**Sinclair Community College**

**Continuous Improvement Annual Update 2013-14**

**Please submit to your dean and the Provost’s Office no later than Oct. 1, 2013**

**Department:** 0630 – Surgical Technology

Year of Last Program Review: FY 2007-2008

Year of Next Program Review: FY 2014-2015

**Section I: Department Trend Data, Interpretation, and Analysis**

**Degree and Certificate Completion Trend Data – OVERALL SUMMARY**

Please provide an interpretation and analysis of the Degree and Certificate Completion Trend Data (Raw Data is located in Appendix A*): i.e. What trends do you see in the above data? Are there internal or external factors that account for these trends? What are the implications for the department? What actions have the department taken that have influenced these trends? What strategies will the department implement as a result of this data?*

**Trends / Factors:** The downward completion trend is related to the downturn in the local healthcare environment in Dayton. Clinical placement and hiring of new graduates is down, and in turn, the program is admitting fewer students.

A competitive healthcare market has led hospitals to expand their facilities. However, the number of patients in the area has, at a minimum, remained the same if not decreased due to the exit of many national companies from the area and loss of benefits to the employee residents of Dayton. In addition, the Affordable Care Act (ACA) has introduced a higher degree of uncertainty into the current healthcare market. Hospital administrators are cautious on a new level and are slower to make staffing decisions until full implementation of the ACA becomes more clear.

This has affected our program in many ways:

First, our hospital affiliates have cut the number of students they will host in their facilities. With empty hospital beds, hospital administrators have cut staff hours and closed operating rooms. This directly impacts our ability to place students in the clinical environment. As mandated by my accrediting body, the ARC/STSA, I can only admit as many students that I can guarantee a facility for them to complete their clinical requirements. If I can only positively place 'x' number of students in facilities, then I can only admit the same number of students to the program's cohort.

Second, with empty hospital beds, hospital administrators have decreased hiring. One of the main outcomes of my program is positive job placement. It would be unfair to admit, educate, and graduate students without a good prospect of the graduate finding employment.

Third, with hospital budgets tight, administrators continue to seek applicants with experience. This results in many good graduates being overlooked as new prospective employees.

**Actions / Strategies:** The student demand for the program remains strong. We continue to monitor market demand, the factors influencing clinical / job placement, and admit accordingly.

One strategy used to improve job placement is to continue to educate hospital administrators responsible for hiring new employees. Many administrators consider our graduates as inexperienced and look for the candidate with experience. We educate hospital administrators about the benefits of hiring our graduates.

First, many of our graduates complete their last clinical at the facility they wish to gain employment. This is a win/win for all if the administrators recognize the benefits. Our students do have experience as they have spent the last 2 years in the clinical environment perfecting their skills. The student is familiar with the facility, the staff, the surgeons, the operations, and the policies of the facility. Orientation time of a graduate can be reduced drastically from the standard 6-9 months to 2-3 months, depending on the size of the facility, saving the department and institution the high, absorbent costs of orientation.

Second, bringing on our graduates as new hires, the staff and administrators have already seen their abilities, and more importantly, the student's attitude and work ethic. It has become important to remind the administrators that our graduates have solid, basic skills that can easily be increased. In addition, an employee with a great attitude and work ethic is better for the organization than an experienced new hire with a poor attitude and work ethic.

Emphasis on building relationships and education of the hospital administrators continues to be a strategy that works for the program.

**Course Success Trend Data – OVERALL SUMMARY**

Please provide an interpretation and analysis of the Course Success Trend Data (Raw Data is located in Appendix A). Looking at the success rate data provided in the Appendix for each course, please discuss trends for high enrollment courses, courses used extensively by other departments, and courses where there have been substantial changes in success.

The department success rates look encouraging but are 5% lower than in years past. When looking at the data, it appears data is missing from 2 courses that most likely would show a high success rate. These two courses are: SUT 1120 and SUT 2110. This could account for the 5% drop in the success rate.

It is typical to see lower success rates in the first two courses of our program, which the data in Appendix A illustrates. These courses, SUT 1110 and SUT 1120, are designed to educate the student wholly about the professional and to instill basic, but critical skills needed for program completion. Once the student completes these two courses, the rate of retention is high.

Please provide any additional data and analysis that illustrates what is going on in the department (examples might include accreditation data, program data, benchmark data from national exams, course sequence completion, retention, demographic data, data on placement of graduates, graduate survey data, etc.)

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Program Outcome Measures**  **(benchmark%)** | **2002** | **2003** | **2004** | **2005** | **2006** | **2007** | **2008** | **2009** | **2010** | **2011** | **2012** | **2013** |
| Retention Rate (70%) | 79% | 88% | 71% | 65% | 70% | 70% | 63% | 85% | 85% | 88% | 79% | 81% |
| Job Placement Rate (80%) | 100% | 100% | 100% | 100% | 100% | 88% | 92% | 94% | 88% | 92% | 72% | 75% |
| PAE Pass Rate (100%) | 87% | 94% | 92% | 100% | 100% | 100% | 100% | 100% | 100% | --NA- | --NA- | --NA-- |
| CST Pass Rate (70%) | --- | --- | --- | --- | 100% | 88% | 100% | 89% | 88% | 90% | 45% | 86% |
| Student Satisfaction (85%) | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | Cannot be measured until Nov 2013 |
| Employer Satisfaction (85%) | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | Cannot be measured until Nov 2013 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |

The following is a trending data chart of the program outcomes:

Not mandated to measure outcome until 2010.

Does not meet accreditation benchmark.

**Analysis**

The program's CST participation rate of 100% for the class of 2012 and 2013 continues to meet the ARCSTSA threshold. The program's CST pass rate of 45.5% for the Class of 2012 fell below the ARCSTSA threshold of 70%, which equates to 6 out of 11 students. The CST pass rate for the Class of 2013 was 86%, which is above the benchmark.

The program's overall CST pass rate of 86%, from 2008 to present, remains above the ARCSTSA threshold of 70%. It should also be noted the national pass rate for all individuals taking the CST exam is 55%. This is notable as this includes practicing surgical technologists as well as students.

**Plan of Action**

1.  Assess the pre-program GPAs for the graduates of the past 5 years, from 2008 to present.   Evaluate results and look for correlation between GPA and CST exam performance.  Based on data analysis, the program will study whether to raise the GPA prerequisite if a significant correlation is seen.

2.  Assess science course GPAs for all graduates in the past 5 years, from 2008 to present.  Evaluate results and look for correlation between science course GPA and program outcomes.  Based on data analysis, the program will study whether to raise the GPA prerequisite if a significant correlation is seen.

3.  Implement the Division’s TEAS exam (Test of Essential Academic Skills) for all students currently on the Program’s applicant list.  Implementation of this exam is a pilot and exploratory in nature and will be used to evaluate whether scores on this exam can help predict program success.  Based on data trends, the program will study whether to use a TEAS exam cutoff score as a criterion for admission.

4. Assess student results on each CST exam content area for the past 5 years. Evaluate whether a deficiency in any one or more content areas are evident. Use results to examine if any possible curriculum changes need to be made based on the findings.

5.  In the past, the program has paid the fee for all students taking the CST exam.  This was done before the CST exam was required as an outcome measure as a way to help make our graduates more competitive in a market that has three AAS degree programs for Surgical Technology within a 10-mile radius of each other.  The lower exam scores may be indicative of low student ownership in their certification status.  Starting in 2014, the fee for the exam will be moved to the student.

**Implementation**

GPA study will begin in June, 2013.  Based on GPA study results of the past 5 years, a more competitive admission model may be implemented beginning Fall Semester, 2015.  Implementation at this time will allow the program to effectively notify all incoming students of admission requirement changes and to grandfather all students currently on the program applicant list.  Should it be determined that admissions changes are necessary, notification to the accrediting board will be made by the department chair.

**Section II: Progress Since the Most Recent Review**

Below are the goals from Section IV part E of your last Program Review Self-Study. Describe progress or changes made toward meeting each goal over the last year.

|  |  |  |
| --- | --- | --- |
| **GOALS** | **Status** | **Progress or Rationale for No Longer Applicable** |
| The department’s goals included program expansion into both pre and post graduate non-cohort tracks. This included development of new certificate programs that meet the needs of the perioperative community. | In progress X  Completed  No longer applicable | The department is continuing work to expand its short term certificate offering with the Sterilization Technology Program. This program was scheduled to open at the Courseview Campus Fall, 2013. However, with the change in leadership and other unknown factors, this program did not premier as planned. There are still plans to move forward with this project with a new implementation date of Fall 2014. |

Below are the Recommendations for Action made by the review team. Describe the progress or changes made toward meeting each recommendation over the last year.

|  |  |  |
| --- | --- | --- |
| **RECOMMENDATIONS** | **Status** | **Progress or Rationale for No Longer Applicable** |
| Document and analyze trend data of General Education outcomes across multiple sections and multiple years to identify successes and opportunities for improvements to assess the curriculum. | In progress X  Completed  No longer applicable | We continue to assess the general education outcomes in each course according to the end of course evaluation rubric. |
| Look for ways to broaden diversity of student populations. | In progress X  Completed  No longer applicable | I continue monitor the diversity of the cohorts. The program remains open admission and all students have an equal opportunity to begin the program. Program cohorts are close to the minority population of the college with an average admission rate of 13.7% and graduation rate of 12.9%. The minority population of the college is 16.2%.  Please see Addendum 1 on page 13 of this report to see data of the program’s Diversity Statistics from 2000-2012.  The program continues to participate in all Sinclair offered Career Fairs at area high schools. These have included Wayne High School, West Carrollton, Mason, and Centerville. The program also hosts many Tech Prep activities that bring a diverse populations to our classroom and lab. The program also travels to schools to do customized presentations. |
| Develop appropriate assessment of impact of the hybrid admissions process. | In progress X  Completed  No longer applicable | The program is currently designing a study to assess admission GPA and program success rates. The admission process currently is based on date of application. If a positive correlation is seen based on the study, the program will implement a hybrid based admission model. |
| Utilize existing campus resources, e.g., Service Learning, Career Services, Adjunct Faculty Services, Writing Center. | In progress X  Completed  No longer applicable | The students are currently working with David Bodary to implement their ‘Service Learning’ project. To match a community need with relevancy to surgical technology, the students are collecting winter weather gear (gloves, hats, boots) for needy populations. ‘Scare Away the Cold’ will run during the week of Halloween with departmental promotional ideas to help increase donations. |
| Work with Jennifer Kostic to develop a plan for recruiting and hiring adjunct faculty who reflect the diversity of the community. | In progress X  Completed  No longer applicable | The department worked closely with Jennifer Kostic to quickly bring on a part-time faculty member to assist in teaching a Veterinary Technology course this past Spring Semester. This part-time faculty member is now a Full Time Tenured Track faculty member for the department. |
| Maintain existing and new connections with hospitals to ensure adequate availability of clinical sites. | In progress X  Completed  No longer applicable | The department will develop a plan to work closely with the Division’s Assistant Dean to develop contracts with two new large area healthcare facilities. Specifically, Soin Medical Center and Miami Valley South. Until recently, these facilities have resisted developing new contracts until staff is hired, oriented, and policies are in place. |
| Differentiate the position of our SUT program relative to others by marketing program quality, pass rates, cost of education, curriculum. | In progress X  Completed  No longer applicable | The department has used existing resources to ensure information on the web is current, accurate, and assessable to prospective students who may be ‘shopping’ for a Surgical Technology Program.  There are 3 AAS Surgical Technology Programs within a 10 mile radius in Dayton alone. |

**Section III: Assessment of General Education & Degree Program Outcomes**

The Program Outcomes for the degrees are listed below. **All program outcomes must be assessed at least once during the 5 year Program Review cycle, and assessment of program outcomes must occur each year**.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **General Education Outcomes** | To which degree(s) is this program outcome related? | Year assessed or to be assessed. | Assessment Methods  Used | What were the assessment results?  (Please provide brief summary data) |
| Critical Thinking/Problem Solving | | All programs | **2012-2013** | Case study exercise in SUT 1110 & 1120 using ANGEL discussion forum | 100% student participation met all assignment requirements i.e., adequate number of posts to classmates, identification of critical factors important to subject matter etc. |
| Values/Citizenship/Community | | All programs | **2013-2014** |  |  |
| Computer Literacy | | All programs | **2014-2015** |  |  |
| Information Literacy | | All programs | **2015-2016** |  |  |
| Oral Communication | | All programs | **2016-2017** |  |  |
| Written Communication | | All programs | **2016-2017** |  |  |
|  | |  |  |  |  |
| **Program Outcomes** | | To which course(s) is this program outcome related? | Year assessed or to be assessed. | Assessment Methods  Used | What were the assessment results?  (Please provide brief summary data) |
| Utilize critical thinking as a basis for clinical judgment and anticipatory decision making when providing perioperative care. | | SUT 1110/1117, 1120/1127, 2110/2117, 2120/2127, 2200/2207,  BIO 1121,1222, 2205; ALH 1142, 1201; MAT 1130, SUT Elective | Assessed annually. | End of Semester Skills Assessment – SUT 1110 / 1120 | 100% pass rate on the summative skills assessment.  All essential skills assessed using rubric. |
| Demonstrate safe performance of perioperative skills. | | SUT 1110, 1117, 1120, 1127, 2110, 2120, 2127. 2200; 2207, COM 2206 or 2211; HIM 1101; MAT 1130; BIO 1121, 1122, 2205; ALH 1142 | Assessed annually. | End of Semester Skills Assessment – SUT 1110 / 1120 | 100% pass rate on the summative skills assessment.  All essential skills assessed using rubric. |
| Demonstrate professional behaviors of caring, accountability, responsibility, and respect for the patient’s rights of privacy, confidentiality, dignity, comfort, and quality of care. | | SUT 1110, 1117, 1120, 1127, 2110, 2117, 2120, 2127, 2200; 2207, COM 2206 or 2211; ALH 1101; PSY 1100, HUM Elective, SUT Elective | Assessed annually. | End of Course Faculty and Preceptor Evaluations | 100% of the students evaluated using the end of course faculty and preceptor evaluations showed a score of 3 or 4 in each category. |
| Utilize effective interpersonal communication and group process skills. | | SUT 1110, 1117, 1120, 1127, 2110, 2117, 2120, 2127, 2200; 2207, COM 2206 or 2211; ALH 1101; ENG 1101, PSY 1100 | Assessed annually. | End of Course Faculty and Preceptor Evaluations | 100% of the students evaluated using the end of course faculty and preceptor evaluations showed a score of 3 or 4 in each category. |
| Assume the role of an involved, supportive surgical team member. | | SUT 1110, 1117, 1120, 1127, 2110, 2117, 2120, 2127, 2200; 2207, PSY 1100; COM 2206 or 2211; ALH 1101 | Assessed annually. | End of Course Faculty and Preceptor Evaluations | 100% of the students evaluated using the end of course faculty and preceptor evaluations showed a score of 3 or 4 in each category. |
| Provide for physiological safety and emotional security of patient and surgical team. | | SUT 1110, 1117, 1120, 1127, 2110, 2117, 2120, 2127, 2200, 2207; COM 2206 or 2211; PSY 1100 | Assessed annually. | End of Course Faculty and Preceptor Evaluations | 100% of the students evaluated using the end of course faculty and preceptor evaluations showed a score of 3 or 4 in each category. |

**General Education Outcomes**

1. Are changes planned as a result of the assessment of general education outcomes? If so, what are those changes?

No changes planned.

1. How will you determine whether those changes had an impact?

NA

**Program Outcomes**

1. Are changes planned as a result of the assessment of program outcomes? If so, what are those changes?

No program outcomes changes planned.

1. How will you determine whether those changes had an impact?

NA

**Improvement Efforts**

1. What were the results of changes that were planned in the last Annual Update? Are further changes needed based on these results?

The department will continue to use current formative and summative assessment rubrics as the tool for assessment and evaluation.

1. Are there any other improvement efforts that have not been discussed in this Annual Update submission?

None

**APPENDIX – PROGRAM COMPLETION AND SUCCESS RATE DATA**

**Degree and Certificate Completion**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Division | Department | Department Name | Program | FY 07-08 | FY 08-09 | FY 09-10 | FY 10-11 | FY 11-12 | FY 12-13 |
| LHS | 0630 | Surgical Technology | SUT.AAS | 12 | 19 | 17 | 14 | 10 | 2 |
| LHS | 0630 | Surgical Technology | SUT.S.AAS | . | . | . | . | . | 11 |
| LHS | 0630 | Surgical Technology | TBT.S.STC | . | . | . | . | . | 1 |
| LHS | 0630 | Surgical Technology | TBT.STC | 4 | . | 18 | 11 | 7 | . |

**Course Success Rates**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Department** | **Department Name** | **Course** | **FY 07-08** | **FY 08-09** | **FY 09-10** | **FY 10-11** | **FY 11-12** | **FY 12-13** |
| 0630 | Surgical Technology | SUT-100 | 70.0% | 81.8% | 92.3% | 85.7% | 91.7% | . |
| 0630 | Surgical Technology | SUT-101 | 100.0% | 88.9% | 91.7% | 100.0% | 90.9% | . |
| 0630 | Surgical Technology | SUT-1101 | . | . | . | . | . | 76.9% |
| 0630 | Surgical Technology | SUT-1107 | . | . | . | . | . | 69.2% |
| 0630 | Surgical Technology | SUT-111 | 94.7% | 100.0% | 100.0% | 86.7% | 100.0% | . |
| 0630 | Surgical Technology | SUT-1110 | . | . | . | . | . | 86.7% |
| 0630 | Surgical Technology | SUT-1117 | . | . | . | . | . | 86.7% |
| 0630 | Surgical Technology | SUT-112 | 100.0% | 95.2% | 100.0% | 100.0% | 100.0% | . |
| 0630 | Surgical Technology | SUT-201 | 100.0% | . | 100.0% | 100.0% | 100.0% | . |
| 0630 | Surgical Technology | SUT-202 | 100.0% | . | 100.0% | 100.0% | 90.0% | . |
| 0630 | Surgical Technology | SUT-2101 | . | . | . | . | . | 100.0% |
| 0630 | Surgical Technology | SUT-2107 | . | . | . | . | . | 100.0% |
| 0630 | Surgical Technology | SUT-211 | 100.0% | 100.0% | 95.0% | 93.3% | 91.7% | 87.5% |
| 0630 | Surgical Technology | SUT-212 | 85.7% | 100.0% | 94.4% | 100.0% | 100.0% | . |
| 0630 | Surgical Technology | SUT-2120 | . | . | . | . | . | 100.0% |
| 0630 | Surgical Technology | SUT-2127 | . | . | . | . | . | 100.0% |
| 0630 | Surgical Technology | SUT-213 | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | . |
| 0630 | Surgical Technology | SUT-220 | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | . |
| 0630 | Surgical Technology | SUT-2200 | . | . | . | . | . | 100.0% |
| 0630 | Surgical Technology | SUT-2207 | . | . | . | . | . | 100.0% |
| 0630 | Surgical Technology | SUT-2297 | . | . | . | . | . | 100.0% |
| 0630 | Surgical Technology | SUT-297 | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | . |

**ADDENDUM 1: Diversity Statistics SUT Program**

|  |  |  |
| --- | --- | --- |
| **2000-2012** |  |  |
| **Admission Year** | **% Starting Program** | **% Graduating** |
| 2000 | 20.0% | 22.0% |
| 2001 | 25.0% | 27.0% |
| 2002 | 15.7% | 14.2% |
| 2003 | 13.6% | 8.0% |
| 2004 | 12.5% | 6.6% |
| 2005 | 21.7% | 10.0% |
| 2006 | 15.7% | 16.6% |
| 2007 | 10.0% | 11.0% |
| 2008 | 5.0% | 5.8% |
| 2009 | 13.3% | 14.2% |
| 2010 | 7.0% | 9.0% |
| 2011 | 12.5% | 15.3% |
| 2012 | 6.6% | 8.0% |
| 2013 |  |  |
| 2014 |  |  |
|  | **13.7%** | **12.9%** |

***Note: Minority population at Sinclair Community College – Avg. 16.2%***