

**2021 ANNUAL ACADEMIC ASSESSMENT REPORT FORM
(Due October 15 to the dean)**

The Faculty Senate Academic Assessment Committee (AAC) is committed to a vision of assessment that leads to continuous program improvements and benefits students. Annual assessment reporting informs decision making and resource allocation aimed at improving student learning and success. It also enables the AAC to analyze assessment across the institution and to respond to UA System, Board of Regents, legislative, and Northwest Commission on Colleges and Universities (NWCCU) requests. We thank you for your continued support of and participation in this annual activity.

Starting in Spring 2021, UAA is moving to one academic assessment reporting mechanism. The below form merges and streamlines the former Annual Academic Assessment Survey and the Annual Academic Assessment Report. It also incorporates questions about how academic programs contribute to student achievement of institutional core competencies and to student success.

This annual report will be due to the dean on October 15. Programs with suspended admissions and new programs in the first year of implementation are not required to complete this form.

These reports are public documents and will be posted on the assessment website. Responses are to be narrative only, and must be ADA and FERPA compliant. Do not embed any links, including to webpages or other documents. To be FERPA compliant, do not include the names of any current or former students. Rather, use statements such as, "In AY21 four program graduates were accepted to graduate programs in the field." Programs with specialized accreditation or other external recognitions must comply with restrictions regarding what can be published, as per the accreditor or external organization. Do not include appendices. Appendices to this form will not be accepted.

The form uses narrative, text, and drop-down boxes. Narrative boxes have a character limit, which includes spaces. When using text and drop-down boxes, if you want to undo an answer, press "Control-Z" or "Command-Z."

For technical assistance with this form, email Academic Affairs (uaa.oaa@alaska.edu).

PROGRAM SECTION (Due to the dean on October 15)

After completing the Program Section, the program should email this form to the dean, with a copy to the appropriate community campus director(s) if the program is delivered on a community campus.

Submission date: 10/15/2021

Submitted by: Kathryn M. Slagle; Term Assistant Professor, Radiologic Technology Program Director;
kslagle@alaska.edu

Program(s) covered in this report: Radiologic Technology AAS
(Programs with suspended admissions and new programs in the first year of implementation are not required to complete this form.)

If you selected “Other” above, please identify. *(100 characters or less)*

College: College of Health

Campuses where the program(s) is delivered: Anchorage KOD KPC MSC PWSC

Specialized accrediting agency (if applicable): Select Specialized Accrediting Agency or N/A.

If explanation is necessary, such as only some of the certificates and degrees are covered by the specialized accreditation, briefly describe:

INSTITUTIONAL STUDENT LEARNING CORE COMPETENCIES

In 2020, UAA launched a consensus-based, deliberative process to identify the key skillsets that help students achieve academic and post-graduation success. After a year-long process that included students, faculty, staff, administrators, alumni, and employers, the UAA community identified four “core competencies” at the heart of a quality UAA education. Students develop mastery of these competencies through curricular (e.g., courses), co-curricular (e.g., internships, conferences), and extra-curricular (e.g., student clubs) learning experiences.

After the stakeholder-based process in AY20, UAA conducted a pilot project focusing on the core competency of Personal, Professional, and Community Responsibility (PPCR). This decision was based on input from the 2020 Annual Academic Assessment Retreat.

Question #1 below is designed to engage program faculty in thinking about how they can or already do promote student learning in this core competency.

1. Personal, Professional, and Community Responsibility: The knowledge and skills necessary to promote personal flourishing, professional excellence, and community engagement.

- **What would you hope a student would say if asked where in your program or support service they had the opportunity to develop proficiency in this Core Competency? (500 characters or less)**

Students would recognize program support in this core competency in RADT A111 Introduction to Radiologic Technology and Patient Care, RADT A272 Ethics and Quality

Control and all four clinical practicum courses. All courses provide some level of review and practical application of patient care concepts of professionalism as a health care provider and the overall responsibility of taking care of patients.

- **Do you have an example that could be a model for the university of an intentionally designed course, assignment, or activity that showcases the student learning in this core competency?** Yes No

If yes, please briefly describe. (500 characters or less)

In RADT A272, there are multiple discussion board and journaling assignments on ethics in personal, professional and community responsibility. In some assignment's students discuss how a UAA Core Competencies "fits" into the learning unit for the week. In clinical practicum courses, students complete program competencies and evaluations and are evaluated on their professionalism as a health care provider and their overall responsibility of taking care of patients.

- **Do you have any ideas about where your program or the university might develop other intentionally designed opportunities for students to develop proficiency in this core competency?** Yes No

If yes, please briefly describe. (500 characters or less)

PROGRAM STUDENT LEARNING OUTCOMES

2. **Please list the Program Student Learning Outcomes your program assessed in AY21. For each outcome, indicate one of the following: Exceeded faculty expectations, Met faculty expectations, or Did not meet faculty expectations.**

Example: Communicate effectively in a variety of contexts and formats – Exceeded faculty expectations.

Demonstrate proficiency and competency in the performance of radiographic procedures utilizing proper exposure techniques - met faculty expectations

Apply entry-level knowledge and skills as a radiologic technologist - met faculty expectations.

Demonstrate a professional attitude and proper ethical behavior in clinic settings -met faculty expectations.

Utilize effective oral and written communication with patients, physicians, and other healthcare providers -met faculty expectations.

3. **Describe your assessment process in AY21 for these program student learning outcomes, including the collection of data, analysis of data, and faculty (and other, e.g., advisory board) conversations around the findings. (750 characters or less)**

Six assessment tools are used to collect data. Four of the six are from the American Registry of Radiologic Technologists (ARRT). ARRT data is post-graduation and collected in the summer. Two of

the six are program tools. Data collection occurred over four semesters through the submission of required student clinical forms. The Program Director and Clinical Coordinator analyzed the data and provided an annual report to the advisory board spring 2021. This report was up to date with program specific tools, but ARRT data was only gathered through the class of 2020. ARRT reports are based on a calendar year not an academic year. Recommendations of the advisory board are discussed later in #4 and #5.

4. What are the findings and what do they tell the faculty about student learning in your program? (750 characters or less)

The program met bench marks for all SLO's. ARRT exam scores report a five-year median score of 85% and 85% first time pass rate. 91 graduates have applied for the exam and 86 have passed since 2016 for an overall pass rate of 96%. From the student perspective, overall program support for all SLO's is above average or excellent. End of program student clinical surveys indicate areas that need improvement. Areas of improvement in the support of SLO's from a clinical standpoint include SLO#1, SLO#3 and SLO#4. Faculty is unsure of why there is a difference between student evaluation of the program overall and the clinical evaluation. From the clinical site perspective, students are above average or excellent in all SLO's.

5. Based on the findings, did the faculty make any recommendations for changes to improve student achievement of the program student learning outcomes? Please describe the recommended action, what improvement in student learning the program hopes to see with this change, the proposed timeline, and how the program will know if the change has worked. If no recommendations for changes were made, please explain that decision. (750 Characters or less)

From the student perspective, issues were with program and lab management. Faculty recommended an end of the first-year survey to find and resolve student issues earlier. Lab instructors updated teaching methods with a better mix of instructor driven vs independent assignments, film critique and critical thinking exercises. Advisory board members recommended the expansion of ethical issues with more student reflection in discussion boards and journaling. A second text on Legal and Ethical Issues in Health Care has also been added to the program. Data will be assessed on all changes in AY 22/23. With these changes, faculty hope to better prepare students before going and support them better during clinical.

PROGRAM IMPROVEMENTS AND ASSESSING IMPACT ON STUDENT LEARNING

6. In the past academic year, how did your program use the results of previous assessment cycles to make changes intended to improve student achievement of the program student learning outcomes? Please check all that apply.

- Course curriculum changes
- Course prerequisite changes
- Changes in teaching methods

- Changes in advising
- Degree requirement changes
- Degree course sequencing
- Course enrollment changes (e.g., course capacity, grading structure [pass/fail, A-F])
- Changes in program policies/procedures
- Changes to Program Student Learning Outcomes (PSLOs)
- College-wide initiatives (e.g., High Impact Practices)
- Faculty, staff, student development
- Other
- No changes were implemented in AY21.

If you checked “Other” above, please describe. (100 characters or less)

- 7. Do you have any information about how well these or other past improvements are working? Are they achieving their intended goals? Please include any data or assessment results that help you demonstrate this. (750 characters or less)**

Working with lab instructors on improvements has been an ongoing project for a few years. Students have reported an 80% rating of program support of SLO’s in clinical for a few years (see question 4 and 5 of this document). It has not improved but it has not gotten worse. Interactive online modules have been purchased by the program and as noted above, RADT A131L, A132L and A133L instructors have updated teaching methods to a better mix of instructor driven vs independent student assignments, direct patient care exercises, film critique and critical thinking exercises. Smaller lab sizes have also been incorporated into the program. Assessment of AY 22/23 will hopefully reflect an improvement.

STUDENT SUCCESS AND THE CLOSING OF EQUITY GAPS

Programs are not required to respond to question #8 below for their report due on October 15, 2021. Question #8 will be required for the next round and moving forward.

- 8. Respond to at least one of the following metrics. Student success depends on many aspects of a student’s experience. On the academic program level, it can relate to correct placement, course sequencing, standardized pre-requisites, the intentional use of high impact practices, proactive advising, course scheduling practices, etc. UAA is using the following two metrics in its cyclical Program Review process, as well as in its reaffirmation of accreditation process. These data are included in the most recent IR-Reports Program Review dashboard. Please review these data for your program, note any equity gaps, and describe steps you are taking or plan to take to close those gaps.**

Metric	Definition	Rationale
JUNIOR GRADUATION RATE - BACCALAUREATE	The percentage of students who graduate with a bachelor's degree within four years of first reaching junior class status (60 credits). <i>Data source: RPTP end-of-term freeze files. Disaggregate as per accreditation.</i>	Junior graduation rate (after 60 credits) can reflect a department's success in helping students complete their degrees. Within their first 60 credits, students typically focus on completing GERs and often switch majors. Tracking how long it takes students to complete their degrees after 60 credits, when many students have likely committed to a specific major, can provide actionable information for departments.
COURSE PASS RATES BY COURSE LEVEL (Undergraduate lower-division, undergraduate upper-division, and graduate).	The percentage of students who receive a passing grade (A, B, C, P) for all undergraduate students and (A, B, P) for graduate students in a course offered by a program compared to the same rate calculated for all courses at that level. Based on a 5-year trend. Included in the denominator for undergraduate courses are the grades D, F, W, I, NP, NB. Included in the denominator for graduate level are the grades C, D, F, W, I, NP, NB. Discipline acts as a proxy for a program. <i>Data source: RPTP end-of-term freeze files. Disaggregate as per accreditation.</i>	Low pass rates are one critical way to identify courses that are barriers to student success and degree completion. Failing key courses correlates with low retention and more major switching. Mitigation strategies can be internal or external to the course itself, including, among other things, the use of high-impact pedagogical practices, appropriate placement, course sequencing, tutoring, and other means to ensure student success within a particular course. This metric and the disaggregation of the data can inform planning, decision making, and the allocation of resources to programs and services designed to mitigate gaps in achievement and equity.

9. Do you have any examples of post-graduate success you want to highlight? For example, major scholarships, the percent of students who pass licensure examinations, the percent of students accepted to graduate programs, the percent in post-graduation employment in the field or a related field. (750 characters or less)

DEAN SECTION (Due to the program on January 15)

After completing the Dean Section and signing it, the dean should email this form to the program, and copy uaa_ooo@alaska.edu for posting. If the program is delivered on one or more community campus, the dean should consult with the appropriate community campus director(s) on the response and copy the appropriate community campus director(s) when emailing the response to the program.

1. Based on the program's responses above, what guidance and support do you have for the program moving forward? Is there a particular area the program should focus on? (750 characters or less)

It is appreciated that although the ultimate outcome of high pass rates on national board exams is being consistently achieved, the program has also used student surveys to evaluate their perceptions and experience through the program and used that feedback to implement changes. Given that board exam pass rates and clinician evaluations of students are high, students appear to be achieving core learning outcomes, but the program changes being implemented may improve their overall perception and confidence. I support the program's inclusion of more formative assessment measures that allow changes to be made, as appropriate, during a given cohort's program of study. I am available for any support needed as changes are implemented and tracked.

2. Is there something the program is doing particularly well in terms of its processes for the assessment and improvement of student learning, including the closing of equity gaps, that might serve as a model for other programs? If yes, please explain. You may skip this question. (750 characters or less)

Dean's signature:



Date: 12/23/2021