

Utah State University
Health Professions Programs
Assessment
2021

Surgical Technology Program

The surgical technology program is taught over a 64 week period or four semesters. Students are required to have a semester of pre-requisites prior to acceptance into the program. The student must have a GPA of 3.0 for acceptance into the program and maintain a 3.0 throughout the program. Students will begin clinical rotations starting the first semester of the program and will be required to complete 120 surgical cases of increasing complexity from a wide range of specialties by the end of the program. The USUE Surgical Technology program aligns the didactic courses with the national core curriculum developed by the National Board of Surgical Technologist and Surgical Assisting (NBSTSA). Once students complete the program, they are able to sit for the Certified Surgical Technologist (CST) exam offered through NBSTSA. In order to sit for this exam, a student must complete a nationally accredited program.

A strategic plan and Self-Evaluation Report (SER) for learning was submitted to Accrediting Bureau of Health Education Schools (ABHES) for accreditation and was accepted. The strategic plan is attached. The USUE ST program was accredited through ABHES for four years until February 28, 2025. In order to obtain and maintain accreditation, required outcomes are set forth by the ABHES. Student assessments for required courses are embedded in the course and the program must track the student outcomes listed on the attached strategic plan.

ABHES also requires that a yearly annual report to evidence that the program is meeting required outcomes. It is imperative that the program maintains required outcomes to maintain accreditation.

The program learning objectives as set forth by core curriculum are as follows:

Disciplinary Knowledge

1. Correlate the knowledge of anatomy, physiology, pathophysiology, and microbiology to the roles and responsibilities of a surgical technologist
2. Apply basic knowledge of medical assisting process and concepts of health and illness when implementing medical care.
3. Describe wellness promotion and disease prevention concepts.
4. Demonstrate a working knowledge of state and federal laws pertaining to the role of the medical assistant.
5. Use legal, moral, and ethical principles to evaluate the care of a surgical patient.
6. Assume responsibility for continued career development as related to expanding knowledge based on a changing health care system.
7. Apply the knowledge and skills of a surgical technologist to address the psychosocial needs of the surgical patient.

8. Pass the national certification examination of the National Board of Surgical Technologist and Surgical Assisting (NBSTSA).

Skills and Career Competencies

1. Identify commonly-used equipment, supplies, and medications used in the perioperative setting.
2. Apply the principles of asepsis to any perioperative event.
3. Practice and adhere to effective infection control procedures.
4. Demonstrate ethical conduct.
5. Demonstrate active and engaged listening skills.
6. Communicate clearly and effectively, both verbally and in writing.
7. Demonstrate a respectful and professional attitude when interacting with diverse patient populations, colleagues, and professionals.
8. Perform competently and safely the skills of an entry-level surgical technologist.
9. Demonstrate the professional attributes of a surgical technologist.

All program listed above have assessments embedded in the course. Not only does the program have a strategic plan, all health profession programs utilizes a living document known as the Program Effectiveness Plan (PEP) to track program outcomes and monitor the effectiveness of the programs. Program satisfaction is gauged through surveys sent to the following groups: current students, graduate students, clinical affiliates and employers. Responses are graded on a Likert scale of 1-5 (5 being the highest). The goal for program satisfaction is a 3 or above on a Likert scale on all surveys. Student responses as well as comments are taken seriously and reviewed by the faculty and Health Professions director. Any responses below a "3" on the Likert scale are evaluated and an action plan for correction is developed. Surveys are sent out the third week in February and the third week in October as Health Professions programs run fall and spring semesters. Once the surveys and outcomes are tabulated, and a correction plan is developed for student concerns, the results are entered into the PEP and presented to the program's advisory board for their review and recommendations. If a correction plan is agreed upon by the board, faculty and HP program director, then the plan is implemented and the results of the plan are reported on during the next advisory board meeting. This allows time for the plan to be evaluated after implementation for at least six months as the advisory board meetings are held bi-annually in the spring and fall.

The USUE Surgical Technologist Program PEP is attached.

Surgical Technician Program

Price Campus

Strategic Plan

June 31, 2021

The Role of the Program Within the Community

Carbon and Emery Counties sit in the eastern part of the State of Utah and combined, the two counties have a population base of approximately 30,000 residents. Health care is classified as rural medicine in these counties. There is one hospital located in Price, UT, and several health care clinics in Price, Emery, Castle Dale, and Green River, Utah.

The Utah State University Eastern Surgical Technology Program is the only program located in the area with the next closest program located 118 miles to the north in Salt Lake City, Utah. There is a need for medical assistants in the area particularly in the operating room. There are also many job opportunities within the State of Utah, with many health care facilities calling the program to inquire about new graduates.

Students are encouraged to be mindful of civic responsibilities and community service and opportunities for such activities are provided and required. Students participate in a community STEAM festival that is sponsored by Utah State University. Students provide tours of the Surgical Technology labs and classrooms and demonstrate techniques such as patient screening and explain the typical work day in the life of a surgical technician in an operating room setting. Activities that pertain to a surgical technician's role are developed so that the public can participate.

The surgical technology students also participate with other programs in mock drills and disasters demonstrating how all health professions interact in the event of an emergency. This helps with training of all programs.

Surgical Technology students at USU participate in a clothing drive to support USU Global Health efforts while some volunteer to travel in the summer with the Global Health Practitioner Outreach Program on mobile health clinics providing health care and medical services to some of the most impoverished countries in the world.

Long-term Program Goals

1. Develop a quality and sustainable program that is career focused and will fill the needs of the community with regards to medical assistant jobs.
2. Utah State University (USU) Surgical Technology (ST) Program will lead to employment of our graduates as entry-level surgical technicians upon completion of the program.
3. The program will enhance the reputation of the University for learning, discovery and engagement.
4. The program will strengthen the recruitment, retention, graduation and placement of students and as part of that goal decrease the faculty to student ratio.
5. To foster new partnerships both internally and externally.

Specific Measurable Objectives

Utah State University Surgical Technology program uses the following criteria as outcome measures of the effectiveness of the program:

- 70% of all students enrolling in the USUE program will complete the program and graduate.
- 70% of all students graduating from the USUE ST program will sit for the national certification exam through the National Board of Surgical Technology and Surgical Assisting (NBSTSA).
- 70% of students participating in the national certification exam will pass the exam.
- 70% of graduates will find positive placement in employment as a surgical technologist or in a related field.
- 70% of graduate survey responders will “strongly agree” or “agree” when asked to rate the overall quality of their preparation as a surgical technologist and 70% will have a satisfaction level of “3” or greater on a Likert scale of 1-5 (5 being the highest) when surveyed about program resources and instructor effectiveness.
- 80% of employers will “strongly agree” or “agree” when asked, “Overall, is this graduate a well-prepared employee” and “Would you hire another program graduate?”

Strategies for Achieving the Goals and Objectives

1. Create an advisory committee consisting of a program student, a program graduate, currently credentialed surgical technologist, employer, licensed member of the surgical team with recent operating room experience, the public (public member is to serve in the role of “potential patient” in assessing continued assessment of public health and welfare), a distance education specialist. Also included are USU Health Professions Program Director, the ST program coordinator/faculty member, and the Health Profession Staff Assistant. The purpose of the committee is to review specific objectives, address program outcomes, and advise as to the need in the community, as well as the response in the community to our program, and review curriculum so that it is current and in keeping with national standards.
2. The USUE Surgical Technology Program will develop strong and supportive working relationships with our clinical preceptors so that our students receive excellent training in the operating room setting. Memorandum of Agreements (MOAs) will be in place prior to our students starting their clinical preceptorship so there is no question as to the role of preceptor and student, and the goals are clearly defined. Program coordinators will visit the clinical sites prior to signing MOAs to ensure the clinical sites are viable sites to meet our core curriculum/skills competencies requirements.
3. The program will utilize student surveys to evaluate student satisfaction with the program.
4. The program will utilize employer surveys to evaluate their satisfaction with our graduate students.
5. The program will track graduation rates and pass rates of our students taking the national certification exam.

Schedule for Analyzing and Evaluating the Plan

The reporting period for which all metrics are measured will be July 1 through June 30, in keeping with the current cycle of all of USUs Health Professions Program reviews. Surveys, graduation rates and certification pass rates will be analyzed. Curriculum review will also take place annually. The Surgical Technology Program under the direction

of the program director, faculty and in conjunction with the advisory board will review the program effectiveness plan at the end of the annual reporting period, meeting minutes will be recorded and review items will include:

- Summary of data collected
- A discussion of the progress made over the past year
- Suggested changes and revisions
- Direction of program for the coming year

Information obtained through this review process will be shared with our advisory committee and placed on the agenda for the fall advisory board meeting.

Utah State University Surgical Technology Program PEP COVER PAGE

Prepared by:	Michele Lyman, Tara Dawn Olsen, Cris Chamberlain, John Redfield
Date Reviewed:	October 20, 2020

Name of Institution:	Utah State University					
ABHES ID#: (Renewal Applicants Only)	N/A New Applicant					
Street Address:	451 East 400 North					
City:	Price	State:	Utah	84501		
Phone:	(435)678-8131	Website:	ASTE.usu.edu/health-professions			

PROGRAM INFORMATION

PROGRAM NAME	IN CLASS CLOCK HOURS	*RECOGNIZED OUTSIDE CLOCK HOURS	TOTAL CLOCK HOURS	LENGTH IN WEEKS: DAY (D), EVENING (E), &/OR WEEKEND (W)	ACADEMIC CREDIT: <input type="checkbox"/> QUARTER <input checked="" type="checkbox"/> SEMESTER	METHOD OF DELIVERY	CREDENTIAL AWARDED DO NOT ABBREVIATE
Utah State University Surgical Technology Program	1350	0	1350	69-D	69	Blended	Associate of Applied Science

Purpose of the Program Effectiveness Plan

Utah State University Health Professions uses the program effectiveness plan as a quality effectiveness tool in assessing each of our health professions programs. Program effectiveness is achieved through asking ourselves the following questions:

1. **Where have we been?** This question is answered by looking at our baseline data and historical outcomes. Because the Surgical Technology Program is a new program to USU Health Professions, we have gathered data from our first two semesters. Such data includes retention rates and satisfaction rates as gathered by our preceptors and students.
2. **Where are we now?** By gathering historical data and comparing to our current survey data, we are able to see emerging patterns as it pertains to our programs and the overall satisfaction rates as the program matures. Are we maintaining student engagement and satisfaction? Are we improving or are our scores declining? This information helps us to evaluate what we are doing well and in what areas we may need improvement. Both the historical data (previous reporting year) and current data (current reporting year) are shared with our advisory board and discussed. Advisory Board members are encouraged to look for patterns in program effectiveness and offer suggestions and recommendations that they feel would help deliver a more effective program.
3. **Where do we want to go?** Based on emerging patterns gathered from historical data and current data comparisons, we are able to better determine what our goals should be to bring about improvement in our program. Again, this step involves the Advisory Board and their input and recommendations for quality improvement in our program. The Advisory Board generally meets in the fall to review data, make recommendations and review goals and then the plan, once implemented is presented again in the spring for the Boards review.

Process Used to Ensure Continuous Improvement

USU utilizes the following process in assessing the program effectiveness and ensuring continuing improvement.

1. Surveys are sent out each semester and include the following surveys:
 - a. Program resources by student are sent out by the Programs Staff Assistant the 3rd week of October and the 3rd week of February.
 - b. Student survey of practicum sites – these are sent by the Program Instructor and collected via Qualtrics.
 - c. Employer survey- once the staff assistant hears from the program instructor that the student is employed, she will send out employer surveys once the student has been employed for at least 15 days.
 - d. Student evaluation by practicum site will be emailed by the instructor to the practicum site for evaluation of our program. This is to get the practicum sites'

perspective on our students' skills, as well as the program strengths and weaknesses and input for improvement.

- e. Graduate survey is sent out via Qualtrics no earlier than 30 days post- graduation.
 - f. Course/Instructor survey by student is sent out via Qualtrics to each student by the HP Staff Assistant
 - g. Pre-externship survey – this is sent to students prior to them entering the clinical portion of the program to assess their readiness for externship.
2. Surveys are collected and data tabulated. Patterns are assessed and comments are considered. Patterns include a significant number of students that might have the same concerns including resources, instructors, practicum sites, tutoring, access to services, etc. This could also be seen in retention rates, certification exam pass rates or feeling prepared to enter externships. All student recommendations or comments are taken into consideration and discussed with the faculty, administration and advisory board. Improvements are made where and when possible with an action plan instituted. Implementation and results are then addressed at the following advisory board meeting. Surveys are then sent out again the following semester to see if there is improvement in the satisfaction ratings and the concerns have been alleviated. In this way, we are able to compare previous data with more current data and identify strategies that will improve program effectiveness.
 3. Board meetings are held each spring and fall. If an emergent problem arises, the board is called for an emergency meeting. Data from surveys (past semester and current semester) is distributed to administration and the board before each meeting and then discussed during the board meeting with time for board response and recommendations. Not only are surveys tabulated and discussed, and an action plan instituted if needed, but curriculum is also reviewed once a year for each health professions program advisory board meeting. Past meeting minutes are also voted on and any unfinished business is taken care of at the next board meeting.

Program Objectives

The Utah State University Surgical Technologist program has established program objectives so that students are fully informed about the requirements necessary to complete the Associate of Applied Science in Surgical Technology. At the completion of the program, the student will be prepared to do the following:

1. Correlate the knowledge of anatomy, physiology, pathophysiology and microbiology to the roles and responsibilities of a Surgical Technologist.
2. Identify commonly used equipment, instruments, supplies, and medications used in the perioperative setting.
3. Apply the principals of asepsis to any perioperative event.
4. Perform competently and safely the skills of an entry-level surgical technologist.
5. Apply the knowledge and skills of a surgical technologist to address the psychosocial needs of the surgical patient.
6. Demonstrate the professional attributes of the surgical technologist.

The program objectives can be found on the program application, student handbook and the website: healthprofessions.usu.edu.

The program objectives are reviewed with the Surgical Technology Advisory Board yearly and are updated as needed to be consistent with the field of study.

PROGRAM EFFECTIVENESS PLAN CONTENT

The program effectiveness plan is reviewed by the program Advisory Board at least once a year at the same time curriculum is reviewed (usually at the fall meeting). The PEP contains the following information:

- a. Program Retention rate
- b. Credentialing examination participation rate
- c. Credentialing examination pass rate
- d. Job placement rate
- e. Surveys that measure both participation and satisfaction rates for the following
 - Students
 - Clinical extern affiliates
 - Graduates
 - Employers
- f. The delivery method for each course
- g. Curriculum assessment

The last surgical technology advisory board meeting was held September 22, 2020. All information contained in the PEP was presented to the board and discussed.

Surveys are sent out each semester to allow students enough time to respond and for the program to receive and tabulate the results prior to the board meetings in the spring and fall. The results are then shared with the board members who are encouraged to make recommendations and share their concerns with the faculty and administration.

- a. **Program Retention Rates:** Retention rates are calculated at the end of each semester. The program director tracks retention rates and reports these at the end of each semester to the health professions program director. If a student withdraws from the program, it is the duty of the program director to speak with the student to see if there is anything the program can do to help the student stay in the program and if not, determines if the student plans to take a leave of absence or is permanently withdrawing. These responses are included in the PEP each year. If the student chooses a leave of absence, the program director will continue to be in contact with the student to see if the program can accommodate the student in any way in their return to the program.

Once the retention rates are received by the health professions program director, she and the ST program director calculate the retention rate using the ABHES method of calculation. Retention rates are shared with the board during the spring and fall advisory board meetings.

$$(EE+G)/(BE +NS+RE)= R\%$$

EE = Ending Enrollment as of June 30

G = Graduates

BE = Beginning enrollment as of July 1

NS = New Starts

RE = Re-entries

R% = Retention Percentage

Program Name & Credential	7/1/2018-6/30/2019 (2 years prior)	7/1/2019-6/30/2020 (1 year prior)	7/1/2020-6/30/2021 (Current)	7/1/2021-6/30/2022 (Goal)
Surgical Technology – Associate of Applied Science	100%	75%		75%

7/1/2018 – 6/30/2019: One student enrolled who was still enrolled as of June 30 2019. There were no graduates as this was the first year the ST program was offered. (1 + 0 =1). There was only one beginning enrollment as of July 1, 2018 and no new starts or re-entries. (1 + 0 + 0 =1)

EE (0) + G(0)/BE(1) +NS (0) + RE (0) = R100%

7/1/2019 – 6/30/2020: Starting 7/1/2019, 1 student was carried over into the next reporting period and there were three new starts. There were still no graduates this year. Here is the following calculation. The very first student took a leave of absence stating that he had to take some time off to support his family as he was the sole financial support of the family. He did not give an expected date of return. The second student also took a leave of absence to fulfill an LDS mission for her church this is typically an 18 month commitment. This was brought before the board and we discussed other demographic information that could help us to determine which students might be more likely to complete the program. All students accepted met the requirements set forth by the application process. The board did not feel it was appropriate to ask students religious affiliation (LDS missions are not uncommon for men and women ages 19-21 and LDS is predominant religion in Utah). Also, it might be possible to ask students if they are the sole source of financial security for the family, but the board did not request that this information be added to the demographics at this time. It was suggested that we hold interviews for applicants to the program prior to acceptance and stress the importance of completing the program and fulfilling all requirements of the program. The board felt it would be appropriate to ask students how confident they were in their ability to complete the program and fulfill the program requirements. In response, this was added to the interview questions.

EE (3) + G (0)/BE (1) + NS (3) + RE (0) = R75%

The Program Effectiveness Plan also includes demographics of the students enrolled in the Surgical Technology Program. Demographics include Ethnicity and Location, Gender and Age, Student Population. These demographics are used mostly to determine where our students are coming from in terms of geographical location and if these students represent traditional or non-traditional students. This helps us focus on the communities that may need more recruiting efforts. The age, ethnicity and gender help us identify those students who may qualify for financial aid or various funding sources.

7/1/2020-6/30/2021: During this reporting period, we carried two students from the previous semester and added four new students for a total of six enrolled students. The two that did not complete the program from the first and second semesters did not return from their leave of absence. At the end of the reporting period, we will calculate the retention rate for the reporting period 7/1/20 – 6/30/2021. Although the program would like to see a 100% retention rate, we realize that this is not a realistic goal as we look at our retention trends and as the program grows. A goal for a 75% retention rate has been set for the reporting period 7/1/20 - 6/30/21.

The USU ST retention rate for reporting cycle 7/1/19 -6/30/2020 was 75% which did meet our stated goal of 75% retention rate. The instructor, Tammy Bonds did follow the policy to meet with each student prior to their withdrawal from the program. Ed Chavez has been contacted several times through emails and phone calls. Ed did respond that he was not coming back to the program. He has pursued three other fields of study before and since leaving the program. He continues to be the sole source of income for his family. We have been unable to contact Emily George as she cannot have contact with outside contacts while in service on her LDS mission. It is unknown whether she will return after her leave of absence. Right before her departure, she did state that she intended to return.

- b. Credentialing exam participation: rates have not been calculated to date as the program has had no graduates to date.** The program is new with its first enrollments spring 2019. The program has set a credentialing exam participation rate at 100%. The program hopes to ensure this goal by requiring all students to pay the credentialing exam fee upon acceptance into the program which is non-refundable. At the end of the program, the fee will be used to pay the student's exam fee. An examination review course will be offered to students prior to testing which the USU ST program anticipates will also help students to be successful in passing their credentialing exams.
- c. Credentialing exam pass rates:** The USU ST program does not yet have graduates and so the pass rates are not applicable at this time. However, the program has set a credentialing exam pass rate at 70%, even though the State of Utah does not require a credentialing exam to work as a surgical technologist in the State. Also, USU does not have a regulatory body that requires certification. Rather, USU holds certification as a quality assurance measure of our programs.

USU has instituted a process for tracking credentialing data. Because students are required to pay the certification exam fee prior to admittance into the program, their fees are held until

they successfully complete the program and are ready to sit for the certification exam. The certification exam is the program final exam. In this way the students not only complete the program, but they also complete the certification exam. As the student notifies the instructor that they are ready to take the exam, the instructor contacts the Health Professions staff assistant and the certification exam fees are paid for that student and the exam is scheduled. Once the exam has been taken, the instructor verifies certification of the student through NBSTSA's website.

Once the certification data has been collected for each class of graduates, the participating and credentialing rates are calculated using the ABHES formula. This rate with backup documentation is then given to the Health Professions Program director for inclusion in the advisory board meeting packets for review. Advisory Board meetings are held in the spring and fall of each year.

- d. **Job Placement Rate:** Although the USU HP program does not yet have graduates, we do have students who have been **placed as surgical technologists**. Presently, two students are working in the field, a third has been offered a job but has not yet accepted the offer. As students have been hired even before they have graduated from the program, the USU ST program views this as evidence that there is indeed great need for surgical technologists in the area consistent with our community needs assessments taken prior to program initiation.

The process for tracking placement data is as follows: the staff assistant for the health profession programs sends out a graduate survey 30 days after the student graduates. In this survey, the student is asked if they have secured employment as a surgical technologist or in a related field. If they answer affirmatively that they are employed in the field, then an employer survey is sent to their employer. Within two weeks, if we have not received surveys back, the staff assistant will send a second round of surveys imploring the student to respond and reminding them of their agreement at the beginning of the program interview process to participate in program surveys. Once the data is collected and tabulated using the ABHES placement formula, the data is distributed to the advisory board members for review at the next advisory board meeting.

A placement rate of 70% has been set for USU ST program graduates.

- e. **Surveys That Measure Participation and Satisfaction:** Surveys are sent at the end of each semester in November and April. This allows enough time for the participants to respond while still allowing the program to tabulate responses and analyze the results prior to presenting results to the advisory board during their fall and spring meetings as well as the Health Professions program director and faculty.

Surveys are sent to the following groups:

1. Students
2. Clinical Extern Affiliates
3. Graduates

4. Employers

An example of each of the surveys is included in the advisory board packet for their review. This allows the board to suggest changes as they deem necessary. The student survey is sent to gain insight into a student’s perspective and overall satisfaction with the program, resources, instruction and clinical experiences. Through the student survey of health professions program resources and the student evaluation of practicum site surveys, we are able to gain better insight into our programs. We are better able to identify our program strengths and areas that need improvement and through input from the advisory board, create an action plan to improve those areas of deficiency.

A satisfaction rate is based on the ABHES required method of calculation, the reporting period July 1 through June 30 as follows:

- 1. **Student Surveys**
Satisfaction Rate = SL/SP
SL= Satisfaction Level
SP= Survey Participation
ABHES Reporting Period

Program Name and Credential	7/1/2018 – 6/30/2019 (2 yrs prior)	7/1/2019- 6/30/2020 (1 yr prior)	7/1/2020- 6/30/2021 (Current)	7/1/2021- 6/30/2022 (goal)		
USU Surgical Technologist Program - AAS	0%	100%	100%	70%		

Starting fall 2019, the USU ST program began a new method of distributing surveys via an online survey system known as Qualtrics. In evaluating previous survey timelines and data gathering, it was ascertained that mailing the surveys resulted in an excessively long turnaround time. Qualtrics has efficiently eliminated the long turnaround time and feedback is now expedient.

In Fall 2019, we sent out emails with satisfaction surveys to our students and clinical sites. Because we only had one enrolled student in Spring 2019, we had not yet started our student survey process. Thus, our participation rate for reporting period 7/1/2018-6/30/2109 was 0%. We were able to calculate the 7/1/2019-6/30/2020 (one year prior) data for student satisfaction rates as follows:

- We had four students enrolled
- We had four students participate

Satisfaction rates were 3 and above on a Likert scale for all four students participating. USU ST's goal of receiving 3 and above on a Likert scale of 5 was met for overall satisfaction.

$$4/4 = 100\%$$

For the reporting period 7/1/2020 – 06/30/2021, we have calculated the following student satisfaction rates:

We had six students enrolled

We had six students participate

Satisfaction rates were 3 and above on a Likert scale for all six students

$$6/6 = 100\%$$

USU ST Program has set a goal for 70% satisfaction and participation rates for reporting cycle 07/01/2021 – 06/30/2022.

Students are provided with and asked to submit an evaluation of their classroom, lab, clinical and externship experiences. When the surveys are about to be sent out, the staff assistant notifies each instructor to let them know the surveys are being sent. This allows the instructors to let their students know to expect the surveys. Once the surveys have been returned, the instructor will be notified of student participation rates so that extra credit can be given to those participating. We expect that extra credit points given for participation by the instructor will increase our rate of participation. Since our clinical externship sites have been evaluated prior to student engagement, we expect that our student satisfaction rate for externship will be high as well. We have set our student participation and satisfaction rate at 70% for current students, graduates and employers.

Survey data is shared with the USU ST Advisory Board during their spring and fall meetings twice a year. Typically, a review of all collected data is performed at the fall meeting. The advisory board will make comparisons to previous year data and ensure that the program is meeting stated goal for satisfaction levels.

The USU ST program had only one student from the previous year (2018-2019) as the program was new. The increased enrollments did give the board a chance to see more responses and they were satisfied with the responses they reviewed; however, they have voiced that they look forward to responses as enrollments increase. The last advisory board meeting was held on September 22, 2020, comments and satisfaction ratings from the surveys were reviewed. One comment of note was in response to the student survey question, "the staff/preceptor at the clinical facility created a non-threatening environment". The response was a 2 on a Likert scale. In accordance with the program goal of all responses being a "3" or above on the Likert scale, this was lower. The corresponding comment was, "I always felt a little lost when I first got there (clinical sites), so if whoever we were assigned to could introduce themselves and let us know we would be following them that day".

This ranking and comment was discussed with the board members and they asked what we could do as a program to ensure that our students felt more comfortable in their clinical rotations. It was determined by the instructor that they could speak with each of the clinical

affiliates and ask them to make a special effort to introduce themselves to make the students feel more welcome and explain to the student who they would be following for the day and what the clinical affiliation expectation of the student would be for that day. The instructor felt like he had explained this before, but would reiterate this again. Many of the clinical affiliate representatives sit on the board and they agreed that they could make the students feel more welcome by acknowledging the students more and agreed to do so. It should be noted that 3 of 4 other student respondents replied that they felt the clinical sites created a non-threatening environment.

As the program is new, it is difficult to discuss trends. Class sizes are small and so individual attention to each student and quality lab and clinical time is spent with each student and often times individual time can be spent with students if needed. The student surveys reflect the students' enthusiasm and satisfaction with the program now. However, the program realizes that as the program grows due to increased enrollments, and the instructor must divide his/her time between all of the program responsibilities, we will have to work to ensure program quality is maintained as well satisfaction levels for all of our stakeholders.

2. Clinical Affiliate Survey

Satisfaction Rate = SL/SP

SL= Satisfaction Level

SP= Survey Participation

ABHES Reporting Period

Program Name and Credential	7/1/2018 – 6/30/2019 (2 yrs prior)	7/1/2019- 6/30/2020 (1 yr prior)	7/1/2020- 6/30/2021 (Current)	7/1/2021- 6/30/2022 (goal)
USU Surgical Technologist Program - AAS	0%	100%	100%	70%

The Clinical Extern Affiliate survey allows the program to gain valuable information from our clinical extern sites on our student's performance in the surgical setting. Clinical affiliates are requested to give a thoughtful and honest assessment of the strengths and weaknesses of the program as evidenced by the students' skills and preparation for work as a surgical technologist. The clinical affiliate is also asked to respond to questions regarding the clinical coordinator and their responsiveness and support to the clinical affiliate, student and clinical site throughout the duration of the students' externship. The clinical affiliation surveys are sent out to each clinical affiliate by the midterm of each semester by the Health Professions staff assistant via Qualtrics. The staff assistant obtains a class roster via Banner (USU's student information system), and a survey is sent to each affiliate for which we have an affiliation agreement and a student placed. The staff assistant contacts the instructor for a list of student placements each semester.

In the past, the clinical extern affiliate survey focused its survey questions more on the individual student's performance rather than the clinical extern affiliates overall satisfaction with the Surgical Technology program. This was noted while reviewing the new ABHES Program Effectiveness Plan Guidebook. As a result, a new survey will be sent out at the end of fall semester 2020. The new survey will focus more on the affiliates' satisfaction with our program so that we can identify any areas that may require improvement or areas in which we are doing a satisfactory job.

Because we only had one enrolled student in Spring 2019, we had not yet started our student survey process. Thus, our participation rate for reporting period 7/1/2018-6/30/2109 was 0%. We were, however, able to calculate the satisfaction and participation rate for the following reporting period, 07/01/2019-06/30/2020:

We had four students enrolled
We had four students participate
Satisfaction rates were 3 and above on a Likert scale for all four students
4/4 = 100%

For the reporting period 7/1/2020 – 06/30/2021, we have calculated the following student satisfaction rates:

We had six students enrolled
We had six students participate
Satisfaction rates were 3 and above on a Likert scale for all six students
6/6 = 100%

USU ST Program has set a goal for 70% satisfaction and participation rates for reporting cycle 07/01/2021 – 06/30/2022.

3. Graduate Surveys

The program gleans much information from the graduate student. These surveys are another way for the program to assess how well they are doing in student preparation to enter the workforce as entry-level surgical technologists. Evaluating the number of graduates placed in jobs also allows us to keep updated on the number of jobs available to our students and community need. Graduate surveys are sent out by the health professions staff assistant 30 days after the student graduates. This allows the student enough time out of the program to think about their training and preparation to enter the workforce as a surgical technologist, begin to prepare for the national certification exam and begin to seek out opportunities for employment. This is a time when graduates really begin to assess the value of their education and how prepared they feel to fulfill the role of surgical technologist. The survey asks questions with regards to the students' education and training and how prepared they feel for employment. This allows a reflection of the program from the graduate's perspective.

The USU ST program is a two-year Associate of Applied Science Degree program. As our first co-hort started spring 2019, we do not yet have graduate students so we are unable to calculate graduate surveys at this time.

4. Employer Surveys

Finally, surveys are sent to employers of the program graduates. The Employer Survey is sent out to employers no earlier than 15 days after employment. This allows the program once again to see how well they are preparing students to enter the workforce. The survey seeks to evaluate the satisfaction level of the employer with their new graduate employee and asks the employer specifically if, based on the training of this student, they would hire another graduate from the program.

Again, because the program has not graduated its first co-hort, employer surveys are not applicable at this time. As mentioned previously, two of our surgical technology students have accepted employment as surgical technologists at Castlevue Hospital and continue to complete their education while working.

Employer surveys will be sent out on these students in keeping with the program's policy.

f. Delivery Method Assessment

The USU Surgical Technology Program is delivered via a blended format. The program is based on the Price campus with a separate classroom on the Blanding campus. The instructor broadcasts via interactive video conferencing (IVC) from Price to Blanding but also has the capability of broadcasting from Blanding back to Price. Students receive lectures in real time and are able to interact with not only the instructor but with other students face to face. The instructor has been trained in distance education delivery systems and is required to take courses offered by USU throughout the year in the fundamentals of the learning management system (Canvas), distance education, technology updates, and others. The courses are offered through Centers for Innovation and Design Instruction.

Peer reviews are performed yearly as well as teaching reviews from Utah Education Network (UEN) or Center for Inclusive Design and Innovation (CIDI) through distance education specialists. Assessments are used to allow instructors to "see" their teaching through another set of eyes in the form of reviewers. Once the reviews have been completed for the year, the Health Professions Program Director meets with each instructor to discuss the results of the teaching review and the instructor is asked for their assessment of the review. This is an opportunity for the instructor to "see" how others view their teaching and respond to this assessment. The instructor is asked to develop a plan based on the review with the HP Director and the plan is placed in the instructors personnel file. This is reviewed again in one year before the next evaluation.

It should be noted that during the evaluation process, the evaluators are encouraged to make suggestions for improvement of delivery method and/or the educational process as they see appropriate.

Cris Chamberlain had his distance education teaching evaluation performed on November 11, 2020. The reviewer was Kimberly Davis, Distance Education Specialist with Utah Education Network (UEN). Kimberly noted that Cris was 10 minutes late starting his course. However, she felt that his content knowledge and lecture was held at a good pace and allowed time for questions and discussions with his students and that the information seemed relevant to the students' lab experiences. She felt there was good communication and good interaction with the students and she noted that the distance education student in Moab was definitely engaged and was able to identify when the instructor was looking at her versus the in-person students. She said it seemed that the students and the instructor were comfortable with one another, that he updated them on changes including COVID guidelines, and was well aware of what students were working on.

Weaknesses that were observed was that the instructor's screen showed the power points in thumbnail view with his notes visible at that bottom of the screen. She felt that this was distracting and thought that the power point should be placed in presentation mode so that students may see only the actual slide. This would make the slide visible in a larger window for remote students. Masks restrict facial expressions which is a difficult situation requiring the instructor to use even more body language to make connections with students and the instructor tends to sit with his arms over his chest during casual conversation. She suggested adopting a more open posture when possible.

It has been demonstrated in all the Health Professions programs that we do not have the discrepancy between retention of distance education students versus face-to-face students. Retention rates are equal to both delivery methods.

To determine student satisfaction with their delivery method, student surveys specific to distance education are sent out each semester. This gives the program the opportunity to better assess trends in overall satisfaction of delivery methods.

g. Curriculum Assessment

The curriculum assessment and development process are based on certifying national guidelines (AST), student achievement outcomes, and input from clinical preceptor sites and the advisory board, as well as the faculty's review of resource materials. The program director, faculty and staff work together to identify materials and resources and seek input from our advisory board and Health Professions Program Director regarding student graduation rates, certifying pass rates, current industry and community needs and qualification requirements.

With this input, the program director, faculty and staff are able to determine curriculum effectiveness and revisions are made yearly when necessary. Curriculum review is performed once per year at the Advisory Board meeting in the fall.

Some of the changes to the curriculum include moving from textbooks to an online textbook conglomerate so that students do not have to pay exorbitant amounts of money for their books. Presently, USU is using Cengage which also provides learning activities and other resources without extra cost to the student. Recently, the department was moved from the College of Education to Career Technical Education under the College of Agriculture. This allowed for a significant reduction in tuition and fees for the Health Professions programs. Tammy Bonds, past ST instructor, determined that educational surgical videos would be beneficial to our students and so these were purchased.

STUDENT POPULATION

As stated earlier in the PEP, we discussed student population characteristics at the board meeting held September 22, 2020. At this meeting, Health Professions Program Director, Michele Lyman, suggested that the board might want to consider adding some student population characteristics to better track student demographics. At the time, there were a lot of items on the agenda and the board elected to move on with the agenda items. Presently, the following characteristics are being tracked:

- ethnicity and location,
- Gender and Age, and
- overall Student Population.

The Health Professions Director, Michele Lyman, has added this topic to the agenda for the upcoming Advisory Board Meeting in the Spring. She would like to offer for consideration for the board tracking the following:

- Employed/Unemployed
- First time college/Prior post-secondary education
- Admission exam score ranges
- High School Graduate or GED
- English as a second language
- Delivery method