2022 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 moved 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 AY22 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."

Note: To ensure the fillable fields function correctly, the form must be completed in Microsoft Word. It will not function properly in Google Docs. Programs that wish to record collaborative discussion of the report might consider creating a separate document to take notes, before entering final responses in the official fillable form.

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: 10/14/2022

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: Select College/School.

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 is phasing in the integration of the core competencies into ongoing processes, including program student learning outcomes assessment. Personal, Professional, and Community Responsibility (PPCR) was integrated into the AY21 Annual Academic Assessment Report. The AY22 Annual Academic Assessment Report now also integrates Effective Communication.

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

Academic Affairs
UNIVERSITY *of* ALASKA ANCHORAGE

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

    - **If last year you provided your program's current or planned example of an intentionally designed course, assignment, or activity that develops and showcases the student learning in this core competency, please discuss that implementation and any observations you have regarding how well it is working. *(500 characters or less)***
    Students seem to understand the importance of this competency. When selecting this Core Competency as an objective of a specific learning unit, students reasons included: important in our professional and community responsibility to understand ethics of our profession and to care for our community in a moral and compassionate way; as future health care workers we have a responsibility to…treat everyone, including ourselves, fairly with dignity and respect.

    - **If last year you *did not* identify a current or planned example of an intentionally designed course, assignment, or activity that provides students the opportunity to develop and showcase this core competency, please identify one now. *(500 characters or less)***

    B. *Effective Communication: The knowledge and skills necessary to engage in effective communication in diverse contexts and formats.*

    - **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)***
    Part of an answer from RADT A272: they are all interconnected and effective communication is the most important…critical thinking means collaboration…and arrives at a solution which must be effectively conveyed before it can be adopted. Intercultural fluency is wholly dependent on effective communication. The ability for diverse populations to express their personal opinions and concerns in the shaping of public decisions is paramount

    - **Provide your program's current or planned example(s) of an intentionally designed course, assignment, or activity that showcases the student learning in this core competency. *(500 characters or less)***
    Students are taught and also practice in RADT A111 how to communicate with diverse populations, including cultural diversity as well as age-appropriate communication. Students then get first hand exposure and experience communicating in their clinical rotations (RADT 195A, 195B, 295A, and 295B). Students build on this competency throughout their clinical experiences and are assessed formally twice a semester by their clinical educators.

PROGRAM STUDENT LEARNING OUTCOMES

2. **Please list the Program Student Learning Outcomes your program assessed in AY22. 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.- Exceeded faculty expectations.

   Apply entry-level knowledge and skills as a radiologic technologist.- Exceeded 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 AY22 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. ARRT reports are based on a calendar year not an academic year.
   The Program Director and Clinical Coordinator analyzed the data.

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

   What faculty have noticed is that students rate the program higher in support SLO#3 and SLO#4. vs. clinical site support.
   The program clinical coordinator has started to require a mid-term in person meeting with each student regarding their clinical evaluations, rotation and future needs for clinicals. In these meetings a decision on how the clinical site is supporting these two SLO's will be included. When applicable, students will also be asked questions related to these SLO's in RADT A272.
   Data collected will be noted in the academic assessment of AY 2022 2023.

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)*

    As noted above, data collection will continue in regards to clinical site support of SLO#3 and SLO#4.

Some feedback from the class of 2023 will be available at the end of the Fall 2022 semester. If warranted, this information will be presented in the Spring 2023 advisory board meeting. As more data is collected it will be report in future assessments. At this time, there are no recommendations to update any SLO or make any major changes to student learning activities or curriculum in regards to this issue. If future data does indicate any changes it will be noted in the AY 2023 assessment submission.

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 AY22.

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)***

STUDENT SUCCESS AND THE CLOSING OF EQUITY GAPS

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 across sets of courses, the intentional use of high-impact practices, proactive advising, course scheduling practices, etc.

UAA has selected the below metrics as student success metrics for accreditation.

In response to faculty questions and concerns about reporting on these data without more discussion and training, we will spend AY23 exploring together what equity data are and are not, how they can be used responsibly, and what programs can do to close equity gaps in student achievement on the below metrics, as well as to improve overall student achievement on them. UAA has a team participating in the NWCCU Data Equity Fellowship, and that team will help to guide these conversations.

8. **PROGRAMS ARE NOT REQUIRED TO RESPOND TO QUESTION #8 FOR THEIR REPORT DUE ON OCTOBER 15, 2022. IT IS HERE JUST FOR THEIR REFERENCE.** Describe the actions your program is taking to improve student achievement on one or more of the following metrics. Also, describe any resulting improvements in student learning.

Metric	Definition	Rationale
UNDERGRADUATE COURSE PASS RATES BY COURSE LEVEL (Undergraduate lower-division, undergraduate upper-division).	The percentage of students who receive a passing grade (A, B, C, P) for all undergraduate 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. *Data source: RPTP end-of-term freeze files. Disaggregate as per accreditation.*	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.

Metric	Definition	Rationale
ANNUAL RETENTION 1ST TO 2ND FALL	Traditional measure of the % of first-time, full-time associate and baccalaureate degree-seeking freshmen who enter in a given fall term and return the following fall. *Data source: UA System Warehouse RPTP/DEDMGR end-of-term freeze files. Disaggregate as per accreditation on an annual basis.*	Following the student from the 1st fall to 2nd fall can indicate ongoing connections and support inside and outside of the classroom are motivating students to return to continue their studies at the institution. Continuing enrollment is a key factor in completion.
SEMESTERS TO DEGREE – GRADUATE PROGRAMS	The average number of semesters taken by students to complete any graduate degree or graduate certificate program. Determined by students who have graduated from a graduate program as their primary degree. 5-year trend. *Data source: UA System Warehouse RPTP/DEDMGR end-of-term freeze files. Disaggregate as per accreditation on an annual basis.*	Looking at the number of semesters graduate students take to complete their degrees illustrates how students progress through their degree programs (full-time, part-time, stop-out). This information on student behavior and completion can inform program structure and help the institution support students in a way that honors the time needed for rigorous intellectual engagement and growth and also ensures that students can complete in a timely manner.

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_oaa@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?** *(750 characters or less)*

   It is appreciated that the program was able to identify clinical site support as an area for improvement. This is an area that can be challenging in that it typically relies on multiple staff at multiple facilities who may have varying amounts of time and/or interest in supporting students. The program has developed a solid plan for addressing this area.

   Although AART data is based on a calendar year and therefore not necessarily aligned with the academic assessment cycle, the program is encouraged to include whatever the most recent data, even though it may not report to the specific academic year cycle.

2. **What is the program doing particularly well in terms of its processes for the assessment and improvement of student learning, for example, the achievement of the Program Student Learning Outcomes, the closing of equity gaps, or addressing the core competencies?** *(750 characters or less)*

   A strength of the program's assessment process and tools is that it ties directly to national standards. It is appreciated that the program's advisory board is also included in the assessment process in terms of reporting results and soliciting feedback.

   The program's notation of student feedback on core competencies demonstrates that students are seeing incorporation of those in the curriculum. The high emphasis on communication skills, particularly in a diverse environment, is critical in the health field and excellent to see intentionally built into the program and assessment process.

Dean's signature: _____   **Date:** 1/9/2023