



Radiologic and Medical Lab. Science

#6 Plan cycle - 6
Plan cycle 2020/2021
7/1/20 - 6/30/21

Introduction

Unit Mission:

The purpose of the Department of Radiologic and Medical Laboratory Science is to provide high school graduates of southwest Louisiana and two-year college transfer students with the knowledge and skills required for employment in their allied health disciplines.

Institutional Mission Reference:

The Department of Radiologic and Medical Laboratory Science supports the institutional mission of offering baccalaureate curricula distinguished by academic excellence by offering two quality baccalaureate allied health degrees (Medical Laboratory Science and Radiologic Sciences).

Description of services provided to students:

Courses are taught, academic advising is provided, and undergraduate degrees are awarded in medical laboratory science and radiologic sciences. Letters of recommendation are provided either by individual faculty or by committee as requested. Official student organizations are sponsored in each of the degree areas.

Performance Objective 1 Increase enrollment, persistence, retention, and graduation rates for each program offered by the department.

1 Assessment and Benchmark

Benchmark: Increase enrollment by 5% each year in the MLSC program.

Prior to 2018-2019, the benchmark was track student enrollments at each level. Maintain or exceed 2015-2016 levels of declared majors for the BS in Medical Laboratory Science (MLSC) program:

- CLSC - BS Clinical Laboratory Science (inactive effective 201440)
- MLSC - BS Medical Laboratory Science (effective 201440)

1.1 Data

2015-2016:

Major	Conc.	Summer					Fall					Spring				
		F	S	J	Sr	T	F	S	J	Sr	T	F	S	J	Sr	T
MLSC	(blank)	4	1	3	20	28	16	10	7	28	61	15	6	10	28	59

2016-2017:

Major	Conc.	Summer					Fall					Spring				
		F	S	J	Sr	T	F	S	J	Sr	T	F	S	J	Sr	T
MLSC	(blank)	0	2	3	11	16	10	6	13	24	53	6	2	5	23	36

2017-2018:

Major	Conc.	Summer					Fall					Spring				
		F	S	J	Sr	T	F	S	J	Sr	T	F	S	J	Sr	T
MLSC	(blank)	1	4	2	15	22	6	9	9	20	44	0	15	11	27	53

2018-2019:

Major	Conc.	Summer					Fall					Spring				
		F	S	J	Sr	T	F	S	J	Sr	T	F	S	J	Sr	T
MLSC	(blank)	2	6	5	14	27	14	16	17	22	69	7	16	16	27	66

2019-2020:

Major	Conc.	Summer					Fall					Spring				
		F	S	J	Sr	T	F	S	J	Sr	T	F	S	J	Sr	T
MLSC	(blank)	2	1	2	16	21	7	7	22	31	67	7	7	19	35	68

2020-2021:

Major	Conc.	Summer					Fall					Spring				
		F	S	J	Sr	T	F	S	J	Sr	T	F	S	J	Sr	T
MLSC	(blank)	1	5	3	25	34	5	17	8	38	68	5	18	8	39	70

Percentage Change between 2017-2018:

Major	Fall	Total	% Change
MLSC	2017	44	56.818%
	2018	69	
Total	2017	44	56.818%
	2018	69	

Percentage Change between 2018-2019:

Major	Fall	Total	% Change
MLSC	2018	69	-2.899%
	2019	67	
Total	2018	69	-2.899%
	2019	67	

Percentage Change between 2019-2020:

Major	Fall	Total	% Change
MLSC	2019	67	1.492%
	2020	68	
Total	2019	67	1.492%
	2020	68	

1.1.1 Analysis of Data and Plan for Continuous Improvement

2016-2017:

MLSC enrollment trends are directly affected by the limited number of clinical training sites. Enrollment numbers are not expected to increase based upon ongoing discussions with local lab directors.

2017-2018:

MLSC program director and faculty are attending career fairs both on and off campus in order to make the program more visible to the general public. We are also continuing to work on expanding clinical training sites with lab directors in an effort to increase clinical capacity; however, no expansion is expected.

2018-2019:

MLS program had an increase of approximately 41% for the 2018-2019 academic year. The department will continue to monitor and trend, as the MLS program has experienced an upward and then a downward trend in enrollment over the past five years. Currently, this makes the third year there is an increase in enrollment in the MLS program.

2019-2020:

MLS program experienced a decrease from the Fall of 2018 to the Fall of 2019 of approximately 2.9%, which was lower than the University for this semester which was 4.8%. During the Spring Semester, the MLS program experienced an increase of 3% While the University had a decrease of -3.7%. Over all the MLS program was the same for the 2019 -2020 academic year as it was for the 2018-2019. Will continue to trend

2020-2021:

The MLS program experience an increase of 1.5% from the Fall of 2019 to the Fall of 2020, while the increase was not the 5% planned it was an increase, therefore will continue to trend!

2 Assessment and Benchmark

Benchmark: The BS in MLSC program will strive to maintain at least 12 graduates per academic year.

2.1 Data

Academic Year	# of graduates
2011-2012	19
2012-2013	15
2013-2014	11
2014-2015	13
2015-2016	19
2016-2017	11
2017-2018	13
2018-2019	9
2019-2020	14
2020-2021	17
2021-2022	12

2.1.1 Analysis of Data and Plan for Continuous Improvement

2016-2017:

The number of MLSC graduates continues to be limited by the number of local training sites for the senior year internship. Although additional training sites were acquired in recent years, traveling to clinical sites in Beaumont, TX, and Lafayette, LA, is not a viable option for some students.

2017-2018:

The numbers of MLSC graduates continues to increase and decrease around the benchmark of 12 graduates per year and is not expected to change with the current number of clinical affiliates associated with the program.

2018-2019:

The benchmark for this academic year was not met. Students graduate from the MLS program three times a year. There was one student dismissed from the program and was granted re-entry into the program and this delayed her graduation date into another academic year. The benchmark would still have not been met. The MLS program faculty will be continuing to see an increase in the number of students entering the program and projections are that the benchmark will be met during the 2019-2020 academic year.

2019-2020:

The benchmark for the number of MLS graduates is 12. The MLS program surpassed the established benchmark during the academic year of 2019-2020. The graduation rate for the MLS will be trended for two years before changing the established benchmark

2020-2021:

The benchmark for the number of MLS graduates is 12. The MLS program surpassed this benchmark in the 2020-2021 year with 17 graduates. If it continues surpassing next year, then will consider raising the benchmark.

3 Assessment and Benchmark

Benchmark: Increase enrollment by 5% each year in the RADS program.

Prior to 2018-2019, the benchmark was track student enrollments at each level. Maintain or exceed 2014-2015 levels of declared majors for the BS in Radiologic Sciences (RADS) program.

- RADS - BS Radiologic Sciences

3.1 Data

2015-2016:

Major	Conc.	Summer						Fall						Spring					
		F	S	J	Sr	T	CMP	F	S	J	Sr	T	CMP	F	S	J	Sr	T	CMP
RADS	(blank)	6	7	13	30	56	0	72	38	31	37	178	0	55	31	30	44	160	19

2016-2017:

Major	Conc.	Summer						Fall						Spring					
		F	S	J	Sr	T	CMP	F	S	J	Sr	T	CMP	F	S	J	Sr	T	CMP
RADS	(blank)	7	12	15	22	56	0	70	32	31	29	162	0	43	43	20	39	145	15

2017-2018:

Major	Conc.	Summer						Fall						Spring					
		F	S	J	Sr	T	CMP	F	S	J	Sr	T	CMP	F	S	J	Sr	T	CMP
RADS	(blank)	3	15	18	26	62	0	56	36	32	32	156	0	35	43	32	40	150	18

2018-2019:

Major	Conc.	Summer						Fall						Spring					
		F	S	J	Sr	T	CMP	F	S	J	Sr	T	CMP	F	S	J	Sr	T	CMP
RADS	(blank)	6	14	21	28	69	0	49	41	35	33	158	0	32	38	29	39	138	19

2019-2020:

Major	Conc.	Summer						Fall						Spring					
		F	S	J	Sr	T	CMP	F	S	J	Sr	T	CMP	F	S	J	Sr	T	CMP
RADS	(blank)	5	12	19	28	64	0	32	33	29	35	129	0	26	26	38	44	134	22

2020-2021:

Major	Conc.	Summer						Fall						Spring					
		F	S	J	Sr	T	CMP	F	S	J	Sr	T	CMP	F	S	J	Sr	T	CMP
RADS	(blank)	6	11	25	32	74	0	50	31	40	39	160	0	37	41	30	48	156	21

Percentage Change between 2017-2018:

Major	Fall	Total	% Change
RADS	2017	156	1.282%
	2018	158	
Total	2017	156	1.282%
	2018	158	

Percentage Change between 2018-2019:

Major	Fall	Total	% Change

RADS	2018	158	-18.354%
	2019	129	
Total	2018	158	-18.354%
	2019	129	

Percentage Change between 2019-2020:

Major	Fall	Total	% Change
RADS	2019	129	24.031%
	2020	160	
Total	2019	129	24.031%
	2020	160	

3.1.1 Analysis of Data and Plan for Continuous Improvement

2016-2017:

RADS enrollment is down 46 students from the 2014-2015 year, and down 35 students from the 2015-2016 year, indicating a gradual downward trend for enrollment.

2017-2018:

RADS program director and faculty attended career fairs both on and off-campus in order to make the program more visible to the general public. The number of students enrolled is up 16 students from the 2016-2017 year; however, enrollments still down 30 students from the 2014-2015 year. We will continue to work on increasing recruitment efforts to increase enrollment by at least 1-5 students per year.

2018-2019:

The RADS program enrollment for the academic year of 2018-2019 saw a decrease of two students, after an increase of 4 students during the 2017-2018 year from the 2016-2017 year, this was encouraging. However, the RADS program did not meet the desired benchmark of increasing 1-5 students during this past academic year, instead, there was a decrease and the program is down 16 students from the 2014-2015 year. The plan for continuous improvement in enrollment is to work with the declared student in the RADS program and enhance the advising efforts to encourage students to keep trying for the RADS professional program rather than advising them to change their majors prematurely. There is a planned meeting of the RADS advisors on 9/5/19 to discuss this matter further.

2019-2020:

The RADS enrollment is down in the Fall Semester 2020. This is not surprising with the COVID -19 and two major hurricanes. The RADS faculty are active in going to recruitment events when they are possible and will have to plan a plan of recruiting students in the Spring Semester 2021 and assess to see if the plan actually increased the number of RADS students in the Fall Semester 2021

2020-2021:

The RADS program did experience an increase of 16.4 % from the Spring Semester of 2020 to the Spring Semester of 2021. Therefore the benchmark was met, will continue to trend, and continues with activities to increase recruitment.

4 Assessment and Benchmark

Benchmark: 70% of students accepting and enrolling in the program will complete the BS in Radiologic Sciences program.

Assessment tool: Program completion report (comprised of the following):

- Admissions committee report (acceptance vs. graduation);
- Graduate list corresponding two years later; and
- Student folders.

4.1 Data

Year	Program completion rate for graduating cohort of students
2010	10.00%
2011	80.00%
2012	60.00%
2013	76.00%
2014	77.00%
2015	81.00%
2016	80.75%
2017	62.50%
2018	75.00%
2019	79%
2020	96%
2021	88%

4.1.1 Analysis of Data and Plan for Continuous Improvement

2016-2017:

During the previous five years, this benchmark was met, after having five years of not meeting the benchmark, and lowering the benchmark in 2011; the benchmark was lowered to 70% from 75%.

We will continue to trend, as five of the students from this cohort changed their major because of a lack of interest in health care. It was decided that no policies needed to be changed at this time.

2017-2018:

This is the first of a five-year trending cycle, as was determined in 2017 when the benchmark was not met for the first time in five years. The decision was made in 2017 to trend in five years.

2018-2019:

Continuing to trend as this is the second year of a trending cycle for five years. The plan for continuous improvement will be if the completion rate continues to stay well above 75%, then the RADS program may wish to consider increasing this to a 75% completion rate per year.

2019-2020:

This is the third year of trending a 5 year trending cycle. This is the highest completion rate in the last 10 years. If the RADS program continues to follow this trend then the completion rate benchmark will be elevated.

2020-2021:

This is the fourth of a 5-year trending cycle, as was determined in 2017. This is the third consecutive year the benchmark was met. Will continue to trend as the past three years there has been an increase with each year until this year and it went down 8% but was still within the benchmark.

5 Assessment and Benchmark

Benchmarks:

- A persistence rate (retained students from fall Y1 to spring Y1) of 85%.
- A retention rate of 70% from Y1 to Y2.
- A retention rate of 55% from Y1 to Y3.
- A retention rate of 45% from Y1 to Y4.
- A 4-year graduation rate of 35%.

Major	Cohort Size	Same Major?	Rate		Y1 to Y2		Y1 to Y3		Y1 to Y4		4-Year		5-Year		6-Year	
			#	%	#	%	#	%	#	%	#	%	#	%	#	%
MLSC	5	Same	4	80.0												
		Changed	0	0.0												
		Total	4	80.0												
RADS	41	Same	32	78.0												
		Changed	4	9.8												
		Total	36	87.8												
Total	46	Same	36	78.3												
		Changed	4	8.7												
		Total	40	86.9												

5.1.1 Analysis of Data and Plan for Continuous Improvement

2018-2019:

- The persistence rate was met for 2018. In reviewing the persistence rates for the six previous years from 2012 to 2017, the data reveals the department met the persistence rate for every year except the 2014 and the 2016 years. For the two years in which the 85% benchmark was not met, it was still very close to being met with 84% in 2016 and 83.7% in 2014. The department has met the benchmark in five of the past seven years; therefore, there is no need for a plan for continuous improvement.
- The retention rate for Y1 to Y2 has an established benchmark of 70%. The department has met the benchmark for four of the past six years; therefore, there is no need for a plan for continuous improvement.
- The retention rate for Y1 to Y3 has an established benchmark of 55%. The department has met the benchmark for four of the past five years; therefore, there is no need for a plan for continuous improvement.
- The retention rate for Y1 to Y4 has an established benchmark of 45%. The department has met the benchmark for four of the past four years; therefore, there is no need for a plan for continuous improvement.
- The graduation rate data is available for the 2012 cohort of students only.
 - The benchmark for the four-year graduation rate is 35%. The department has a 32.8% four-year graduation rate; thus, the benchmark was not met.
 - The benchmark for the five-year graduation rate is 40%. The department has a 21% five-year graduation rate; thus, the benchmark was met.
 - The benchmark for the six-year graduation rate is 45%. The department has a 44.3% six-year graduation rate; thus, the benchmark was not met, but only by 0.7%.
 - After analyzing the graduation rates, the plan is to trend this with the future graduation rates as they become available and plan accordingly.

2019-2020:

The only data available for review is the persistence rate. The persistence rate for the department in 2019 met the established benchmark.

2020-2021:

The only data available for review is the persistence rate. The persistence rate for the department in 2020 met the established benchmark. The retention rates were added for the Y1 to year two for 2019-20 and the benchmark was met, will continue to trend.

Performance Objective 2 Provide a comprehensive curriculum that reflects disciplinary foundations and remains responsive to contemporary developments, student and workforce demand, and university needs and aspirations.

1 Assessment and Benchmark

Benchmark: MLSC faculty members are required to stay up-to-date with current developments in the field of laboratory medicine. Faculty members complete 12 hours of continuing education each year and maintain a current Louisiana State Board of Medical Examiner's (LSBME) license in Medical Laboratory Science.

1.1 Data

2016-2017:

Proof of current LSBME license and copies of continuing education hours are turned in to the department head each year with the Annual Performance Report. Data maintained by instructors and department head.

2017-2018:

Both MLSC faculty are up-to-date, hold a current LSBME license, and have completed a minimum of 12 hours of continuing education respective to their discipline during the year.

2018-2019:

Both MLSC faculty continue to stay up-to-date and hold current LSBME licenses and have completed more than the minimum of 12 hours of continuing education respective to their discipline during the year and this is reported on each of their annual performance reports.

2019-2020:

Both of the MLS faculty have continued to stay up-to-date and hold current LSBME licenses. They continue to obtain the required hours of continuing education during this difficult time by attending virtual meetings and obtaining online education!

2020-2021:

Both of the MLS faculty have continued to stay up-to-date and hold current LSBME licenses. They continue to obtain the required hours of continuing education during this difficult time by attending virtual meetings and obtaining online education!

1.1.1 Analysis of Data and Plan for Continuous Improvement

2016-2017:

All continuing education hours and LSBME licenses are current and up to date. Each clinical instructor's documentation is maintained by his/her lab director and is regulated by CAP or JCAHO inspectors. (A LSBME license is required by law to work in a medical laboratory in the state of Louisiana).

2017-2018:

All MLS faculty continue to stay current in their discipline and hold the valid license required by law for the state of Louisiana. Departmental APR plan has been revised to give an incentive to go above the minimum number of required continuing education hours to encourage faculty to increase the number of continuing education and professional development hours.

2018-2019:

All MLS faculty continue to stay current in their discipline, and the benchmark was met. The department initiated an incentive within the Annual Performance report for faculty to receive extra points when they go over the required hours in continuing education to renew their license. The plan for continuous improvement will be to track this over the next few years to see if the MLS faculty continue to exceed the required number of hours for continuing education. If the MLS faculty continue to meet the requirement, we will consider raising the limit or consider changing the requirement.

2019-2020:

Both MLS faculty have met the benchmark established and will continue to observe and maintain records of their documentation of the required continuing education requirements.

2020-2021:

Both MLS faculty have met the benchmark established and will continue to observe and maintain records of their documentation of the required continuing education requirements.

2 Assessment and Benchmark

Benchmark: MLS faculty meets at least once per year to review student progress, curricular offerings, professional contacts, and opportunities. Additional meetings are held, as indicated.

2.1 Data

2015-2016:

MLS faculty members met:

- December 9, 2015, 9:00 am
- April 21, 2016, 12:15 pm
- May 12, 2016, 9:30 am.

Topics included: Degree Works, national test scores, student performance, curriculum changes, Blood Bank Grant, Endowed Fellowship, move to Nursing and Health Professions, LACLS student trip, and graduation stoles. All campus faculty members were present. Meeting minutes are on file in the program director's office.

2017-2018:

The MLS faculty meet monthly during the academic year to discuss programmatic matters as well as departmental and college matters. Minutes of the meetings have been scribed and are maintained in the MLS program director's office. Please see the attached minutes for examples of items discussed

2018-2019:

The MLS faculty met every month during the fall and spring semesters during the 2018-2019 academic year. The meeting covered information regarding the upcoming NAACLS accreditation visit for the Spring 2020 and the self-study that is due in October 2019. Also discussed were items such as faculty workloads, clinical issues, and MSL student organization concerns. There are minutes of each meeting on the MLS shared file within the departmental intranet files.

2019-2020:

The MLS faculty met monthly up until March of 2020. Since that time they have met via zoom and have stayed in communication with each other via emails.

2020-2021:

The MLS faculty did not meet monthly during the 2020-21 academic year, as was planned, however they did meet at least twice meeting the benchmark.

2.1.1 Analysis of Data and Plan for Continuous Improvement

2015-2016:

Discussions were held concerning the move to the College of Nursing and Health Professions. Plans were made for use of the Blood Bank Enhancement Grant and Endowed Fellowship. National test scores showed some improvement from the previous year, student performance will continue to be monitored closely in order to meet new NAACLS benchmarks.

2017-2018:

The program director for the MLS program and the department head for RMLS review the minutes, established the need for the continued development of a programmatic calendar, and are developing a plan for more effective clinical site visits by the program faculty.

2018-2019:

The MLS faculty more than met the benchmark during the 2018-2019 academic year. Because of the upcoming on-site evaluation of the program by NAACLS, this is the rationale for meeting monthly. Plans for continuous improvement include evaluating the benchmark during the 2019-2020 academic year to determine if the benchmark needs to state monthly meetings of the faculty or if it should remain just once per year.

2019-2020:

The MLS faculty have met the benchmark during the 2019 - 2020 academic year. The meetings of the MLS faculty will continue to be documented and progress is made as is evident in recent curriculum changes to the MLS program.

2020-2021:

The MLS faculty have met the benchmark during the 2020- 2021 academic year. The meetings of the MLS faculty will continue to be documented.

3 Assessment and Benchmark

Benchmark: The MLS Advisory Committee meets annually to review program effectiveness, trending developments, and workforce demand.

General topics include, but are not limited to:

- Graduation rates
- Certification scores
- Employment/placement rates
- Curriculum improvements
- Clinical sites
- Accreditation standards

3.1 Data

2015-2016:

The MLS Advisory Committee met in May of 2016. Primary topics included national test scores, student performance, new NAACLS benchmarks, new Capstone Project, move to the College of Nursing, Blood Bank Grand, Endowed Fellowship.

Meeting minutes are on file in the program director's office.

2017-2018:

The MLS Advisory Committee met on June 8, 2017. The minutes of the meeting are included.

2018-2019:

The MLS Advisory Committee met on November 7, 2018. The minutes from this meeting are attached.

2019-2020:

The MLS Advisory Committee was unable to meet during the Fall Semester 2020. Plan to resume meeting for the Fall Semester 2021.

2020-2021:

Currently, the MLS Advisory Committee plans on meeting in October of 2021.

3.1.1 Analysis of Data and Plan for Continuous Improvement

2016-2017:

Decisions were made to add a new capstone project. Students will take a pre-test (Midterm) and post-test (near Graduation). The exam will be computerized, created in Respondus, and proctored in a computer lab. Information was shared concerning the Radiological Sciences and Medical Laboratory Science move to the College of Nursing and Health Professions on June 1, 2016.

2017-2018:

The MLS Advisory Committee has been a very powerful tool for providing input for the MLS program. There currently appears to be some apathy from the clinical staff of the clinical affiliates about participating and attending an advisory committee meeting. This apathy has resulted in the committee not being as effective as in the past. Plans are to move the MLS advisory committee meeting to the fall semester in 2018 in an

attempt to have more participation on the committee.

2018-2019:

The MLS Advisory Committee discussed the regional impact of the program with regard to graduation rates, placement rates, admission process and poor returns from employer satisfaction. Plans for continuous improvement include considering other clinical site placements including increasing the capacity at some of the sites currently used and to expand to include all of the following old and new clinical sites: West Calcasieu-Cameron Hospital, Moss Memorial Health Clinic, Path lab, Jennings American Legion Hospital, Beauregard Memorial Hospital, Christus Ochsner Lake Area Hospital, Christus St. Patrick Hospital, Lake Charles Memorial Hospital, University Medical Center in Lafayette, and Rapides Medical Center.

2019-2020:

The MLS Advisory Committee was unable to meet during the Fall Semester 2020. Plan to resume meeting for the Fall Semester 2021.

2020-2021:

The MLS Advisory Committee did the benchmark of meeting annually during the 2020-2021 academic year. This was due to the natural disaster that plagued the Lake Charles Area during 2020 and 2021. However, constant communication did exist via email and phone calls to keep everyone informed and up to date and continues to add information for assessment from the previous year to this years' meetings.

4 Assessment and Benchmark

Benchmark: RADS program faculty meet eight times during the academic year to review student progress, curricular offerings, and appropriate professional contacts and opportunities

4.1 Data

2016-2017:

The program faculty met on the following dates:

- 06/09/16
- 08/18/16
- 09/16/16
- 10/14/16
- 01/13/17
- 02/17/17
- 03/17/17

2017-2018:

The RADS program faculty met on the following dates:

- 6/8/17
- 8/17/17
- 9/15/17
- 10/27/17
- 11/8/17
- 1/11/18
- 1/23/18
- 3/16/18

2018-2019:

The RADS program faculty met on the following dates:

- 6/7/18
- 8/16/18
- 9/7/18
- 10/5/18

- 11/2/19
- 1/10/19
- 2/1/19
- 3/1/19
- 4/5/19

2019-2020:

The RADS program faculty met on the following dates:

- 6/6/19
- 8/15/19
- 9/5/19
- 10/3/19
- 10/31/19
- 1/9/20
- 2/6/20
- 3/5/20
- 5/17/20 zoom
- 6/5/20
- 8/13/20

2020-2021:

The RADS program Faculty met on the following dates during the 2020 -2021 academic year

- 6/4/20
- 8/17/20
- 2/5/2021
- 3/5/2021
- 4/21/2021

4.1.1 Analysis of Data and Plan for Continuous Improvement

2016-2017:

All programmatic changes are reflected in the minutes or noted on agenda. Minutes and agenda are on file in the program director's office, Fransch Hall 226. The program currently has an administrative assistant, after not having one for two years; therefore, minutes are up-to-date.

2017-2018:

The RADS program continues to meet at a minimum of eight times a year to discuss programmatic issues as well as assessment plan benchmarks and to analyze data from the outcomes assessment plan for the program. The program director maintains all program meeting minutes. The meetings have proven to be an effective method for continuous quality improvement.

2018-2019:

The RADS program did meet the benchmark of meeting at least eight times during the academic year 2018-2019. The meetings are for the purpose of functioning as an advisory committee for the RADS program. Items for discussion were primarily centered around clinical issues and concerns with the students and faculty for the professional phase of the program. Other items of discussion were discussing and planing for continuous programmatic improvement including the assessment plan benchmarks and to analyzing the data collected. The RADS program director maintains all program meeting minutes. The meetings have proven to be an effective method for continuous quality improvement. The following are a highlights of a some changes that were voted upon in these meetings.

- Monitoring more closely the results centered around students applying the principles of radiation protection for the patient, self, and others. The average scores on the RADS 349 Test 2 had dropped slightly from the previous year.
- Declaring that a new benchmark or new tool is needed to assess that students are communicating effectively with clinical staff and peers, as the current benchmark had been met consecutively for several years.

- Established the completion rate for the RADS program for the previous year.
- Established a Community Service/Involvement policy for students in RADS professional program.
- Performed the annual review of supervision of students with the clinical, stressing the difference between direct and indirect supervision.
- Decided to raise the benchmark for the objective that students will be able to communicate effectively from a score of 3.0 to 3.5 on Form F-9 during RADS 356, as the benchmark had been met for five years of trending.
- Reviewed the results for the 2018 national certification results for RADS graduates and determined the established benchmark was met.
- Discussed the exploration of reaching out to clinical facilities out of the Lake Charles area, as the RADS program needs to determine ways to increase the number of students they can select for the professional phase of the program.

2019-2020:

The RADS program did meet the benchmark of meeting for a minimum of 8 times during 2019- 2020. The faculty meetings involve meeting with the clinical preceptors for various clinical education settings, and a student representative from the two upper-division levels representing the Junior and Senior classification of students enrolled in the professional phase of the RADS program. At these meetings the programmatic outcomes assessment plans are reviewed, curriculum and admission decisions are discussed!

2020-2021:

The RADS program did not meet the benchmark of meeting a minimum of 8 times during the 2020 - 2021 academic year. This was due to the natural disaster that plagued the Lake Charles Area during 2020 and 2021. However, constant communication did exist via email and phone calls to keep everyone informed and up to date and continues to add information for assessment from the previous year to this years' meetings.

5 Assessment and Benchmark

Benchmark: The percentage of graduates who take the ARRT Radiography exam and become certified radiographers will meet or exceed the national passage rate for first time examinees.

Outcome: Radiologic Sciences Graduates will pass the national certification examination on the first attempt.

Assessment tool: Results of ARRT national certification examination - annual first time pass rates.

5.1 Data

Year	Cohort Passage Rate	National Passage Rate
2013	100%	—
2014	95%	88.5%
2015	100%	88.4%
2016	100%	87.2%
2017	100%	89.3%
2018	95%	89.4%
2019	95%	89%
2020	100%	88.2%
2021		

5.1.1 Analysis of Data and Plan for Continuous Improvement

2016-2017:

The program will continue to monitor the ARRT first time pass rates as this is JRCERT program

effectiveness data that is required to be monitored.

2017-2018:

The program continues to achieve a 100% passage rate for first-time test takers on ARRT national certification examination. The ARRT national test continues to add new content material to the examination and the MSU graduates continue to pass the examination on the first attempt. For the 2018 examination once again more new content items are being added to the examination making it a little more stressful for graduates to pass on the first time. Will continue to monitor knowing new items are being added to the national certification examination.

2018-2019:

The benchmark was met; however, after achieving a 100% first-time passage rate for three straight years, it was disappointing to only receive a 95% first-time passage rate for the 2018 graduates. A 95% first time passage rate implies one individual did not pass the test the first time. This particular graduate did pass it on the second time about one month later, maintaining the program's 100% passage rate. The plan for continuous improvement is to monitor the passage rate next year, and if the benchmark is not achieved, then develop a plan to review what areas there is remediation needed.

2019-2020:

The benchmark was met; the program continues to score higher than the nation. This 95% reflects only one student did not pass the national certification examination on the first attempt. This student was successful in attempting the national examination on their second attempt.

2020-2021:

The results from the national certification examination for the 2021 graduates does not become complete until sometime in October of 21 therefore, actually reporting for the graduates for the 2020 class in which the first time passage rate was 100% and the national average first time passage rate was 88.

6 Assessment and Benchmark

Benchmark: Regardless of the national percentage passage rate on the ARRT examination, the program passage rate should never drop below 75% over a five-year period.

Outcome: Radiologic Sciences Graduates will pass the national certification examination on the first attempt.

Assessment tool: Results of ARRT national certification examination – annual first time pass rates.

6.1 Data

Five-Year Span	Average Passage Rate for First-Time Examinees
2012-2016	96.67%
2013-2017	98.94%
2014-2018	97.87%
2015-2019	97.84%
2016-2020	97.87%

6.1.1 Analysis of Data and Plan for Continuous Improvement

2016-2017:

No immediate action necessary, as this is a benchmark that was met and is established by the national accrediting agency for Radiologic Sciences. We will continue to trend or monitor every year.

2017-2018:

This benchmark is part of the national accrediting agency, the Joint Review Committee on Education in Radiologic Technology (JRCERT) program effectiveness requirements. Therefore this item will continue to be monitored every year.

2018-2019:

This benchmark is part of the national accrediting agency, the Joint Review Committee on Education in Radiologic Technology (JRCERT) program effectiveness requirements. Therefore this item will continue to be monitored every year.

2019-2020:

This benchmark is part of the national accrediting agency, the Joint Review Committee on Education in Radiologic Technology (JRCERT) program effectiveness requirements. Therefore this item will continue to be monitored every year.

2020-2021:

This benchmark was met and is part of the national accrediting agency, the Joint Review Committee on Education in Radiologic Technology (JRCERT) program effectiveness requirements. Therefore this item will continue to be monitored every year.

7 Assessment and Benchmark

Benchmark: Five-year average job placement rate will not be less than 75% of the graduates actively seeking employment within six months post-graduation.

Outcome: Radiologic Sciences graduates will be employed within six months post graduation.

Assessment tool: Graduate questionnaire and formal and informal discussions with students/graduates.

7.1 Data

Year	Graduates actively seeking and gaining employment within 6 months	
	#	%
2013	19	88%
2014	20	100%
2015	21	100%
2016	19	100%
2017	18	100%
2018	18	88%
2019	19	100%
2020	21	100%
2021		

7.1.1 Analysis of Data and Plan for Continuous Improvement

2016-2017:

No immediate action necessary as this is a benchmark that was met and it is established by the JRCERT. We will continue to trend or monitor.

2017-2018:

Will continue to monitor job placement as it is required by the programmatic accrediting agency, the JRCERT.

2018-2019:

The benchmark was met as the five year average for job placement within six months is 97.6%, and the job placement within 12 months for the same five year period is 100%. There was a total of two students from the class of 2018 who did not have jobs within six months following graduation. One student had an attitude

issue and was not desired by local employers because of that reputation. The other student did not actively start seeking employment until about seven months following graduation, as they were waiting on their spouse to gain acceptance into physical therapy school, so they would know where to look for a job. Both were employed by the eighth month following graduation. There does not appear to be a reason to plan for continuous improvement at this time.

2019-2020:

The benchmark was met for the five-year average for job placement within 12 months following graduation was 100% for the class of 2018. The five-year job placement for the period of within 6 months following graduation was 97.% for this five year period, however, it was 100% within six months for the class of 2019.

2020-2021:

The benchmark was met for the five-year average for job placement within 12 months following graduation was 100% for the class of 2019. The five-year job placement for the period of within 6 months following graduation was 100% for this five year period, however, it was 100% within six months for the class of 2020.

Performance Objective 3 Provide the surrounding medical community with nationally certified medical laboratory scientists.

1 Assessment and Benchmark

Benchmark: 80% of MLS graduates actively seeking employment will be employed within 2-6 months of graduating.

1.1 Data

Academic Year	Graduates employed before graduating		Graduates employed within 2 months of graduating		Graduates employed within 6 months of graduating	
	#	%	#	%	#	%
2013-2014	—	—	—	100%	—	—
2014-2015	—	63%	—	36%	—	—
2015-2016	—	69%	—	31%	—	—
2016-2017	—	100%	—	—	—	—
2017-2018	—	67%	—	8%	—	25%
2018-2019	7	78%	2	22%	—	—
2019-2020	7	50%	3	21%	3	21%
2020-2021	14	82%	2	11%	—	—

1.1.1 Analysis of Data and Plan for Continuous Improvement

2015-2016:

Benchmark met. This statistic remains well above the national average, as the need for MLS graduates continues to grow in this area.

2017-2018:

Continue to meet benchmark regarding employment, as the program prepares graduates for the healthcare industry in the area of medical laboratory scientists, with 100% of graduates gaining employment before six months post-graduation. Also, the Bureau of Labor Statistics (BLS) reports that employment of medical laboratory technologist is expected to grow by 13% between 2010-2020, therefore this trend is not expected to change.

2018-2019:

The MLS program continues to meet the benchmark. For 2018-2019, 100% of graduates were employed within two months following graduation.

2019-2020:

The MLS program continues to meet the benchmark. For 2019-2020, 100% of graduates were employed within six months following graduation.

2020-2021:

The MLS program continues to meet the benchmark. For 2020-2021, 100% of graduates were employed within six months following graduation. One individual did not seek employment due to health issues. Due to COVID-19 there is a major shortage of MLS personnel.

2 Assessment and Benchmark

Benchmark: 80% of MLS graduates will seek employment within the state of Louisiana.

2.1 Data

Academic Year	Graduates employed within the state of LA	
	#	%
2013-2014	—	78%
2014-2015	—	91%
2015-2016	—	85%*
2016-2017	—	91%
2017-2018	—	67%
2018-2019	—	78%**
2019-2020	6/14	42.8%
2020-2021	14/17	82.3%^

*The remaining 15% of graduates gained employment in Beaumont, TX.

**The remaining 22% of graduates gained employment in Houston, TX.

^The remaining graduates gained employment in Beaumont, TX.

2.1.1 Analysis of Data and Plan for Continuous Improvement

2015-2016:

Benchmark met. This statistic accounts for the number of students seeking employment within the state of LA. Some students seek employment in nearby Texas cities.

2017-2018:

Benchmark not met. There were ample job opportunities for graduates to be employed within the state of Louisiana. However, only 67% accepted employment in the state, with 8% employed in Beaumont, TX, 17% employed in Houston, TX, and 8% seeking employment in FL. Will continue to trend for three to five years, and if graduates are still electing to look for employment outside the state a benchmark change will be in order.

2018-2019:

The benchmark was not met for a second straight year. Again, although there are ample job opportunities for graduates to be employed within Louisiana, graduates are electing to accept employment at facilities outside the state of Louisiana. The advisory committee will consider adjusting the % of graduates employed in Louisiana or to include neighboring states by stating 80% of graduates will accept employment in the region. This will be added to the agenda for the next advisory meeting and for the MLS faculty to consider.

2019-2020:

This was the most diverse graduating class today, with students from 6 different countries of origin. With few local ties these students chose to relocate.

2020-2021:

The benchmark was met, will continue to trend.

3 Assessment and Benchmark

Benchmark: 80% of MLS graduates will seek employment within a medical laboratory.

3.1 Data

Academic Year	Graduates employed within a medical laboratory	
	#	#
2013-2014	—	100%
2014-2015	—	100%
2015-2016	—	100%
2016-2017	—	100%
2017-2018	—	100%
2018-2019	—	100%
2019-2020	14/14	100%
2020-2021	16/16	100%

3.1.1 Analysis of Data and Plan for Continuous Improvement

2015-2016:

Benchmark met. Although graduates are trained to work in medical laboratories, they may choose to work in other areas - such as industrial refineries, education, research labs, or crime labs.

2017-2018:

Graduates continue to work in the medical laboratories, even though in the past some graduates elect to work in the Petro-chem industry and other types of labs. The program will continue to direct curricular efforts to the medical industry as this is where the majority of recent graduates are electing to seek employment.

2018-2019:

Graduates from the MLS program for the academic year of 2018-2019 all were employed in a medical laboratory. Therefore the benchmark was met and the program plans to continue with the emphasis on the medical laboratory science as this is currently where all graduates are being employed.

2019-2020:

Graduates from the MLS program for the academic year of 2019-2020 all were employed in a medical laboratory. Therefore the benchmark was met and the program plans to continue with the emphasis on the medical laboratory science as this is currently where all graduates are being employed.

2020-2021:

Graduates from the MLS program for the academic year of 2020-2021 all were employed in a medical laboratory. Therefore the benchmark was met and the program plans to continue with the emphasis on the medical laboratory science as this is currently where all graduates are being employed. There was one graduate who did not seek employment due to medical issues.

4 Assessment and Benchmark

Benchmark: 80% of MLS graduates will pass the American Society for Clinical Pathology Board of Certification (ASCP BOC) National Exam within 12 months of graduating.

4.1 Data

Academic Year	Graduates who passed ASCP BOC within 12 months		Graduate pass rate on the first attempt	
	#	%	#	%
2013-2014	—	87%	—	—
2014-2015	—	85%	—	77%
2015-2016	—	94%	—	58%
2016-2017	—	91%	—	73%
2017-2018	—	92%	—	85%
2018-2019	—	88%	—	63%
2019-2020		77%		69%
2020-2021	11/13	85%	9/13	69%

4.1.1 Analysis of Data and Plan for Continuous Improvement

2015-2016:

Benchmark met. Two additional review exams will be added for the 2016-2017 academic year to assess student readiness for the ASCP BOC. Test scores will be reassessed next year.

2017-2018:

The MLS program faculty are in the efforts of trying to break a trend of past graduates who elect to take the examination for the first time as just a practice exam, rather than taking it seriously. This trend is also in the local MLS community, however, the MLS faculty are making great efforts in breaking this trend and will continue to work with students during the senior year in preparation for passing the examination on the first time and not waiting to take the exam at a later date after taking it once as a practice exam.

2018-2019:

The benchmark was met for the graduates of 2018, and also there was an increase in the first-time passage rate on the certification examination. The MLS program director has purchased the ASCP new edition study guide for the certification examination. The trend is going up and the MLS program will continue to monitor this trend and to see if the study guide purchased and the study sessions that are being offered will increase the passage rate percentages.

2019-2020:

The benchmark of an 80% passage rate within 12 months was not met for the graduates of 2019-2020. The MLS faculty will be developing on a national certification review sessions and incorporating special practice questions throughout the curriculum

2020-2021:

The data is actually for the graduates from the 2019-20 year as the benchmark is set for passing the test 12 months after they graduate. The benchmark was met.