

Guide for Program Analysis

Name of Program: UT Southwestern Radiation Therapy Program

Program Number: _____

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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 | | | | |

See Exhibits Standard 1: Mission Statement and Goals

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 | | | | |

See Exhibits Standard 1: Mission Statement and Goals

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 mission statement and goals are on UT Southwestern's School of Health Professions web page under the Radiation Therapy Program, <http://www8.utsouthwestern.edu/utsw/home/home/education/radiationtherapy/index.html>. The mission statement and goals are also published in the Student Guideline Manual and each student is required to read and acknowledge the information contained in the manual. All clinical education sites have printed copies of both the Student Guideline Manual and the Clinic Manual. Each student reviews the Student Guideline Manual and the Clinic Manual during their Introduction to Radiation Therapy class.

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 | | | | |

See Exhibits Standard 1: Assessment Plan

- 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 | | | | |

See Exhibits Standard 1: Assessment Plan

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 | | | |

Program faculty participate on committees in the School of Health Professions (SSHP) and also with the clinical education setting – Moncrief Radiation Oncology Center. The SSHP committees consist of the Academic Affairs Committee, which reviews all issues pertaining to the curriculum of each program and school, the Admissions Committee, which reviews procedures regarding student admissions into the SSHP, and the Faculty Council which reviews issues pertaining to the SSHP. The program director also participates on the Education Committee in the Moncrief Radiation Oncology Department.

The Radiation Therapy Program also has various committees such as the Admissions Committee, which interviews and selects applicants to offer a position in the program, and the Advisory Committee, which reviews program procedures. The Admissions Committee consists of the program director, clinical coordinator, clinical supervisors, radiation oncologist, medical dosimetrist, therapist and medical physicist. The advisory committee consists of the above named individuals and also another member of the SSHP faculty not associated with the Radiation Therapy Program, a radiation oncology administrator and a member of the radiologic science community not affiliated with UT Southwestern Medical Center.

The program utilizes the following surveys to solicit feedback: employer survey, graduate survey and alumni survey. The surveys will be distributed at the appropriate times and the information discussed in the February RTT Advisory Committee Meeting.

Current RTT students also complete evaluations on didactic instructors, clinical instructors and didactic courses, which are reviewed by the program director, clinical coordinator and the Associate Dean. The material contained in the course and clinical instructor evaluations are tabulated and reviewed by the RTT Advisory Committee in the Internal Evaluation.

See Exhibits Standard 1:

- Course Evaluation
- Clinical Instructor Evaluation
- Internal Evaluation
- Assessment Plan
- Employer Survey
- Graduate Survey
- Alumni Survey
- Academic Affairs Meeting Minutes
- Monthly Moncrief Meeting Minutes

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 will tabulate data from each annual outcome assessment beginning in 2010 in an Excel spreadsheet to allow easy comparison from one year to the next. Trends observed in this comparative analysis tool can then be discussed with pertinent committees in the SSHP, RTT Advisory Committee and any other appropriate groups and/or individuals. The results will be discussed during the RTT Advisory Committee Meeting in February of each year starting in 2011 and presented to the appropriate SSHP committee if necessary.

The program has also developed surveys for graduates, employers and alumni, which will be distributed to those individuals at the appropriate times. This information will also be discussed at the RTT Advisory Committee Meeting in February beginning in 2011.

The Internal Evaluation analyzes data from the course evaluation and clinical evaluations to be reviewed by the program director and clinical coordinator. Results can be presented to the RTT Advisory Committee for review and discussion at the appropriate time.

See Exhibits Standard 1:

- Internal Evaluation
- Assessment Plan
- Academic Affairs Meeting Minutes
- Monthly Moncrief Meeting Minutes

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 RTT Advisory Committee meets once a year in February to review program procedures, which includes the mission statement and goals. During this meeting, the results of the previous assessment plan are also presented, reviewed and discussed. Discrepancies, trends and concerns with the current assessment plan and previous assessment plans are reviewed and an action plan developed if needed. The first class graduates in 2010 so the results will not be available for review until February 2011.

The Academic Affairs Committee reviews the Student Guideline Manuals of all of the SSHP programs in May of each year, including the one for the Radiation Therapy Program.

See Exhibits, Standard 1:

Academic Affairs Committee Meeting September, November 2007, May, June 2008
Moncrief Monthly Meetings

Summary for Standard One

1. List the major strengths of **Standard One**, in order of importance.
2. List the major concerns of **Standard One**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.

Attach additional pages if necessary.

1. The major Strengths of Standard One are

- (a) strong mission and goals which are directed at the future of the field,
- (b) several committees to review programmatic material, and
- (b) robust assessment plan detailing clinical skills.

With the ever increasing technological advancements, this program is determined to expose the students to current radiation oncology practices, encourage research not only during the students' academic career but hopefully afterwards as well enabling graduates to be successful in promoting and improving the practice of radiation therapy. The School of Health Professions convenes several committees, which review practices in each of the programs. These evaluations allow the Radiation Therapy Program to get input from experienced academicians and clinicians from fields outside of the radiological sciences bringing fresh ideas and new approaches benefiting the program. The assessment plan emphasizes actual clinical skills that are vital to employers when hiring a new therapist. The program not only utilizes the outcomes assessment to revise the program as necessary but also the internal evaluations to monitor and address both didactic and clinical concerns of the students.

2. No major concerns at this time.

3. New program.

4. New program.

5. New program.

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 Standards of Conduct are available at http://www.utsouthwestern.edu/vgn/images/portal/cit_56417/6/39/125246standardssofconduct.pdf. These Standards outline procedures regarding employment practices at UT Southwestern. Faculty, staff and students can access from campus secure sites such topics as academic and administrative resources, campus services, research and training opportunities. The academic resources contain the catalogue for the School of Health Professions including the Radiation Therapy Program. Catalogs are also available in print from the UT Southwestern Registrar’s office or the SSHP Dean’s Office.

When a student matriculates, the first day of class is spent in orientation. The morning time is spent with all of the students in the SSHP attending sessions, which cover general university and SSHP policies. In the afternoon, each program orients the students to specific guidelines relating to their particular program. During the Introduction to Radiation Therapy, students receive an in-depth explanation of the Student Guideline Manual for the Radiation Therapy Program.

Faculty and staff also participate in orientation sessions upon employment. Each clinical education site is oriented about the radiation therapy program, which includes the Student Guideline Manual and the Clinic Manual. The program director and clinical coordinator both conduct orientation sessions for all individuals in the clinical education settings to orient those employees to the procedures of the Radiation Therapy Program.

See Exhibits Standard 2: Student Guideline Manual

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 University of Texas Southwestern Medical Center at Dallas follows equal opportunity for employment and the following quote is from the Handbook of Operating Procedures for hiring faculty:

“The Equal Opportunity and Minority Affairs Office (Minority Affairs Office) is responsible for assuring that the methods of recruiting faculty members for employment comply with established federal and state laws and UT Southwestern policies. “

The following quote is from the Handbook of Operating Procedures for hiring staff:

5.12.1 Equal opportunity policy and procedure

5.12.1.1 Policy

1. It is the policy of UT Southwestern to provide equal opportunity to all individuals in all areas of employment (recruitment, hiring, training, assignment, and promotion), and employee privileges without regard to race, color, religion, sex, national origin, age, disability or veteran status. UT Southwestern fully complies with all applicable federal and state laws and

regulations.

2. Employees, students, program participants, service recipients, and applicants for employment shall at all times be treated fairly and with respect and will not be subjected to harassment or unlawful discrimination. Employees who engage in conduct in violation of this policy will be subject to disciplinary action up to and including termination of employment.

3. A person who believes that he or she has not been treated in compliance with this policy may file a complaint with the director of the office of equal opportunity (the equal opportunity director) pursuant to this policy.

The School of Health Professions and the Radiation Therapy Program must comply with these policies and the Equal Opportunity and Minority Affairs Office reviews hiring procedures.

See Exhibits Standard 2: Handbook of Operating Procedure: 4.6 Faculty Recruitment Procedures

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 | | | | |

See School of Health Professions web site, <http://www8.utsouthwestern.edu/home/education/alliedschool/index.html>

See Exhibits Standard Two: Printed program material

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 | | | | |

See Exhibits Standard Two, Student Guideline Manual pages 16 – 17

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 | | | |

Students study the JRCERT Standards in the Introduction to Radiation Therapy course and also in the Legal and Ethical Issues in Radiation Therapy course. Once accreditation is granted, the following JRCERT Grievance Statement will be inserted in the proper section in the Student Guideline Manual. The program director will keep a file in the office containing JRCERT Grievances.

JRCERT GRIEVANCE STATEMENT

If a student, staff or faculty has reason to believe that the Radiation Therapy Program is not in compliance with the JRCERT Standards, the procedure below will be followed:

1. The complaint will be submitted in written form to Radiation Therapy Program Director with specified dates/times/occurrence of event, as soon as possible after the occurrence of the event and within three days of the occurrence.
2. The Radiation Therapy Program Director will meet and discuss the information with the RTT Advisory Committee within 10 business days of receiving the complain. This meeting will determine if non-compliance exists and develop a

plan for resolution.

3. The Radiation Therapy Program Director will provide the complainant with a written plan for resolution of the problem with three business days of meeting with the RTT Advisory Committee.
4. If the complainant believes the alleged non-compliance has not been resolved or satisfactorily addressed by the Program Director and the Advisory Board, they are then encouraged to contact the JRCERT within five business days after receiving the written resolution from the RTT Advisory Committee.

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 | | | |

The Academic Affairs Committee of the SSHP on an annual basis conducts yearly review of the student guideline manuals from all programs in May of each year. The Advisory Committee for the Radiation Therapy Program also reviews the Student Guideline Manual and the Clinical Manual on an annual basis as well, usually occurring in February.

See Exhibits Standard One: Academic Affairs Committee Minutes, June 2008
 Moncrief Monthly Meeting Minutes, May, September 2008`

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 | | | | |

See Exhibits Standard Two: SACS accreditation

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 | | | | |

See Exhibits Standard Two:

Richardson Regional Cancer Center
Moncrief Radiation Oncology Center

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 | | | | |

Moncrief Radiation Oncology Center
Richardson Regional Cancer Center

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 | | | | |

Carol Scherbak, M.S.R.S., R.T.(T), Assistant Professor and Program Director

Marissa Johnson, B.S.R.T., R.T.(T), Instructor and Clinical Coordinator

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.
2. List the major concerns of **Standard Two**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.

Attach additional pages if necessary.

1. The major strengths of Standard Two are

- (a) university guidelines regarding ethical and employment practices for faculty, staff and students,
- (b) oversight of program policies, procedures and publications by more than one committee, and
- (c) clinical education facilities which value student participation.

The university guidelines ensure fair treatment of its employees, which also translates into fair treatment of students as well. The SSHP maintains many committees with faculty representation from all programs to ensure that all interests and procedures in the SSHP are heard and approved creating an environment of multiple checks and balances. The radiation therapy program's clinical education sites are devoted to creating a positive learning environment for the students.

2. No major concerns at this time.

3. New program.

4. New program.

5. New program.

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 | | | |

The organizational structure of the SSHP supports the program's mission by its support in the academic, clerical and student areas. The radiation therapy program falls under the division of Health Care Sciences, whose Acting Chairman is also the Associate Dean in charge of Student Affairs in the School of Health Professions. This arrangement allows the program to maintain and develop the curriculum with the support of administrative and clerical staff when needed. The SSHP is located in a teaching medical center, which has patient clinics with faculty and staff experienced in teaching a variety of students which supports the program's mission to provide both didactic and clinical environments in order to educate entry-level radiation therapists. The university also participates in many research endeavors and employs cutting edge technology furthering the students' exposure to a variety of patient set-ups, technology and research.

See Exhibits Standard Three: School of Health Professions Organizational Chart

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 | | | | |

See Exhibits Standard Three: Affiliation Agreement Richardson Regional Cancer Center

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 Office of the Registrar maintains all student records and adheres to the Family Education Rights and Privacy Act. Current student records are kept in the clinical coordinator and program director's office where they are in locked file cabinets and can only be accessed by program officials, or in case of an emergency, the Dean's Office. No student records are stored in the clinical education settings.

Instructional material is secured in program officials offices and/or maintained on password protected computers and/or servers.

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 offers a Baccalaureate Degree in Radiation Therapy and also a post Baccalaureate Certificate in Radiation Therapy for students who already possess an undergraduate degree. The professional curriculum is identical for the baccalaureate and post baccalaureate certificate and is not dependent on the student's track in the program. Students in the Baccalaureate track must enter the program with their general education requirements completed and will proceed to take another 62 hours of professional radiation therapy courses. Post baccalaureate students will complete the 62 hours of professional curriculum with the baccalaureate students. The hours are divided among five semesters with students attending on a full-time basis and successfully completing each semester before continuing to the next. The courses progress from introductory health profession and radiation therapy courses to more advanced topics each semester. Since many students will enter the program with no previous health or radiologic sciences experience, a five-semester program is necessary to cover the entire curriculum.

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 | | | | |

Junior Level Courses

Course

| Fall | | Credit | Hours |
|-------------|---|---------------|--------------|
| RT 3301 | Oncology Nursing and Patient Care | | 3 |
| RT 3302 | Introduction to Radiation Therapy | | 3 |
| RT 3303 | Medical Imaging and Processing | | 3 |
| HCS 3101 | Medical Terminology | | 1 |
| RT 3311 | Legal and Ethical Issues in Radiation Therapy | | 3 |

Spring

| | | | |
|---------|-------------------------------|--|---|
| RT 3211 | Pathology | | 2 |
| RT 3212 | Sectional Anatomy | | 2 |
| RT 3412 | Radiation Biology | | 4 |
| RT 3413 | Radiation and Therapy Physics | | 4 |
| RT 3304 | Clinical Education I | | 3 |

Summer

| | | |
|---------|---|---|
| RT 3421 | Principles and Practices of Radiation Therapy I | 4 |
| RT 3314 | Medical Dosimetry I | 3 |
| RT 3405 | Clinical Education II | 4 |

Senior Level Course**Fall**

| | | |
|----------|--|---|
| RT 4422 | Principles and Practices of Radiation Therapy II | 4 |
| RT 4315 | Medical Dosimetry II | 3 |
| HCS 4301 | Introduction to Research Methodology | 3 |
| RT 4406 | Clinical Education III | 4 |

Spring

| | | |
|----------|--|---|
| RT 4316 | Quality Assurance and Operational Issues | 3 |
| HCS 4302 | Directed Research | 3 |
| RT 4323 | Registry Review | 3 |
| RT 4407 | Clinical Education IV | 4 |

Summary for Standard Three

1. List the major strengths of **Standard Three**, in order of importance.
2. List the major concerns of **Standard Three**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.

Attach additional pages if necessary.

1. The major strengths of Standard Three are

- (a) program located in an established allied health school in a major medical center,
- (b) experienced registrar and staff to maintain student records, and
- (c) support from the SSHP Dean's office and also Moncrief Radiation Oncology Department.

The program is located in a major medical center with a long established education history staffed with experienced individuals in maintaining student records. The registrar has the resources to maintain electronic student records and grant access of those secured records to the program streamlining the paper processes. The program is supported by the SSHP Dean's Office but also by the clinical education site, Moncrief Radiation Oncology which grants office space and computer resources to the program to enhance the students' clinical education experience.

2. There are currently no major concerns for Standard Three.

3. New Program

4. New Program

5. New Program

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 | | | | |

See Exhibits Standard 4: Master Plan Table of Contents

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 | | | | |

See Exhibits Standard 4:

Course Descriptions
Curriculum Analysis Grid

Curriculum Objective Matrix available in Program Director's office

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 | | | |

The program promotes professional radiation therapy values through meetings, professional organizations and a research project. Students will attend symposiums conducted by the North Texas Society of Radiation Therapists, which take place each spring and fall and feature several speakers lecturing on topics concerning radiation oncology. These symposiums will expose the benefits of participation in local clubs not only for the CE points but also the benefits of networking on a local level.

Senior students will attend the ASRT Radiation Therapy Conference in their senior year of the program. Exposure at a national meeting is a rare opportunity for students and will instill the benefits of membership in a national association. Students will also be encouraged to apply for ASRT’s student internship program allowing them to understand how their national professional organization works.

During the senior year of the program, students will learn how to conduct and complete a research project. This experience will increase the student's understanding on not only how to do research but also how to interpret research and data that they may read about in professional journals. Hopefully, after completing a research project in school, the students will feel comfortable and try to do some research later in their careers in order to increase the body of knowledge pertaining to radiation therapy practice.

Critical thinking/problem solving will also be addressed by the senior research project since the student must design and implement the study. Students will also complete a dosimetry workbook created by the dosimetrists at the clinical education site, which will be a self-paced/self study exercise for the students while on their clinical dosimetry rotation. During the student's clinical rotations, they will be presented with a technical problem that they will need to solve. These problems could range from an incorrect marker on a film, wrong field size for the treatment field to a patient education problem. Students will be given the problem and they must find and solve the question being asked using critical thinking and problem solving skills.

The clinical portion of the program is competency based and students must complete a variety of clinical competencies beyond those required by the American Registry of Radiologic Technologists for the Registry Examination. Students will complete additional set-up and simulation competencies, nursing and treatment planning exercises. The program also requires the students to be successful in a variety of other competencies, which include advance treatment delivery, such as SRS, SBRT, warm up and engineering. These additional competencies will test the students' critical thinking and problem solving skills beyond minimum requirements.

The program's goal is to instill in the students the necessity of continued learning throughout their careers but also of the benefits of participation in local, state and national professional organizations. The program in the junior year first exposes the students to the local radiation therapy club, then the state society and later in the senior year to the national professional organization and meeting and to research in radiation therapy. This natural progression will be evaluated later when the program receives the graduate, employer and alumni surveys which all contain questions regarding critical thinking/problem solving and professional values such as attendance and participation in professional societies.

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 | | | |

The clinical and didactic materials are sequenced to ensure a student's successful achievement by introducing basic concepts in the first semester such as basic patient care, medical imaging and processing and laboratories on linear accelerator fundamentals. The students are exposed to more complicated concepts starting in the second semester. During this time, they begin their clinical rotation orientation period; learn radiobiology, pathology and physics. In the clinic, the students are in a semester-long orientation period where they learn the basics regarding each piece of equipment and nursing procedures, which allows them to progress to a more in-depth clinical experience in the next semester. The third semester, students will begin their clinical treatment delivery competencies and they will also start learning treatment planning and clinical oncology. This sequencing allows the student to grasp the basic concepts of patient care in a radiation oncology department and then advance to a more complete understanding of the treatment process after they have completed courses in radiobiology and pathology. The completion of these two course gives the student the foundation for Principles and Practices of Radiation Oncology which brings together all of the previous concepts. The students must first complete most of the basic patient competencies before attempting the advanced patient competencies, which takes the student

from basic skills to more complex in a logical order. This deliberate progression allows the student time to understand and assimilate basic material about the equipment, patient positioning, and cancer biology before the culmination of clinical oncology where simulation, oncologic pathology, treatment planning and other aspects are all interrelated.

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 | | | |

Clinical competencies are one evaluation tool, which examines all three domains. The student must learn patient procedures (psychomotor), research patient medical history and learn the rationale behind treatment (cognitive) and also interact with the patient professionally with an appreciation of the patient’s needs (affective). Every month, the clinical instructors evaluate the students who have worked with them to assess growth in the affective domain (Monthly Evaluation). Cognitive skills are constantly being assessed in the classroom through the use of quizzes, exams, games and other interactions between the instructor and student. Didactically the students are tested (cognitive), play informative games (cognitive), demonstrate patient procedures on phantoms (psychomotor), demonstrate use of equipment (cognitive and psychomotor). Students are also given patient scenarios, which challenge their sense of ethics and morals (affective) and complete a legal presentation and ethics project in the Legal and Ethical Issues in Radiation Therapy. The students also demonstrate affective skills by comprehending, understanding and adopting practice standards, ethics for radiologic technologist, and radiation therapist scope of practice as outlined by the ASRT and ARRT.

See Exhibits Standard 4: Clinical Competencies, Monthly Evaluations.

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 | | | |

Students are taught about new technologies in several classes, Introduction to Radiation Therapy, Radiation and Therapy Physics, Medical Imaging and Processing and in the Quality Assurance and Operational Issues courses. Students are also exposed to new treatment modalities in the clinic since they are studying in a university teaching hospital, which has cutting edge technology and faculty member conducting research in new treatment methods. Field trips are also incorporated into the program permitting students to view different equipment and other technology not available in the program’s clinical educational settings.

The students attend multidisciplinary tumor boards weekly where new technologies and treatment strategies are discussed which not only pertain to radiation oncology but also chemotherapy and surgical oncology. The students also participate in weekly departmental chart rounds where treatment rationale is discussed. Students also have the option of attending the North Texas Society of Radiation Therapists Symposia, which are offered twice each year. Senior students attend the Annual ASRT Radiation Therapy Conference. Students are also invited to attend conferences conducted by Moncrief Radiation Oncology Center.

See Exhibits Standard 4: Fifth Symposium on Combined Modality Treatment

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 | | | |

All students must perform all competencies and participate in all clinical activities.

Summary for Standard Four

1. List the major strengths of **Standard Four**, in order of importance.
2. List the major concerns of **Standard Four**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.

Attach additional pages if necessary.

1. The major strengths of Standard 4 are
 - (a) university setting with cutting edge technology,
 - (b) professional curriculum and sequencing, and
 - (c) availability of meetings,

The program is located in a university medical center with cutting edge technology and research projects examining current radiation therapy treatment trends. The students are exposed to not only new technology in radiation oncology equipment, but also to research in oncology treatment, radiation, chemotherapy, surgical and radiation biology research as well. The program utilizes the ASRT's professional curriculum and since the course is five semesters, there is ample time to introduce the students to basic concepts and then progress to more complicated scenarios. North Texas is extremely fortunate to have the North Texas Society of Radiation Therapists, which holds two symposia per year featuring many different speakers presenting on a diverse collection of radiation oncology topics. The senior students can attend the ASRT Annual Radiation Therapy Conference in the fall because of the continued support of the clinical education facility.

2. No major concerns.
3. New program.
4. New program.
5. New program.

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 | | | |

The program has access to classrooms furnished by the UT Southwestern School of Health Professions which contain slide projectors, overheads, DVD and VHS players and computers for presentations. The classrooms are supplied with ample tables/desks and chairs for the instructor and students. These educational resources allow material to be presented in a variety of methods to facilitate the various learning styles. The program’s main clinical education setting is Moncrief Radiation Oncology Department which is a university teaching facility so the student sees a wide variety of patients and procedures. Students also rotate through one clinic off site of the university where they can experience a different type of clinical treatment environment. The clinical department also supplies the program with an office, desk and equipment in the clinical education location.

The main clinical setting, Moncrief Radiation Oncology Center, has the following equipment: Elekta Synergy, Varian Trilogy and two Varian 2100 EX’s, Philips Big Bore CT, GE High Speed Scanner, GE OEC 9800 PLUS C-ARM, HDR, LDR, Pinnacle PRO Treatment Planning, Varian Eclipse and Varian VariSource Workstations.

Zale Lipshy University Hospital has the following equipment: Cyberknife, Gamma Knife, GammaPlan and MultiPlan.

Richardson Regional Medical Center has the following Equipment: Varian iX, Novalis, Varian Eclipse Workstation, BrainLAB and BrainSCAN workstation.

The program has an office suite with three offices, reception area and storage room. This space creates a confidential work environment for faculty and space for meeting both privately and in groups with other faculty, instructors, guests and students.

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 | | | |

The program has a clinical observation site at Parkland Hospital. Moncrief Radiation Oncology Center physicians perform brachytherapy procedures at Parkland and observing these procedures enhances the radiation therapy student’s educational experience through additional treatment delivery methods.

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 | | | |

The main clinical setting for the program is located in a university teaching facility, which has a patient population from pediatrics to geriatrics. Students experience a wide range a treatments on the linear accelerators from conventional treatment to IMRT and SBRT. Students are also exposed to near-real time imaging with OBI and cone beam CT plus real-time imaging with the Calypso system. All of these imaging systems are state of the art giving students clinical experiences with the most up to date imaging technology available. The students also rotate through a satellite facility located off campus, experiencing a non-university clinical environment that gives the student a well-rounded clinical education. A second facility on campus has two stereotactic units, a Cyberknife and a GammaKnife, which students observe during the clinical rotations. Brachytherapy procedures such as LDR are performed at the clinical observations site, Parkland Hospital, and HDR procedures are performed at Moncrief Radiation Oncology Center. The Moncrief houses two Varian 2100 EX’s, a Varian Trilogy and an Elekta Synergy allowing the student to see many different types of treatments. Moncrief Radiation Oncology Department treats a large demographic population with a wide range of oncologic

pathologies.

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 | | | |

The program faculty, staff and students have access to many of the educational resources available at the UT Southwestern Medical Center. The South Campus houses the main campus library and the Moncrief Radiation Oncology Department also has a small library with topics ranging from radiation oncology to cancer in general. The departmental library houses many current oncology journals, which faculty, staff and students can access. UT Southwestern School of Health Professions has an extensive computer laboratory located on the seventh floor available for student use. This computer lab can also be accessed for short classroom presentations for the students to learn various computer techniques. The program has several different anatomical models and others are available in the department to demonstrate anatomy and/or treatment fields. The program utilizes current audiovisual technology through the use of digital video, powerpoint presentations and still images. A radiation therapy program directors' list serve is also available for group discussion about current topics in radiation therapy education.

The program faculty reviews annually the current textbooks and additional resources necessary for the program to remain current in the advisory committee meeting. The School of Health Professions has an Academic Affairs Committee which reviews all issues

related to the school's curriculum. The school also has a student council, which also brings issues from vending machine access to study room access to the attention of the administration.

See Exhibits Standard One: Moncrief Monthly RTT Meetings

See Exhibits Standard Five: Library Resources

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 radiation therapy program does not offer student services besides orientation and advisement but the university does have the following services available:

Student Academic Support Services:

Classroom Services: Both in-classroom and out-of-classroom learning are supported by high-quality physical and electronic resources. The Division of Client Services in IR administers media technology support for classrooms, including sound, audio recording, image and video projection of lecture presentations. Ample small classrooms and conference rooms are available for small group discussions.

Student Computing: Student computing support is offered to all students and is underwritten by computing fees. The operation of Student Support is overseen by the Student Computing Committee. Student Support manages over 220 student workstations and many printers in the libraries, graduate carrels, medical school labs and SSHP computer lab. Students can also have their personally-owned computers maintained at no additional charge. This includes loading and troubleshooting software. Student Support also manages site licenses for professional software that is widely used in the training of students.

Student Advising: Students in the SSHP are initially provided a general orientation by various faculty and administrative staff regarding campus wide resources that also includes Student Health and Student Mental Health. In addition each department will hold a student orientation session and provide more specific information. Students learn they have various avenues for receiving advice and help from faculty, staff and fellow students. For example, students entering Physical Therapy are assigned a ‘faculty mentor’ for the entire three year curriculum. Students also have supervisors for both clinical rotations and research projects. Within each department, there are administrative assistants available every day to answer students’ questions. Often these staff members are the first line of contact and have considerable experience in fielding diverse questions from students, both professional and personal. In most programs, each student also is assigned a “big sibling” who is a more advanced student able to help with initial orientation to campus, assistance in finding housing, household items, books, advice about courses, etc. Each department provides contact information

Career Services: The Southwestern Graduate School's Career Services program is accessible to all graduate students and postdoctoral appointees. This program provides a range of services including resume preparation, mock interviews, evaluation of seminars, and skills necessary for positions sought, as well as information on both academia and industry careers. (<http://www.utsouthwestern.edu/graduateschool/careerservices.html>)

Academic Assistance: Students entering the SSHP have access to several levels of academic assistance. The Office of Medical Education works in collaboration with the Dean’s Office, SSHP, to co-coordinate and implement a battery of retention support services for the benefit of new incoming, first-year SSHP students. These services included the following: orientation handouts, tutoring in the basic sciences, learning skills development, academic advising and counseling, stress management, and a referrals system to identify students who have significant non-academic needs. Within the School of Health Professions, each department and program offers assistance to their students with a formal system of student advising to ensure ongoing communication between the faculty and students. If a student has significant problems that may endanger their progress in the program an appropriate strategy (e.g. course remediation, directed study, private tutoring, etc.) is then developed to assist the student(s) in completing their program of study.

Financial Support: Financial aid is often an important aspect of student support. The Office of Student Financial Aid makes student financial assistance available through a number of loan, scholarship and employment opportunities. In addition, there are several student scholarship award opportunities offered by the various departments within the school.

Students have access to a wide range of services that are administered by UT Southwestern Medical Center. Currently, the School of Health Professions is creating resources to enhance student learning such as access to on-line learning, such as a plagiarism module to further instruct students on this issue.

Summary for Standard Five

1. List the major strengths of **Standard Five**, in order of importance.
2. List the major concerns of **Standard Five**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.

Attach additional pages if necessary.

1. The major strengths of Standard 5 are:

- (a) advanced state of the art, cutting edge clinical education site,
- (b) classrooms equipped with multi-media capabilities, and
- (c) teaching medical center with student resources.

The program has access to one of the most advanced radiation oncology clinics which not only allows students to experience the latest in technology but also to see first hand the impact research, not only in treatment delivery but also in radiation biology, mean to the oncology patient. The university also maintains its classrooms with educational technology such as multi-media capabilities so the instructor can use additional resources besides lecture in the classroom. The university also has student services available plus recreational activities.

2. No major concerns, new program

3. New Program

4. New Program

5. New Program

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 | | | | |

See Exhibits Standard 6: CV and credentials for legal and ethics, physics and treatment planning faculty and instructors

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 | | | |

The responsibility of each individual in the program is delineated in the Master Plan of Education. Program officials such as the program director, clinical coordinator and clinical supervisors’ roles are described in the Master Plan of Education, as is the role of the staff radiation therapists at the clinical education sites. The descriptions contained within this document clearly list the responsibilities of each program individual to ensure that the students’ needs are met and the programs mission and goals are also sustained and implemented. Each category of program personnel also has a list in the Master Plan of Education, which explains their didactic and clinical responsibilities – which individual can teach certain courses, clinical duties, for example.

Responsibilities of Program Director

Qualifications

- Masters Degree
- Three years experience as a radiation therapist

Two years experience as an instructor in a radiation therapy program
Credentials – ARRT in radiation therapy

Duties

Organizes, administers, reviews and assures program effectiveness
Conducts internal and external goals assessment for the program
Participates in budget planning
Evaluates and assures clinical effectiveness
Maintains current knowledge in the profession
Continues professional development through ongoing education in teaching methodologies
Coordinates program activities with both clinical and didactic faculty and staff
Orients therapist to the program and demonstrates effective clinical teaching strategies
Teaches in both the clinical and didactic areas of the program, material and setting

Clinical Coordinator Role

Qualifications

Bachelors Degree, preferably in Radiologic Sciences
Experience – two years working as a radiation therapist
ARRT registered
Ability to supervise, evaluate and instruct therapy students, extensive knowledge of treatment set-ups, clinical oncology and program policies

Program Administrative Duties

Outcome Assessment Plan
Internal Assessment Plan
Curriculum Evaluation
SSHP Committee Assignments
RTT Advisory Committee
RTT Admissions Committee

Didactic Duties

Clinical Oncology (some lectures)
Nursing and Patient Care
Sectional Anatomy
Quality Assurance (some lectures)
Simulation (lectures and demonstrations)

Clinical Duties

Supervision of Students while they are in the clinic
Coordinating student rotations throughout clinical areas
Inservices on student instruction with clinical personnel
Nursing and patient care
Coordinating with physicians for student rotations through the patient clinic area
Simulation and linac laboratories
Linac patient set-ups
Competencies

1. Holds instructional sections for clinical faculty and staff
2. Informs radiation therapy clinical staff on program policies and procedures
3. Completing Monthly Evaluations on the students
4. Student instruction on all radiation therapy equipment and clinical set-ups
5. Performs clinical competencies with students

Didactic Faculty

Courses

RT 3301 Oncology Nursing and Patient Care

Primary Course Responsibility
Program Director
Clinical Coordinator
Can Participate in Lectures and/or Labs
Clinical Supervisor
Oncology Nurse

RT3302 Introduction to Radiation Therapy

Primary Course Responsibility
Program Director
Clinical Coordinator
Can Participate in Lectures and/or Labs
Clinical Supervisor

RT 3303 Medical Imaging and Processing

Primary Course Responsibility
Program Director
Clinical Coordinator
Can Participate in Lectures and/or Labs
Clinical Supervisor

RT 3311 Legal and Ethical Issues in Radiation Therapy

Primary Course Responsibility
Program Director
Clinical Coordinator
Attorney with specialty in Health Law
Can Participate in Lectures and/or Labs
Clinical Supervisor

RT 3311 Pathology

Primary Course Responsibility
Program Director
Clinical Coordinator
Pathologist

Can Participate in Lectures and/or Labs
Clinical Supervisor

RT 3212 Sectional Anatomy

Primary Course Responsibility
Program Director
Clinical Coordinator
Can Participate in Lectures and/or Labs
Clinical Supervisor

RT 3412 Radiation Biology

Primary Course Responsibility
Program Director
Clinical Coordinator
Radiation Biology Faculty

Can Participate in Lectures and/or Labs
Clinical Supervisor

RT 3413 Radiation and Therapy Physics

Primary Course Responsibility
Medical Physics faculty
Can Participate in Lectures and/or Labs
Linear Accelerator Engineer
Medical Physics Residents
Medical Physics Graduate Students

RT 3421 Principles and Practices of Radiation Therapy I, II

Primary Course Responsibility
Program Director
Clinical Coordinator
Can Participate in Lectures and/or Labs
Clinical Supervisor
Radiation Oncologist

RT 3314 Medical Dosimetry

Primary Course Responsibility
Medical Physicist Faculty
Certified Medical Dosimetrist at MROC

RT 4316 Quality Assurance and Operational Issues

Primary Course Responsibility
Program Director
Clinical Coordinator
Can Participate in Lectures and/or Labs
Clinical Supervisor
Administrator
Billing and Compliance Staff

RT 4323 Registry Review

Primary Course Responsibility
Program Director
Clinical Coordinator

Clinical Supervisor Role

Qualifications

Experience – two years working as a radiation therapist
ARRT registered
Ability to supervise, evaluate and instruct therapy students, extensive knowledge of treatment set-ups, clinical oncology and program policies

Didactic Duties (some lectures during the following classes)

Clinical Oncology Lectures
Nursing and Patient Care
Sectional Anatomy
Quality Assurance
Simulation

Clinical Duties

Supervision of Students while they are in the clinic

Simulation

Linac patient set-ups

Competencies

1. Make sure students and staff therapists are confident in their roles
2. Assist in the instruction of staff therapist on procedures for student competency
3. Completing Monthly Evaluations on the students
4. Student instructions on all radiation therapy equipment and clinical set-ups
5. Performs clinical competencies with students

Clinical Staff Role (radiation therapists)

Qualifications

ARRT registered in radiation therapy

Employed by clinical education setting

Clinical Duties

Instruct students while they are in the clinic

Simulation

Linac patient set-ups

Understanding of program policies

Instruction of students with the knowledge of clinical competency requirements

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 is currently accepting 4 students to ensure the greatest exposure to clinical and didactic teaching staff. Only one student at a time is assigned per linear accelerator and this rule is also followed on the physics and dosimetry rotations as well. The main department has four linear accelerators and two CT simulators and the additional clinical education setting has one linear accelerator and one simulator. The program can accept up to 7 students with the current equipment and still maintain one student per machine. The junior and senior students will not be in the clinic on the same days. The program only has two clinical education settings but does have a clinical coordinator who not only manages and supervises the students in the clinical but also teaches some of the courses in the program. The department is adequately staffed with radiation therapists, medical physics and dosimetrists to cover all of the clinical and teaching assignments.

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 program has administrative support from the Dean’s office for such activities as classroom scheduling, ordering supplies and typing. The SSHP supplies computers, supplies and equipment necessary to manage office and classroom materials. The School of Health Professions has a Faculty Resource Room with additional equipment for faculty use.

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 university has an Effective Teachers Series to educate faculty on learning in the medical environment as well as other topics. The program director and clinical coordinator attend annual meetings such as the ASRT Annual Radiation Therapy Conference, the Association of Educators in the Imaging and Radiologic Sciences Annual Meeting, the North Texas Society of Radiation Therapists biannual Symposiums and the Texas Society of Radiologic Technologists meetings. All of the meetings present educational material either in radiologic sciences, education or radiation oncology. Moncrief Radiation Oncology Center also presents symposiums on various topics regarding cancer treatment and research which faculty can attend.

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 | | | | |

See Exhibits Standard 6: SSHP Faculty Evaluation, RTT Course Evaluation, Clinical Instructor Evaluation

Summary for Standard Six

1. List the major strengths of **Standard Six**, in order of importance.
2. List the major concerns of **Standard Six**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.

Attach additional pages if necessary.

1. The major strengths of Standard 6 are:

- (a) the program located in a medical university,
- (b) the provisions of a travel budget for the program director and clinical coordinator to attend local, state and national meetings, and
- (c) ongoing support from the SSHP Dean's office and the clinical education setting, Moncrief Radiation Oncology Department.

The program is located in a medical teaching university which is proactive in educating faculty both in teaching methodology and in clinical practice. This venue allows faculty to have access to current teaching and clinical practices ensuring faculty remain abreast of developing trends in the field of radiation oncology.

2. New Program

3. New Program

4. New Program

5. New Program

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 receives applicants generated from the web site, listings by national organizations and information sessions conducted by the SSHP recruiter, RTT program director and clinical coordinator. The application process is listed in the program brochure and on the SSHP web site. Depending on the number of applicants, interviews are given to the top 14 candidates since the program only accepts 4 – 6 students per year. Candidates are ranked using the Applicant Evaluation Form, which is based on GPA, science courses, RTT exposure, personal qualities, letters of recommendation and the interview. The top 4 – 6 candidates are sent letters of acceptance while the next two candidates are sent alternate letters.

The program requires all students to rotate through all clinical assignments and clinical education settings. Currently the program utilizes all radiation oncology clinics in the UT Southwestern Medical Facility, both the main campus and the Richardson Regional Medical Center, and Parkland Hospital as a clinical observation site. All students must rotate through treatment delivery, simulation, nursing, physics and treatment planning. The first semester students are not in the clinic but are learning basic patient care and machine operations in a laboratory setting. The second semester, students enter the clinical environment for an orientation period before beginning treatment delivery competencies, which start in the third semester.

See Exhibits Standard 7: Admission requirements, clinical assignments

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 on-line application for UT Southwestern School of Health Professions does not collect data on race, color, or religion. The RTT program's Applicant Evaluation Form does not collect or address information regarding any legally protected status. Applicants with a disability can request an accommodation through the program director which then proceeds to the associate dean who then contacts the Office of Legal Affairs or the UT Southwestern ADA Coordinator. The above individuals will evaluate the accommodation request.

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 | | | |

Prospective students and the general public can access the above information on the SSHP web site <http://www8.utsouthwestern.edu/home/education/alliedschool/index.html>. The registrar office, the dean's office and the Radiation Therapy Program all maintain copies of the school catalog in their offices and distribute to prospective students as requested. All electronic inquiries to the program's email address are directed to view the available information on the SSHP web site.

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 | | | |

All students must attend an orientation session, where they are directed to the proper procedures and policies listed above. All students in the RTT program are required to read the Student Guideline Manual and sign a statement that they have read and understood the guideline. The guidelines covers academic policies, grading policies, and graduation requirements, while the web site covers admission policies, transfer credit, tuition and fees, refund policies, academic calendars and student services. The above information can be found on the SSHP web site and also on UT Southwestern's web site as well.

All RTT students are required to take the Introduction to Radiation Therapy course and the above policies are discussed during that class.

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 | | | |

Monthly clinical evaluations are completed by the clinical staff and clinical supervisors and reviewed by the program director and clinical coordinator, with the clinical coordinator discussing any issues or concerns with the student at that time. Student evaluations with the program director and/or clinical coordinator occur monthly. The program director or clinical coordinator may initiate an advisement session with the student at any time or at the request of the clinical staff, didactic faculty or the student. At the conclusion of a three-month period, the results of the Monthly Evaluations are tabulated and rewritten on another sheet in order to provide anonymity of the clinical staff. The program director and/or clinical coordinator then meets with the student and also discusses their didactic performance along with their monthly clinical evaluation and clinical performance. The student's clinical performance, with regards to competency completion, is discussed along with any areas needing improvement. Didactic performance is also reviewed at this time.

Students also meet with the program director and clinical coordinator to receive their mid-term grades.

See Exhibits Standard 7: Advisement form

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 uses the ASRT Professional Curriculum for Radiation Therapists to ensure appropriate content material and validity with the clinical and didactic material. The program does not schedule clinical education activities during weeknights or weekends. Students are given information in the classroom to support their clinical endeavors and all have their origins in the ASRT’s professional curriculum or the ARRT competencies and Content Specifications.

First Semester

During the first semester, students are taught introductory material (medical imaging and processing, patient care, legal and ethics) which includes basic patient set ups, basic simulation and basic linac operation.

Second Semester

Students have introductory rotations through the clinic so they can apply the basic information learned in the previous semester. Students learn the layout of each treatment room and simulator and apply the basic linac operation skills in setting up patients. Students also rotate through nursing where they can apply the nursing skills learned in the previous semester. Students do not complete treatment delivery competencies during this semester but instead complete clinical case studies, which introduce them to

using the electronic medical record to access patient information pertaining to non-treatment data. Radiation physics, radiobiology and cross sectional anatomy are taught this semester preparing the student for simulation, treatment planning and treatment delivery competencies during the third semester.

Third Semester

By the time the students enter their third semester, they will be ready to tackle basic treatment delivery and simulation competencies. The students now enter a more rigorous phase of their education with the introduction of treatment planning and Principles and Practices of Radiation Oncology.

Fourth Semester

At this time students will have completed one semester of treatment planning, physics, radiobiology and one semester of Principles and Practices of Radiation Oncology. More advanced clinical treatment delivery competencies can now be attempted by the students and they are ready to begin their research course which will culminate in a project their last semester. At this time, students will begin doing their physics and dosimetry rotations which will allow them to be exposed to advanced treatment procedures such as brachytherapy, stereotactic radiosurgery and SBRT.

Fifth Semester

The last and final semester of the program requires the students to complete a research project concerning radiation therapy practice. The students will also be taking a Quality Assurance and Operational Issues course where they can explore departmental QA, billing and other areas associated with a radiation oncology department. Students must complete all of their clinical competencies by the end of the semester and also pass the registry review course with a grade of "B."

Each semester builds on the previous semester, both in the classroom and clinic, ensuring that the students are working on educationally valid material. The current sequencing allows the faculty to evaluate each student's progress from one semester to the next through course grades, clinical competencies and clinical progress checks.

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 | | | | |

See Exhibits Standard 7: SSHP Orientation Schedule, Clinic Manual - Orientation Checklist
 See Exhibits Standard 2: Student Guideline Manual

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 | | | |

The program policy is to not schedule students in the didactic and clinic phases of the program for more than 40 hours per week. The Student Guideline Manual states that students may not exceed 40 hours per week for make up time and the RTT Program Clinical Manual also states that students may not exceed 40 hours per week in the classroom, clinic and make up time.

See Exhibits Standard 2: Student Guideline Manual page 13

See Exhibits Standard 7: Clinical Manual

Summary for Standard Seven

1. List the major strengths of **Standard Seven**, in order of importance.
2. List the major concerns of **Standard Seven**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.

Attach additional pages if necessary.

1. The major strengths of Standard Seven are:

- (a) professional curriculum which is sequenced to ensure mastery of the material,
- (b) small class size with individualized attention from the program director and clinical coordinator, and
- (c) close relationship with the clinical education facility.

2. New Program

3. New Program

4. New Program

5. New Program

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 | | | |

Students receive film badges at the commencement of the program. In order to receive the film badge, students must go through a university radiation orientation and a presentation by the radiation safety officer. Radiation safety records are kept in the administrative office at Moncrief Radiation Oncology Center (MROC) and can be accessed at any time during regular business hours. The university follows all NRC and State of Texas regulations. MROC and the radiation therapy program follow the protocols set forth by the State of Texas and the UT Southwestern Radiation Safety Officer.

See Exhibits Standard 8: Radiation Inservice, UT Southwestern Radiation Policies

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 | | | |

The pregnancy policy is published in the Student Guideline Manual and is sent to accepted students at the end of July before they begin the program in August. All students must read and sign that they understand all of the program’s policies. During the Introduction to Radiation Therapy, program guidelines are also presented to the student. The students also attend the UT Southwestern’s Radiation Safety Office Basic Radiation Safety Inservice. Two courses in the first semester, RT 3302 and 3303 cover basic radiation safety topics. In the spring semester when the students start their clinical rotations, they receive more extensive and formal radiation protection information in RT 3413 Radiation and Therapy Physics.

See Exhibits Standard 2: Student Guideline Manual, Pregnancy Policy page 23

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 Safety

Students are exposed to equipment operation and radiation safety in a logical sequence to ensure their understanding of not only ALARA but also how to keep themselves, their co-workers and patients safe around equipment found in a radiation oncology department. This process begins during the students' first semester by their attending a basic radiation safety inservice given by one of the assistant RSO's at UT Southwestern, exposure to basic radiation protection information in both the Introduction to Radiation Therapy and Medical Imaging and Processing classes, and basic equipment operation during the first semester before clinicals begin. At the beginning of the second semester when the students start their clinical rotations, the departmental engineer gives a linear accelerator inservice which is more in-depth than the previous information presented to the students and specifically aimed at safe operation of all equipment. This inservice is specifically designed to increase the student's knowledge about safe equipment operation to themselves, co-workers and patients and to also maintain the equipment in peak performance. During their second semester, students will have Radiation and Therapy Physics, which will cover the ASRT curriculum content on radiation protection.

Treatment Delivery

After the students have learned basic information such the location of supplies, accessories and immobilization devices, in their first semester, they begin to learn patient set-ups. After the students are familiarized with the equipment and patient set-ups, the students are then exposed to running the console. This sequence allows the students to integrate didactic and clinical material in more manageable portions to ensure the safe operation of equipment.

Patient Care

During this first semester, students take a patient care class before entering the clinical environment in the next semester. During this class, they learn and practice basic patient care techniques such as taken vitals, histories, skin reactions and other aspects of patient care. When they start their clinicals during the second semester, the students are prepared for their nursing rotation where they can interact with patients in the clinical in a safe and secure manner.

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 | | | |

All students are made aware of the direct supervision requirement during the Introduction to Radiation Therapy class and also again before they begin the clinical rotations. The radiation therapists in the clinical education settings receive an orientation to the program and during that time, the program’s guidelines are presented to the therapists. In order to monitor direct supervision in the clinic, the clinical coordinator and clinical supervisors reiterate the rule and students are asked on their evaluation of clinical instructors if they were under direct supervision at all times while performing on the linacs, brachytherapy and simulator.

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 | | | |

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 | | | |

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 | | | |

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

Explanation:

Records of compliance (JCAHO, 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 | | | | |

See Exhibits Standard 2: Records of Compliance for Moncrief Radiation Oncology Center, Richardson Regional Cancer Center

Summary for Standard Eight

1. List the major strengths of **Standard Eight**, in order of importance.
2. List the major concerns of **Standard Eight**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.

Attach additional pages if necessary.

1. The major strengths of Standard 8 are:

- (a) the program's curriculum sequence,
- (b) large clinic with an in-house engineer, and
- (c) extensive university Radiation Safety Office.

The curriculum sequence teaches the students radiation safety from the medical imaging aspect first before explaining the radiation oncology issues. This progression allows the student to learn radiation safety information in a logical order from kV to MV.

2. New program

3. New Program

4. New Program

5. New Program

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 | | | |

The Radiation Therapy Program is supported by UT Southwestern School of Health Professions and by the clinical education site, Moncrief Radiation Oncology Center. Between these two sources, adequate funding for the program has been secured and budgeted.

See Exhibits Standard 9: RTT Program Budget

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 | | | | |

See Exhibits Standard 9: Budget Meeting

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 | | | |

The University of Texas Southwestern Medical Center at Dallas meets the requirements to participate in Federal Student Aid.

Please see exhibits Standard 9: Federal Student Aid Documentation

Summary for Standard Nine

1. List the major strengths of **Standard Nine**, in order of importance.
2. List the major concerns of **Standard Nine**, in order of importance.
3. Provide the program's plan for addressing each concern identified.
4. Describe any progress already achieved in addressing each concern.
5. Describe any constraints in implementing improvements.

Attach additional pages if necessary.

1. The major strengths of Standard Nine are:

- (a) program's support by School of Health Professions, and
- (b) program's support by Moncrief Radiation Oncology Department

The SSHP and MROC are both successful university enterprises who have committed resources for the success of the new radiation therapy program. The program has input into both the SSHP and MROC in order to propose and revise the program's budget.

2. New Program
3. New Program
4. New Program
5. New Program