program by attending a seminar have been denied.

4. Describe any progress already achieved in addressing each concern.

None at this time.

5. Describe any constraints in implementing improvements.

None at this time.

Attach additional pages if necessary.

Standard Seven:
Students

7.1 Are the program’s and institution’s recruitment and admission practices consistent with published policies of the program and sponsoring institution?

Explanation:

In considering applicants for admission, the program must follow published policies and procedures. Program policies must assure timely, appropriate clinical placement for each admitted student.

Rationale:

Defined admission practices facilitate objective student selection. Programs have an obligation to provide timely, educationally valid clinical education experience to all students admitted to the program.

Compliance May Be Demonstrated by:

Providing program and institutional admission policies and describing the implementation of these policies. Describing how the program assures clinical placement of enrolled students.

Possible Site Assessment Methods:

- Review of published program materials
- List of enrolled students in relation to clinical assignments
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X	X			

The program works very closely with Health Education Center’s Student Services Department to ensure that SPC’s recruitment and admission policies are strictly followed. The SPC general admissions policy can be found on pages 12-32 of the college catalog that is located in Section 4 of the Master Plan of Education. The college catalog is also located online at <http://www.spcollege.edu/webcentral/catalog/>. The program specific selective admissions policy can be found on pages 149 and 150 of the college catalog. The selective admissions policy can also be located online at <http://www.spcollege.edu/Hec/news.htm>.

Our clinical sites have been approved by the JRCERT to hold up to 54 first and second year students combined. The program accepts no more than 24 students on an annual basis beginning each January.

7.2 Does the program assure that student recruitment and admission practices are non-discriminatory with respect to any legally protected status such as race, color, religion, gender, age, disability, and national origin?

Explanation:

If statistical information such as age, race, etc., is collected, it must be done in such a way that students' right to non-discriminatory practices is not violated.

Rationale:

Non-discriminatory practices assure applicants have equal opportunity for admission.

Compliance May Be Demonstrated by:

Describing how students' right to non-discriminatory admission practices is assured.

Possible Site Assessment Methods:

- Review of published program materials
- Review of students records
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The program carefully follows the faculty recruitment and employment practices established by St. Petersburg College regarding legally protected status such as race, color, religion, gender, age, disability, and national origin. The college's Equal Access/Equal Opportunity policy reads as follows:

“St. Petersburg College is dedicated to the concept of equal opportunity. The college will not discriminate on the basis of race, color, religion, sex, age, national origin, or marital status, or against any qualified individual with disabilities, in its employment practices or in the admission and treatment of students. Recognizing that sexual harassment constitutes discrimination on the basis of sex and violates this rule, the college will not tolerate such conduct. Should you experience such behavior, please contact Pamela Smith, the director of EA/EO at (727) 341-3261; by mail at P.O. Box 13489, St. Petersburg, FL 33733-3489; or by e-mail at ea_eo_director@spcollege.edu.”

The college's Equal Access/Equal Opportunity statement can be found throughout most materials that are produced by the college and it is made available to any interested party. Examples of the statements documentation can be found in the following:

The college catalog is located within Section 4 of the Master Plan of Education and page 2 contains the Equal Access/Equal Opportunity statement. The college catalog can also be found online at <http://www.spcollege.edu/webcentral/catalog/>.

The online adjunct teaching application can be found at <http://www.spcollege.edu/central/hr/adjunct.htm> and the Equal Access/Equal Opportunity statement can be found at the very top of the document.

Exhibit 4 of the Self-Study Report contains a pamphlet that the college employs to advertise the programs that are offered at the Health Education Center and it is entitled, "Health Education for the 21st Century." The Equal Access/Equal Opportunity statement can be found inside the front cover.

The college's Equal Access/Equal Opportunity web site is located at: <http://www.spcollege.edu/central/eao/>. It contains a plethora of policies and procedures that pertain to all types of discrimination and harassment.

7.3 Does the program make available to prospective students accurate information about admission policies, transfer credit, tuition and fees, refund policies, academic calendars, academic policies, graduation requirements, and student services?

Explanation:

The institutional and program policies must be published and distributed to program applicants.

Rationale:

Publication and distribution assure applicants are adequately informed.

Compliance May Be Demonstrated by:

Describing how program and institutional policies are made known to applicants.

Possible Site Assessment Methods:

- Review of institutional materials
- Review of published program materials
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The college catalog contains information that will satisfy this Standard and it is located in Section 4 of the Master Plan of Education. The college catalog is also located online at <http://www.spcollege.edu/webcentral/catalog/>. **Prospective students** have access to each of the following identified areas of interest by locating the corresponding page numbers within the college catalog.

Admissions Policies	Pages 12 to 32
Transfer Credit	Page 15
Tuition and Fees	Pages 67 to 72
Refund Policy	Page 72
Academic Calendar	Pages 4 and 5
Academic Policies	Pages 33 to 40
Graduation Requirements	Pages 98 to 103
Student Services	Page 41 to 44

7.4 Does the program make available to enrolled students accurate information about admission policies, transfer credit, tuition and fees, refund policies, academic calendars, academic policies, grading policies, graduation requirements, and student services?

Explanation:

The institutional and program policies must be published and distributed to students enrolled in the program. Policy changes must be made known to students in a timely fashion.

Rationale:

Making information available to enrolled students assures that they are adequately informed.

Compliance May Be Demonstrated by:

Describing how program and institutional policies are made known to enrolled students.

Possible Site Assessment Methods:

- Review of institutional materials
- Review of published program materials
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The college catalog contains information that will satisfy this Standard and it is located in Section 4 of the Master Plan of Education. The college catalog is also located online at <http://www.spcollege.edu/webcentral/catalog/>. ***Enrolled students*** have access to each of the following identified areas of interest by locating the corresponding page numbers within the college catalog.

Admissions Policies	Pages 12 to 32
Transfer Credit	Page 15
Tuition and Fees	Pages 67 to 72
Refund Policy	Page 72
Academic Calendar	Pages 4 and 5
Academic Policies	Pages 33 to 40
Graduation Requirements	Pages 98 to 103
Student Services	Page 41 to 44

7.5 Are enrolled students provided timely and supportive academic, behavioral, and clinical advisement?

Explanation:

Student advisement should be both formative and summative.

Rationale:

Appropriate advisement promotes student achievement.

Compliance May Be Demonstrated by:

- Describing procedures for advisement.
- Providing sample records of student advisement.

Possible Site Assessment Methods:

- Review of students records
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X	X			

SPC provides academic advisement to students prior to their matriculation into the program through the Health Education Center’s Student Services Department. Potential students have access to academic counselors that specialize in preparing students for matriculation into health related careers. This information can be found on pages 41 to 44 of the college catalog that is located in Section 4 of the Master Plan of Education. The college catalog is also located online at <http://www.spcollege.edu/webcentral/catalog/>.

The program provides academic, behavioral and clinical advisement following matriculation into the program in the following manner:

Academic Advisement: A syllabus is distributed to every student at the beginning of each didactic, lab and clinical course and it contains information regarding the grading policy that will be enforced. Sections 9, 10 and 11 of the Master Plan of Education contain all of the program’s syllabi. Quizzes and tests are administered periodically throughout each didactic course. These assessment tools are designed to provide feedback to the instructor as to how well the student is meeting the course objectives. Faculty members will then provide feedback to each student based on exam results. If deemed necessary, tutoring is available through the Health Education Center’s New Initiative Program on an as needed basis.

Behavioral Advisement: A syllabus is distributed to each student at the beginning of each didactic, lab and clinical course and it contains information regarding the student code of conduct that will be enforced. Sections 9, 10 and 11 of the Master Plan of Education contain all of the program's syllabi. Students are carefully monitored to ensure that they follow the code of conduct and counseling sessions are employed on an as needed basis to ensure compliance. Student behavior and professionalism are formally addressed during each practice check and competency examination, during the mid-semester evaluation and on the final clinical evaluation.

Clinical Advisement: A syllabus is distributed to each student at the beginning of each clinical course and it contains information regarding the grading policy that will be enforced. Section 11 of the Master Plan of Education contains all of the clinical course syllabi and objectives. All facets of student clinical progress are evaluated during each practice check and competency examination, during the mid-semester evaluation, and on the final clinical evaluation. Section 15 of the Master Plan of Education contains a copy of the practice check, competency and mid-semester student evaluation forms.

7.6 Does the program assure that student academic and clinical activities are educationally valid and support attainment of student learning outcomes?

Explanation:

Student activities must be supported by objectives consistent with the program’s stated outcomes. If students participate in clinical education during evenings and weekends, the program must have a plan for such assignments that includes objectives correlated with an assessment tool. Activities that have minimal educational value must be limited in scope.

Rationale:

Requiring educational validity for student activities assures that there is a meaningful plan for student education and prevents the use of students as replacements for employees.

Compliance May Be Demonstrated by:

Describing how academic and clinical activities support the attainment of student learning outcomes.

Possible Site Assessment Methods:

- Review of published program materials
- Review of student assignment records
- Interviews with faculty
- Interviews with clinical instructor(s)/clinical supervisor(s)
- Interviews with clinical staff
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The program ensures that student academic and clinical activities are educationally valid and support attainment of student learning outcomes by closely following the prescribed course objectives. The didactic, lab and clinical course objectives are located in Sections 9, 10 and 11 of the Master Plan of Education. All course objectives have been carefully designed to follow the content specifications of the ASRT’s Radiography Curriculum and the Content Specifications required by the ARRT.

In regards to the clinical component of the program, all activities are related to specific learning objectives outlined in each clinical syllabus. The clinical instructor and clinical coordinator work diligently to assign students to room rotations that will provide them with ample opportunities to satisfy their clinical objectives. Students are not required to complete evening and weekend rotations are part of their clinical experience.

7.7 Does the program assure the health and safety of students associated with educational activities through implemented policies and procedures in regard to workplace hazards, harassment, communicable diseases, and substance abuse?

Explanation:

Policies and procedures should meet federal and/or state requirements as applicable. Enrolled students must be informed of polices and procedures.

Rationale:

Appropriate policies and procedures assure that students are aware of and protected from workplace hazards, harassment, communicable disease, and substance abuse.

Compliance May Be Demonstrated by:

Providing program policies that safeguard the health and safety of students.

Possible Site Assessment Methods:

- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

Policies regarding the safety and health of students can be found on pages 9 and 10 of the student handbook that is located in Section 8 of the Master Plan of Education. Students must sign a form stating that they have received, read and understand all of the academic and clinical polices and procedures that the handbook contains. Students are also referred to a complete list of safety and health guidelines that are found on pages 52 to 66 of the SPC college catalog which is located in Section 4 of the Master Plan of Education. The college catalog is also located online at <http://www.spcollege.edu/webcentral/catalog/>. Any incident that may occur is immediately investigated by the program director and a course of action will be developed according to college, program, JRCERT and hospital protocol.

7.8 Does the program limit required clinical and academic involvement for students to not more than 40 hours per week?

Explanation:

Combined assigned clinical and academic hours cannot exceed forty (40) hours per week. Make-up time cannot be scheduled in a manner that would require more than forty (40) contact hours pre week unless such scheduling is voluntary on the student's part.

Rationale:

This limitation helps assure that students are treated ethically and do not take the place of professional staff.

Compliance May Be Demonstrated by:

Providing documentation that required student clinical and academic involvement in the program does not exceed forty (40) hours per week.

Possible Site Assessment Methods:

- Review of master plan of education
- Review of published program materials
- Review of student schedules
- Interviews with faculty
- Interviews with clinical instructor(s)/supervisor(s)
- Interviews with clinical staff
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X	X			

At no point during the program is a student required to complete more than 40 contact hours per week. As mentioned in Standard 3.5, the program length is measured in both credit hours and in contact hours (clock hours). The curriculum template contains a listing of all of the courses and corresponding credit hours offered in the program. It is published on page 151 of the college catalog that is located in Section 4 of the Master Plan of Education and online at <http://www.spcollege.edu/webcentral/catalog/>. The website for the program also contains the curriculum template and it is located at <http://www.spcollege.edu/Hec/rad/>. The actual contact hours for each course are located on pages 277 and 278 of the college catalog.

A summary of the total contact hours required per week for each semester of the program is as follows:

Semester	Contact Hours
I	13
II	29
III	31
IV	26
V	26
VI	27

Under extenuating circumstances i.e. pregnancy, illness, death in the family, a student may *volunteer* to exceed the 40 hour limit per week as a means to make-up their missed classroom and/or clinical time. However, this option is discouraged and rarely occurs as students generally prefer to protract their clinical make-up time over a period of weeks. Section 8 of the Master Plan of Education contains the student handbook and page 38 documents this program policy. If a student does not complete their missed time prior to the end of the semester, an incomplete grade is issued. The student cannot enroll in the next clinical course until all missed time has been made-up and the incomplete grade has been removed from his or her records.

Summary for Standard Seven

1. List the major strengths of **Standard Seven**, in order of importance.
 - a. SPC and program staff work diligently to ensure that students are treated in a fair and equitable manner as they progress through the established curriculum.
 - b. The clinical affiliates support and enforce all the program's policies and procedures.

2. List the major concerns of **Standard Seven**, in order of importance.

The major concern for this standard is to ensure that qualified applicants are given an opportunity to matriculate into the program in a timely and efficient manner.

3. Provide the program's plan for addressing each concern identified.

Up until three years ago, the program employed the use of rolling admissions to generate a list of qualified applicants for the program. In essence, students were admitted into the program on a first qualified, first served basis. In the past, this process had proven to be an effective means to retain potential students while they waited to matriculate into the program. However, interest in the program grew to a point where students would have to wait three or four years to enter. As a result, many potential students became discouraged and chose to follow an alternate career path. In response to this phenomenon, the program changed its admissions policy to a process called selective admissions. Here, students in the qualified applicant pool are ranked based on their GPA and the number of general education courses that they have completed. They are then admitted into the program on a most qualified, first served basis. If they are not selected, they must reapply the following year. Over the past three years, students have been admitted into the program by using a combination of the new selective admissions process and by students that were already on the waiting list from rolling admissions.

4. Describe any progress already achieved in addressing each concern.

This year marked the end of students that were accepted into the program via rolling admissions. The cohort of students that matriculates into the program in January of 2010 will be completely from the selective admissions process.

5. Describe any constraints in implementing improvements.

The efficacy of the selective admissions process will be closely monitored in order to ensure that it is an effective method for program admission.

Attach additional pages if necessary.

Standard Eight:
Radiation Safety

8.1 Does the program assure the health and safety of students associated with educational activities through the implementation of published policies and procedures that are in compliance with Nuclear Regulatory Commission regulations and state law as applicable?

Explanation:

The program must maintain and monitor student radiation exposure data. The program must have a protocol for incidents in which dose limits are exceeded.

Rationale:

Appropriate policies and procedures help assure that student radiation exposure is kept as low as reasonably achievable (ALARA).

Compliance May Be Demonstrated by:

- Providing copies of appropriate policies.
- Describing how the policies are made known to accepted and enrolled students.

Possible Site Assessment Methods:

- Review of published program materials
- Review of student records
- Review of student dosimetry reports
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X	X			

In regards to radiation protection and monitoring for student radiographers, the program strictly follows the policies and procedures of the Nuclear Regulatory Commission and the Florida Department of Health Bureau of Radiation Control. Refer to Exhibits 12 and 13 of the Self-Study Report for a detailed description of their policies and procedures.

Upon matriculation into the program, each student is issued a dosimeter and given very detailed instructions on its proper use. The Radiation Monitoring and Protection Policy can be found on pages 38 and 39 of the Student Handbook that is located within Section 8 of the Master Plan of Education. It can also be found on pages 38 and 39 of the Clinical Instructor Manual that is located within Section 14 of the Master Plan of Education. The dosimeters are issued on a quarterly basis and each student must review and initial the dosimetry report that is kept in the program director's office. Exhibit 14 of the Self-Study Report contains a sample dosimetry report with student initials. Students are required to provide written documentation to explain exposures that exceed 250 mrem/quarter and will receive counseling to help reduce future exposures. At graduation, each student is given a final cumulative dosimetry report that can be used by their future employers to track lifetime exposures.

8.2 Does the program have a published pregnancy policy that contains the following elements and is made known to accepted and enrolled female students?

- is consistent with applicable federal regulations and state laws
- includes notice of voluntary disclosure
- provides options for student continuance in the program

Explanation:

The policy must include appropriate information regarding radiation safety for the student and her fetus.

Rationale:

Appropriate radiation safety practices help assure that radiation exposure to the student and her fetus are kept as low as reasonably achievable. Options for continuance provide equitable opportunities for the student to complete the program.

Compliance May Be Demonstrated by:

- Providing a copy of the program’s pregnancy policy.
- Describing how the pregnancy policy is made known to accepted and enrolled students.

Possible Site Assessment Methods:

- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X	X			

Refer to pages 41 and 42 of the Student Handbook that is located in Section 8 of the Master Plan of Education and pages 41 and 42 of the Clinical Instructor Manual that is located in Section 14 of the Master Plan of Education to review the program’s pregnancy policy. Upon voluntarily disclosing her pregnancy status, the student is given a copy of the Nuclear Regulatory Guide 8.13: “Instruction Concerning Prenatal Radiation Exposure.” A copy of this guide can be found in Exhibit 12 of the Self-Study Report. She must also complete the following form that is located alphabetically in Section 15 of the Master Plan of Education:

Pregnancy Policy

Disclosure of pregnancy is voluntary but strongly encouraged. If the student chooses not to disclose their pregnancy, the program will not be able to modify their clinical experience. Please choose one of the following options regarding your pregnancy status:

- Due to my pregnancy, I would like to withdraw and take a one-year absence from the program. Provided that there is sufficient clinical space available, I would like to return to the program at the end of this period. This will be determined by the program director and clinical coordinator upon my return.
- Due to my pregnancy, I would like to withdraw from clinic and enter the Extended Program Option as outlined in the college catalog.
- I understand the effects of radiation on the human embryo and fetus including the fact that radiation has been found to be both mutagenic and carcinogenic. However, I would NOT like to declare my pregnancy status at this time but I will don a second abdominal dosimeter. Additionally, I would like to continue with an unmodified classroom and clinical work schedule.
- I understand the effects of radiation on the human embryo and fetus including the fact that radiation has been found to be both mutagenic and carcinogenic. I would like to declare my pregnancy and don a second abdominal dosimeter but, I do not wish to have my classroom or clinical schedule modified.
- I would like to declare my pregnancy with no classroom changes and a modified clinical experience consisting of the following:
 1. I will wear a second dosimeter over my abdominal region. I will ensure that the abdominal dosimeter will be worn under the lead apron if there is a need for me to don one.
 2. I will not participate in portable or fluoroscopic examinations during my first trimester.
 3. I can voluntarily perform fluoroscopic and portable examinations during my second and third trimesters. However, I understand that if I do not complete my clinical objectives that I will be given an incomplete grade but that I will also be given an opportunity to complete my objectives following my pregnancy.
- I have previously declared that I am pregnant and even though I am still pregnant, I would like to undeclare my pregnancy.

By signing below, I understand that I am responsible for completing all of the requirements for the A.S. Degree in Radiography and that it is likely that the duration of the program will exceed 24 months due to my pregnancy. Additionally, I have been given an opportunity to discuss this information with the program director.

_____	_____	_____
Student's Signature	Date	Anticipated Date of Delivery
_____	_____	
Program Director's Signature	Date	

8.3 Does the program assure that students use equipment and accessories, employ techniques, and perform procedures in accordance with accepted equipment use and radiation safety practices to minimize radiation exposure to patients, selves, and others?

Explanation:

Students must understand basic radiation safety practices prior to assignment to the clinical education setting. As students progress in the program, they must become knowledgeable of practices to minimize radiation exposure.

Rationale:

These practices assure radiation exposure to patients, students, and others is kept as low as reasonably achievable (ALARA).

Compliance May Be Demonstrated by:

Describing the curriculum sequence and content as it relates to preparing students for safe clinical practice.

Possible Site Assessment Methods:

- Review of program curriculum
- Review of student records
- Review of student dosimetry reports
- Interviews with faculty
- Interviews with clinical instructor(s)/supervisor(s)
- Interviews with clinical staff
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

Radiation protection techniques and strategies that can be employed to protect the student, patient, family members, and other healthcare workers are taught throughout the curriculum and specifically addressed in the courses located on the next page:

1. RTE 1000 Orientation to Radiography
2. RTE 1418 Principles of Imaging I
3. RTE 1418 L Principles of Imaging I Lab
4. RTE 1503 C Radiographic Procedures I
5. RTE 1503L Radiographic Procedures I Lab
6. RTE 1513C Radiographic Procedures II
7. RTE 1513L Radiographic Procedures II Lab
8. RTE 1458 Principles of Imaging II
9. RTE 1473L Radiographic Quality Assurance Lab
10. RTE 2385 Radiation Biology
11. RTE 1804L Radiographic Clinic I
12. RTE 1814L Radiographic Clinic II
13. RTE 2824L Radiographic Clinic III
14. RTE 2834L Radiographic Clinic IV
15. RTE 2844L Radiographic Clinic V

Additionally, students are specifically evaluated on their use of radiation protection techniques during simulations in their Procedures Lab courses and on each practice check and competency form that is completed during their five sections of Clinic. Refer to the Radiography Clinical Competency Evaluation and the Verification of Clinical Practice forms that are located alphabetically in Section 15 of the Master Plan of Education. For your convenience, each form is located on the next two pages. Note that item number 5 specifically evaluates their radiation protection techniques.

Verification of Clinical Practice

Student Name _____

Date _____

Clinical Affiliate _____

Procedure _____

Directions for the radiographer: This form is to be completed after you have directly observed the student perform the radiographic procedure stated above. The student must perform all of the following criteria at an acceptable skill level, independently and without major assistance according to the scale provided below.

- 3 = above average, above expected level, no suggestions for improvement
- 2 = average, expected level, some suggestions for improvement
- 1 = below average, substantial suggestions for improvement
- U = unacceptable, major errors during the exam

1. Infection Control Techniques	3	2	1	U
2. Radiographic Positioning Skills & Knowledge	3	2	1	U
3. Image Production & Equipment Operation	3	2	1	U
4. Efficiency & Organization	3	2	1	U
5. Radiation Protection Techniques	3	2	1	U
6. Critical Thinking & Independent Judgment	3	2	1	U
7. Patient Care & Empathy	3	2	1	U

Any score of "U" or two scores of below average will result in an automatic repeat of this procedure.

Decision: Pass _____

Repeat _____ (Please provide your reason(s) below.)

Comments: _____

I have read this evaluation and have been given an opportunity to provide verbal and written feedback on its content.

 Technologist's Signature

 Clinical Instructor's Signature

 Student's Signature

St. Petersburg College is dedicated to the concept of equal opportunity. The college will not discriminate on the basis of race, color, religion, sex, age, national origin or marital status, or against any qualified individual with disabilities, in its employment practices or in the admission and treatment of students. Recognizing that sexual harassment constitutes discrimination on the basis of sex and violates this rule, the college will not tolerate such conduct. Should you experience such behavior, please contact the director of EA/EO at (727) 341-3257 or (727) 341-3261 or by mail at PO Box 13489, St. Petersburg, FL 33733-3489.

Clinical Competency Evaluation

Student Name _____ Date _____

Clinical Affiliate _____ Procedure _____

DIRECTIONS: Evaluate the student on the eight criteria listed below and according to the following scale:
 3 = above average, above expected level, no suggestions for improvement
 2 = average, expected level, some suggestions for improvement
 1 = below average, substantial suggestions for improvement
 U = unacceptable, major error(s) during exam

1.	Infection Control Techniques	3	2	1	U
2.	Radiographic Positioning Skills & Knowledge	3	2	1	U
3.	Image Production & Equipment Operation	3	2	1	U
4.	Efficiency & Organization	3	2	1	U
5.	Radiation Protection Techniques	3	2	1	U
6.	Critical Thinking & Independent Judgment	3	2	1	U
7.	Patient Care & Empathy	3	2	1	U
8.	Image Evaluation	3	2	1	U

Any score of "U" or two scores below average results in automatic repeat of the competency.

Decision: Pass _____

Repeat _____ (Give reason(s) below.)

Comments: _____

I have read this evaluation and have been given an opportunity to provide verbal and written comments on its content.

Student's signature

Evaluator's signature

8.4 Are all radiation therapy procedures performed under the direct supervision of a qualified practitioner?

Explanation:

Radiation therapy procedures requiring direct supervision include brachytherapy, simulation, and treatment. The JRCERT defines direct supervision as supervision by a qualified practitioner who: reviews the procedure in relation to the student's achievement; evaluates the condition of the patient in relation to the student's knowledge; is present during the conduct of the procedure; and reviews and approves the procedure.

Rationale:

Direct supervision assures patient safety and proper educational practices.

Compliance May Be Demonstrated by:

Describing how the program's direct supervision requirement is monitored and enforced in the clinical education setting.

Possible Site Assessment Methods:

- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with clinical supervisor(s)
- Interviews with clinical staff
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

Not Applicable

8.5 Are all medical imaging procedures performed under the direct supervision of a qualified practitioner until a radiography student achieves competency?

Explanation:

The JRCERT defines direct supervision as student supervision by a qualified practitioner who: reviews the procedure in relation to the student's achievement; evaluates the condition of the patient in relation to the student's knowledge; is present during the conduct of the procedure; and reviews and approves the procedure and/or image. Students must be directly supervised until competency is achieved.

Rationale:

Direct supervision assures patient safety and proper educational practices.

Compliance May Be Demonstrated by:

Describing how the program's direct supervision requirement is monitored and enforced in the clinical education setting.

Possible Site Assessment Methods:

- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The program employs several different means to ensure that a qualified practitioner provides *direct supervision* of examinations performed by students that do not have a competency. To begin with, all staff radiographers that work with students must complete the Clinical Policies and Procedures Training Tutorial. Refer to Section 16 of the Master Plan of Education to review the contents of the tutorial.

In regards to student training, the direct supervision policy is explained on pages 32 to 34 of the Student Handbook that is located in Section 8 of the Master Plan of Education. Each student is required to sign a document prior to entering the clinical component of the program that states that they have read, understand and will abide by the contents of the Student Handbook. Furthermore, during the orientation for each clinical rotation, the clinical instructor reviews the direct supervision policy with each student. Refer to item #5 of the document entitled, “A Team Approach to Orientation” that is located alphabetically in Section 15 of the Master Plan of Education.

Finally, the information located below is posted at each clinical site to ensure that any interested parties are able to review the program’s policy regarding the direct supervision of students.

1. **Direct Supervision-** “Student supervision by a qualified practitioner who reviews the procedure in relation to the student’s achievement, evaluates the condition of the patient in relation to the student’s knowledge, is present during the procedure and reviews and approves the procedure.”

Implications- A radiographer must always be present during the procedure until a competency has been achieved at which time the guidelines for indirect supervision would apply.

2. **Indirect Supervision-** “Student supervision by a qualified practitioner who is immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the physical presence of a qualified practitioner adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use.”

Implications- This rule states that a student may do procedures that they have achieved a competency in independently as long as a radiographer is “immediately available” to lend assistance. As a rule-of-thumb, if the student cannot yell for help and be heard, then the guidelines for indirect supervision have not been met. Therefore, students will not be allowed to leave the department to do a portable examination without the assistance of a radiographer because the radiographer must be “immediately available” to provide assistance at all times. This rule also applies to students rotating through the emergency room and operating room.

3. “A qualified radiographer must always be present during the student performance of a repeat of any unsatisfactory radiograph.”

Implications- Students must have direct supervision for any repeat of an unsatisfactory radiograph. The radiographer will be required to complete any additional repeats beyond the second attempt.

4. Students will employ appropriate radiation protection strategies at all times and this includes wearing lead aprons during all portable procedures.

Following some discussion with the clinical instructors and program faculty, it was determined that the penalty for students who are not in compliance with the new guidelines will be as follows:

1. On the first infraction, the student will lose a competency in whatever exam they were performing.
2. On the second infraction, the student will lose a letter grade for the current section of clinic that they are enrolled.
3. On the third infraction, the student will receive an “F” and be immediately withdrawn from the current section of clinic that they are enrolled. The student will then have to follow the readmission guidelines that are outlined in the student handbook.

8.6 Are all medical imaging procedures performed under the indirect supervision of a qualified practitioner after a radiography student achieves competency?

Explanation:

For radiography, the JRCERT defines indirect supervision as that supervision provided by a qualified practitioner immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the physical presence of a qualified practitioner adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use.

Rationale:

Indirect supervision promotes patient safety and proper educational practices.

Compliance May Be Demonstrated by:

Describing how the program’s indirect supervision requirement is monitored and enforced in the clinical education setting.

Possible Site Assessment Methods:

- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The program employs several different means to ensure that a qualified practitioner provides *indirect supervision* of examinations performed by students that have a competency. To begin with, all staff radiographers that work with students must complete the Clinical Policies and Procedures Training Tutorial. Refer to Section 16 of the Master Plan of Education to review the contents of the tutorial.

In regards to student training, the indirect supervision policy is explained on pages 32 to 34 of the Student Handbook that is located in Section 8 of the Master Plan of Education. Each student is required to sign a document prior to entering the clinical component of the program that states that they have read, understand and will abide by the contents of the Student Handbook. Furthermore, during the orientation for each clinical rotation, the clinical instructor reviews the indirect supervision policy with each student. Refer to item #5 of the document entitled, "A Team Approach to Orientation" that is located alphabetically in Section 15 of the Master Plan of Education.

Finally, the information located below is posted at each clinical site to ensure that any interested parties are able to review the program's policy regarding the indirect supervision of students.

1. **Direct Supervision-** "Student supervision by a qualified practitioner who reviews the procedure in relation to the student's achievement, evaluates the condition of the patient in relation to the student's knowledge, is present during the procedure and reviews and approves the procedure."

Implications- A radiographer must always be present during the procedure until a competency has been achieved at which time the guidelines for indirect supervision would apply.

2. **Indirect Supervision-** "Student supervision by a qualified practitioner who is immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the physical presence of a qualified practitioner adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use."

Implications- This rule states that a student may do procedures that they have achieved a competency in independently as long as a radiographer is "immediately available" to lend assistance. As a rule-of-thumb, if the student cannot yell for help and be heard, then the guidelines for indirect supervision have not been met. Therefore, students will not be allowed to leave the department to do a portable examination without the assistance of a radiographer because the radiographer must be "immediately available" to provide assistance at all times. This rule also applies to students rotating through the emergency room and operating room.

3. "A qualified radiographer must always be present during the student performance of a repeat of any unsatisfactory radiograph."

Implications- Students must have direct supervision for any repeat of an unsatisfactory radiograph. The radiographer will be required to complete any additional repeats beyond the second attempt.

4. Students will employ appropriate radiation protection strategies at all times and this includes wearing lead aprons during all portable procedures.

Following some discussion with the clinical instructors and program faculty, it was determined that the penalty for students who are not in compliance with the new guidelines will be as follows:

1. On the first infraction, the student will lose a competency in whatever exam they were performing.
2. On the second infraction, the student will lose a letter grade for the current section of clinic that they are enrolled.
3. On the third infraction, the student will receive an "F" and be immediately withdrawn from the current section of clinic that they are enrolled. The student will then have to follow the readmission guidelines that are outlined in the student handbook.

8.7 Are all unsatisfactory radiographs repeated by students performed under the direct supervision of a qualified practitioner?

Explanation:

A qualified practitioner must be present during the conduct of a repeat radiograph.

Rationale:

The presence of a qualified radiographer during the repeat of an unsatisfactory radiograph assures patient safety and proper educational practices.

Compliance May Be Demonstrated by:

Describing how the program’s direct supervision requirement for repeat radiographs is monitored and enforced in the clinical education setting.

Possible Site Assessment Methods:

- Review of published program materials
- Review of student records
- Interviews with faculty
- Interviews with clinical instructor(s)
- Interviews with clinical staff
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

The program employs several different means to ensure that a qualified practitioner provides *direct supervision* of repeated examinations performed by students that already have a competency. To begin with, all staff radiographers that work with students must complete the Clinical Policies and Procedures training tutorial. Refer to Section 16 of the Master Plan of Education to review the contents of the tutorial.

In regards to student training, the repeat policy is explained on pages 32 to 34 of the Student Handbook that is located in Section 8 of the Master Plan of Education. Each student is required to sign a document prior to entering the clinical component of the program that states that they have read, understand and will abide by the contents of the Student Handbook. Furthermore, during the orientation for each clinical rotation, the clinical instructor reviews the repeat policy with each student. Refer to item #5 of the document entitled, “A Team Approach to Orientation” that is located alphabetically in Section 15 of the Master Plan of Education.

Finally, the document located below is posted at each clinical site to ensure that any interested parties are able to review the program’s repeat policy.

1. **Direct Supervision-** “Student supervision by a qualified practitioner who reviews the procedure in relation to the student’s achievement, evaluates the condition of the patient in relation to the student’s knowledge, is present during the procedure and reviews and approves the procedure.”

Implications- A radiographer must always be present during the procedure until a competency has been achieved at which time the guidelines for indirect supervision would apply.

2. **Indirect Supervision-** “Student supervision by a qualified practitioner who is immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the physical presence of a qualified practitioner adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use.”

Implications- This rule states that a student may do procedures that they have achieved a competency in independently as long as a radiographer is “immediately available” to lend assistance. As a rule-of-thumb, if the student cannot yell for help and be heard, then the guidelines for indirect supervision have not been met. Therefore, students will not be allowed to leave the department to do a portable examination without the assistance of a radiographer because the radiographer must be “immediately available” to provide assistance at all times. This rule also applies to students rotating through the emergency room and operating room.

3. “A qualified radiographer must always be present during the student performance of a repeat of any unsatisfactory radiograph.”

Implications- Students must have direct supervision for any repeat of an unsatisfactory radiograph. The radiographer will be required to complete any additional repeats beyond the second attempt.

4. Students will employ appropriate radiation protection strategies at all times and this includes wearing lead aprons during all portable procedures.

Following some discussion with the clinical instructors and program faculty, it was determined that the penalty for students who are not in compliance with the new guidelines will be as follows:

1. On the first infraction, the student will lose a competency in whatever exam they were performing.
2. On the second infraction, the student will lose a letter grade for the current section of clinic that they are enrolled.
3. On the third infraction, the student will receive an “F” and be immediately withdrawn from the current section of clinic that they are enrolled. The student will then have to follow the readmission guidelines that are outlined in the student handbook.

8.8 Are all clinical education settings and energized laboratories in compliance with applicable state and federal radiation safety laws?

Explanation:

Records of compliance (TJC, state, or equivalent) must be maintained for clinical education settings and energized laboratories.

Rationale:

Compliance with applicable laws promotes a safe environment for patients, students, and others.

Compliance May Be Demonstrated by:

Providing certificates and/or letters documenting learning environments' compliance with state and federal radiation safety laws.

Possible Site Assessment Methods:

- Review of certificates and/or letters

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

Exhibit 16 of the Self-Study Report contains the radiation safety certificates for the program's energized labs and all of the clinical affiliates. These certificates document compliance with state and federal radiation safety laws.

Summary for Standard Eight

1. List the major strengths of **Standard Eight**, in order of importance.
 - a. The hospital/clinic training tutorial that is employed to ensure that the staff radiographers understand the program policies regarding radiation protections has proven to be an effective means to ensure compliance.
 - b. The student handbook clearly states the student's clinical grade depends on their ability to remain in compliance with the radiation protection policy at all times.

2. List the major concerns of **Standard Eight**, in order of importance.

The onus is ultimately on the program to ensure that the hospital/clinic staff and the students are in compliance with the radiation protection policy.

3. Provide the program's plan for addressing each concern identified.
 - a. The program will continue to monitor the hospital/clinic staff and the students to ensure that the guidelines for the radiation protection policy are followed at all times.
 - b. Students will continue to be evaluated on their radiation protection strategies each time they attempt a practice check or a competency examination during their clinical rotations.

4. Describe any progress already achieved in addressing each concern.

Up to this point, the tutorials for the staff and the student evaluations have proven to be a successful strategy to ensure compliance.

5. Describe any constraints in implementing improvements.

The program continues to experience tremendous support from its clinical affiliates regarding the radiation protection policy. However, constant monitoring by the clinical coordinator, clinical faculty members and clinical instructors is imperative to ensure continued compliance.

Attach additional pages if necessary.

Standard Nine:
Fiscal Responsibility

9.1 Does the program have sufficient on-going financial resources to support the program's mission and goals?

Explanation:

The sponsoring institution must demonstrate on-going financial commitment to the program and its students by providing adequate human and physical resources.

Rationale:

Adequate on-going funding is necessary to accomplish the program's stated mission and goals and to support student learning.

Compliance May Be Demonstrated by:

Providing copies of the program's budget and/or expenditure records and describing the adequacy of financial resources.

Possible Site Assessment Methods:

- Review of program budget
- Interviews with administrative personnel
- Interviews with faculty

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X	X			

St. Petersburg College provides the financial support that enables the Radiography Program to meet its mission statement and goals. Refer to Exhibit 17 of the Self-Study Report to review the program's budget for the 2009/10 academic year. In regards to personnel, the college has ensured that the program maintains adequate secretarial support, a full-time program director, a full-time faculty member, and enough adjunct faculty members to support the didactic and clinical curriculum. The program also has ample office and classroom space, three energized x-ray labs, a c-arm machine, a portable x-ray machine, a 4-station computer lab and access to a 26-station computer lab for testing. Furthermore, the program budget contains funds that are encumbered to provide the educational materials and supplies that are required over the course of the academic year. These funds may be used to purchase such things as supplies for the energized labs, new computer hardware and/or software, and office supplies.

9.2 Does the program director have an opportunity to participate in the budget planning process?

Explanation:

An opportunity must exist for the program director to have input into budgetary decisions related to the program.

Rationale:

As the individual responsible for the overall effectiveness of the program, the program director is responsible for assuring that there are sufficient human and physical resources to accomplish the program’s mission and goals.

Compliance May Be Demonstrated by:

Describing the opportunities for program director participation in the budget planning process.

Possible Site Assessment Methods:

- Interviews with program and institutional officials

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
X				

The program director works very closely with the provost of Health Education Center to ensure that the program has adequate financial resources. This collaborative effort has proven to be an effective means to ensure that the program has adequate funds to meet the needs of its students and the community. Refer to Exhibit 17 of the Self-Study Report to review the program’s budget for the 2009/10 academic year.

9.3 For those institutions and programs for which the JRCERT or a mixed accreditor serves as gatekeeper for Title IV financial aid, does the institution and/or program maintain compliance with USDE policies and procedures?

Explanation:

The program must comply with USDE requirements to participate in Title IV financial aid.

Rationale:

If the program has elected to participate in Title IV financial aid and the JRCERT is identified as the program’s mixed accreditor, the JRCERT serves as the program’s gatekeeper and is responsible for oversight of the distribution, record keeping, and repayment of Title IV financial aid.

Compliance May Be Demonstrated by:

Providing evidence that Title IV financial aid is managed and distributed according to the U.S. Department of Education (USDE) regulations.

Possible Site Assessment Methods:

- Review of records
- Interviews with administrative personnel
- Interviews with faculty
- Interviews with students

Level of Effort		Attach Additional Pages If Necessary	Has Program Met Objective? <i>(for site visitor use only)</i>	
Assurance	Narrative		Yes	No
	X			

Not Applicable

Summary for Standard Nine

1. List the major strengths of **Standard Nine**, in order of importance.

Since the program's inception, St. Petersburg College has provided the financial resources required for the program to meet its mission statement and goals.

2. List the major concerns of **Standard Nine**, in order of importance.

The college administration continues to be very supportive of the program and currently there are no major budgetary concerns that would impact the current success of the program.

3. Provide the program's plan for addressing each concern identified.

None at this time.

4. Describe any progress already achieved in addressing each concern.

Not applicable.

5. Describe any constraints in implementing improvements.

None at this time.

Attach additional pages if necessary.