INSTRUCTIONAL PROGRAM REVIEW

PROGRAM STATUS

1. Describe how the program supports:

    a. The college mission and core values.

    The AAS core focuses on the needs of the student in preparing them for completion of the AAS degree of choice. As such, it is an essential piece in achieving the mission of Collin College. It is the mission of Collin College and the AAS core by extension to prepare students for the next level whether it is an AAS degree program, a level of higher education at a 4 year institution or entering the Collin County workforce. The AAS core challenges students to learn and develop the cognitive and communication skills necessary for success in further studies and today's workforce.

    Students in the surgical technology program at Collin College share a foundation of common knowledge in the liberal arts with students from other programs. The general education core curriculum promotes cognitive skills and helps to produce life-long learning. The challenging core curriculum requirements serve to strengthen character and develop intellect as well as real world skills. Courses like SPCH 1321 – Business and Professional Speaking, Sociology 1301, and Psychology 2301 provide the students with real world skills to meet the challenges of today's workforce promote creativity and emphasize the importance of diversity and teamwork in problem solving. Other courses, such as PHIL 2303 – Introduction to Logic (which satisfies the Humanities/Fine Arts core requirement), promote creativity and critical thinking skills.

    b. The college strategic plan.

    Improving academic success by implementing strategies for completion is one of the goals of the Collin College strategic plan. The Surgical Technology Program has implemented an important strategy to improve completion of the program. The Program curriculum has undergone a complete revision to afford students the opportunity to complete pre-requisites and program requirements within two years. The faculty-student ratio, following the 12:1 mandate of the Accreditation Review Committee on Surgical Technology and Surgical Assisting, ensures that students receive concentrated faculty advising.

    Providing access to higher education programs that prepare students for changing academic, societal and career/workforce opportunities is another Collin College strategic goal. The Surgical Technology program has reached out to 4 year colleges such as Texas A&M-Commerce through the Texas Two-Step program. The aim is to provide opportunities for students to achieve the goal of a BAAS degree thereby increasing accessibility to higher education opportunities and advancing educational quality.

    The AAS core is an essential component in readying students to move forward into specialized programs. The core prepares students to complete the AAS successfully providing an opportunity for students to transfer to 4 year colleges through the Texas Two-Step program or other Bachelor degree programs.

Surgical technology at Collin College is one example of a technical program leading to an associate degree that is designed to develop marketable skills and promote economic success. The program serves to meet local and statewide needs by filling a gap in the workforce and fueling the economic engine of the region and state. The AAS core provides the cognitive and communications skills necessary to successfully navigate the challenges of the surgical technology program.

Another goal of the Collin College strategic plan is to engage faculty, students, and staff in improving adherence to the Collin College Core Values. The AAS core fosters a sense of creativity and innovation among the students of Collin College. It does so by giving them the cognitive and critical thinking skills that are essential to Creativity and Innovation. Through courses such as Sociology, Psychology, Physics and others the students are exposed to ideas and concepts that expand their awareness of the world around them and the possibilities contained within that newly expanded world. With a new awareness students become empowered to achieve Academic Excellence and they are instilled with a passion for Learning. Empowerment and awareness also lead to students seeking opportunities for Service and Involvement. Through Sociology and Psychology students learn of the needs of the needs of others and are inspired to become involved in Service and Involvement in the community. The resultant development of compassion and awareness leads to newfound Dignity for the students and their Respect for their fellow community members. Self Dignity and Respect for others are the hallmarks of Integrity. The AAS core is essential to student success, without success it is not possible for the students to achieve the Core Values of Learning, Service and Involvement, Creativity and Innovation, Academic Excellence, Dignity and Respect, and Integrity.

Surgical Technology Faculty and Staff are committed to embracing and participating actively to support the Collin Core Values. Examples include: sponsorship of the Surgical Technology Student Organization, membership on committees, participation in career and education fairs, and participation in community outreach programs.

Enhancing the College's presence in the community by increasing awareness, cultivating relationships, building partnerships and developing resources is the last stated goal of the strategic plan. The Surgical Technology Program builds partnerships and increases awareness of Collin College by collaborating with the University of North Texas Health Science Center Medical Students. The Medical Students are invited to learn an introduction to the operating room environment on the Collin campus. Additionally, Surgical Technology Students and Faculty provide a venue for realism related to medical transcription for the Greater North Texas Chapter of Transcriptionists. Also, Surgical Technology participates in career fairs at local high schools and hospitals, and provides tours of their facilities for interested groups. The students participate by providing information to the community at the annual Collin College Health Fair. Collin Surgical Technology faculty provide continuing education for preceptors and clinical educators. Finally, the program cultivates relationships with area hospitals through clinical rotations and inclusion of facility staff into the Program Advisory Committee.

2. How does the program conform to THECB requirements?

     a. List any program requirements from the THECB.

<div style="text-align:center">b. Describe how they are met.</div>

- *Syllabi (Attachment 1)*
  - *HPRS 2300*
  - *SRGT 1171*
  - *SRGT 1260*
  - *SRGT 1409*
  - *SRGT 1541*
  - *SRGT 1542*
  - *SRGT 1561*
  - *SRGT 2130*
  - *SRGT 2561*

- *Average 5 completers per year*
  - Yes
    - 2009 – 6 completers
    - 2010 – 8 completers
    - 2011 – 8 completers
    - 2012 – 10 completers
    - The Surgical Technology Program expects to continue to meet the required number of graduates in future years.

- *Evidence of demand for program graduates*
  - A "communities of interest" need study was conducted prior to the start of the Surgical Technology Program at Collin College. The results of the survey justified the program course offerings. Area hospitals have been very supportive of the program by serving on the Advisory Committee and providing clinical rotations.
  - Market Needs Assessment Narrative (Attachment 2)

- *% of graduates securing employment in the field*
  - 2009 – 100%
  - 2010 – 88%
  - 2011 – 100%
  - 2012 – 100%
  - These percentages were reported to the Accreditation Review Committee of Surgical Technology and Surgical Assisting.

- *Average# of months to employment*
  - 1 month

- *Licensure pass rate if applicable. For any pass rate below state standard, attach plan for raising pass rate*
  - 2009 – 100%
  - 2010 – 88%
  - 2011 – 100%
  - 2012 – 100%
  - This is a National Certification rate. Licensure from the State of Texas does not apply to Surgical Technology.
  - Program pass rates exceed the national average of 54%.

For each item that applies to the program under review, provide the data. If the item does not meet required thresholds/benchmarks, provide an explanation and the plan for improvement

3. How does the program conform to federal requirements?

- *Gainful Employment data*

  2009: Total of 6 students with a 4th Quarter Employment rate of 100%

  2010: Total of 8 students with a 4th Quarter Employment rate of 75%

2011: Total of 8 students with a 4th Quarter Employment rate of 63%

For each item that applies to the program under review, provide the data. If the item does not meet required thresholds/benchmarks, provide an explanation and the plan for improvement

a. List any federal requirements for the program.

There are no specific federal requirements for Surgical Technology

b. Describe how they are met.

The Surgical Technology Program meets Federal and State Requirements for General Education. The requirements are as follows:

ENGL 1301 Composition/Rhetoric I

BIOL 2401 Anatomy and Physiology I

PHED/DANC Any Activity Course (see Core options in Catalog))

SPCH 1311 Fundamentals of Speech Communication (see Speech Core options)

BIOL 2421 Microbiology

COSC 1301 Computers and Technology

BIOL 2402 Anatomy and Physiology II

HPRS 1204 Basic Health Profession Skills

PHIL 2403 Introduction to Logic (see Humanities/Fine Arts Core options in Catalog)

PSYC 2301 General Psychology (may substitute SOCI 1301)

HITT 1305 Medical Terminology

4. List all program literature (course descriptions, degree plans, catalog entries, etc.) and provide last date updated. All program literature must be reviewed and updated no earlier than three months prior to the program review due date.

The following program materials have been reviewed and are up to date;

Title	Type	Last Updated
Surgical Technology Website www.collin.edu/surgtech	website	Reviewed Fall 2012
Surgical Technology Program handbook	Paper handbook	Reviewed Fall 2012
Surgical Technology Brochure	Informational paper brochure	Reviewed Fall 2012
Collin College Catalog	College Catalog	Reviewed Fall 2012

The Surgical Technology Program updated and reviewed all Program Materials as part of an Accreditation Review in Fall 2012.

5. Transferability analysis for instructional programs.

    Surgical Technology Courses are accepted into Bachelors of Applied Science Programs. All courses are transferable as they comply with the Workforce Education Course Manual (WECM) guidelines. There is currently not a BAAS offered in Surgical Technology.

Program	Modifications	Exceptions	University(ies) Accepting as Transfer
BAAS Alternative Dispute Resolution BAAS Business Management BAAS Sociology	21 SRGT hours transfer		University of North Texas
"Custom" BAAS degrees	24 SRGT hours transfer		TAMU-Commerce
BAS Culinary Science and Food Management BAS Business Administration BAS Health Studies	21 SRGT hours transfer		Texas Women's University

Other colleges in the State of Texas also accept Surgical Technology Courses into various Programs of Study.

6. List all university/business and industry partnerships and describe them.

University/Business & Industry	Partnership Type	Special Requirements
Texas A&M Commerce	Educational Curriculum template for transfer of AAS to BAAS degree	
University of North Texas Health Science Center	Educational Multi-disciplinary learning experiences for Surgical Technology and UNT students	

Texoma Medical Center	Educational – Clinical Affiliate	
Methodist McKinney	Same	
Centennial Medical Center	Same	
Texas Health Resources Allen	Same	
Texas Health Resources Plano	Same	
Children's Medical Center Dallas	Same	
Park Central Surgical Center	Same	
Baylor Hospital Carrollton	Same	
Medical Center of Plano	Same	
Baylor Hospital McKinney	Same	
Baylor Heart Hospital Plano	Same	

7. Complete and attach Facilities and Resources template (page 5).

8. Summarize recommendations from and for program advisory committees, list meetings and attach minutes.

7/2009: Recommendation to purchase and utilize AORN Fire video – currently on file and utilized.

11/2011: A committee member suggested that students attend facility inservices related to surgical technology. This suggestion has been implemented at all facilities. The Medical Director suggested that advisory committee members contact medical supply/equipment representatives to provide inservices at Collin College. We are continuing to pursue this option. A suggestion was made that students complete the online introduction to the DaVinci Robotic system. Collin does not currently have access to this program, students may complete the introduction at clinical facilities that utilize DaVinci. A member suggested utilizing the ORlive website, this was already being done.

Advisory Committee Meeting Date	Attach Minutes
April 2006	Advisory Committee Minutes (see Attachment 3 for all minutes)

October 2008	Advisory Committee Minutes
March 2009	Advisory Committee Minutes
July 2009	Advisory Committee Minutes
December 2009	Advisory Committee Minutes
August 2010	Advisory Committee Minutes
December 2010	Advisory Committee Minutes
August 2011	Advisory Committee Minutes
November 2011	Advisory Committee Minutes
April 2012	Advisory Committee Minutes
November 2012	Advisory Committee Minutes

INSTITUTIONAL RESEARCH DATA

Unduplicated, actual, annual enrollment data;
Definitions of data elements can be found on CougarWeb under Teaching & Learning/Program
Review/Institutional Research Files for Program Review

- Program Enrollment (Pending programming by Administrative Programming Services)
  - Class graduating in 2009 – 6 enrolled
  - Class graduating in 2010 – 10 enrolled
  - Class graduating in 2011 – 8 enrolled
  - Class graduating in 2012 – 12 enrolled
  - Class graduating in 2013 – 12 enrolled
- Program Completions
  - 2009 graduates – 6
  - 2010 graduates – 8
  - 2011 graduates – 8
  - 2012 graduates - 10
- Employment of Program Students
  - Employed from Class of 2009 – 6 (100%)
  - Employed from Class of 2010 – 7 (88%)
  - Employed from Class of 2011 – 7 (88%) (8th student employed but not before IRB deadline at the end of the 4th quarter of 2011)
  - Employed from Class of 2012 – 9 (90%) (plus one continuing their education, accrediting body recognizes this as employed)
- Student/Faculty Ratios (Pending programming by Administrative Programming Services) Data is from Fall and Spring semesters
  - 2009   3:1
  - 2010   5:1

- o 2011 4:1
  - o 2012 6:1
  - o 2013 6:1
- Average Class Size (Pending programming by Administrative Programming Services)
  - o 2009 through 2013: 9.6 (all students enrolled in all SRGT courses)
- Grade Distributions (Pending programming by Administrative Programming Services)
  - o
- Contact Hours Taught by Full-Time and Part-Time Faculty
  - o 100% of contact hours taught by Full-Time Faculty
- Student Satisfaction
  - o 2009 Graduates indicated 100% satisfaction
  - o 2010 Graduates indicated 100% satisfaction
  - o 2011 Graduates indicated 100% satisfaction
  - o 2012 Graduates have not completed surveys yet
- Employer Satisfaction
  - o Employers for 2009 Graduates indicated 100% satisfaction
  - o Employers for 2010 Graduates indicated 67% satisfaction
  - o Employers for 2011 Graduates indicated 75% satisfaction
  - o Employers for 2012 Graduates have not completed surveys yet
- Licensure/Certification Pass Rates

  - o 2009 – 100%
  - o 2010 – 88%
  - o 2011 – 100%
  - o 2012 – 100%
- Cost Per Completer (not yet defined)
  Estimated cost of program (see Attachment 4)

PROGRAM DEVELOPMENT SINCE LAST PROGRAM REVIEW

1. Summarize assessment activities and actions taken in response since last program review.

2. Describe any continuous improvement activity if different from assessment.

3. List program employees (full- time and part-time), their role, credentials, and professional development activity since last program review.

Employee Name	Role in Program	Credentials	Professional Development since last Program Review
Don Martin	Director	CST, AAS	Professional Development—Don Martin (see Attachment 5)
Jeanne Glapion	Clinical Coordinator	CRCST, MBA, BS, CST	Professional Development—Jeanne Glapion (see Attachment 5)

Amber Schmid	Secretary		

PROGRAM PLANNING

1. Summarize expectations and plans for the next five years.
2. Provide the next Continuous Improvement Plan.

    SRGT CQI and Plan 2008-2013 (see Attachment 6)

PROGRAM REVIEW REPORT PATHWAY

Completed Program Review Reports will be evaluated by the appropriate deans and Program Review Steering Committees. Following approval by the Steering Committee, Program Review Reports will be evaluated by the Leadership Team who will approve the reports for posting on the intranet. At any point prior to Intranet posting, reports may be sent back for additional development.

FACILITIES AND RESOURCES

FACILITIES

Room/Office Location and Designation	Size	Type	Special Characteristics (i.e. permanent like ventilator hood)	Meets current needs: Y or N	Will meet needs for next five years: Y or N	Describe additional needs for any "N" answer in columns 5 or 6.
B301		lab	Scrub sinks	Y	Y	
B304		offices		Y	Y	
B309	24 Seats	classroom	Computer and podium, projector	Y	Y	
A202		Computer lab	computers	Y	Y	

EQUIPMENT, SUPPLIES, MAINTENANCE/REPAIRS
List all equipment valued at $5,000 or more each

Current Equipment Item or Budget Amount	Meets current needs: Y or N	Will meet needs for next five years: Y or N	For any no in columns 2 or 3, justify needed equipment or budget change
Anesthesia machine	Y	Y	
Autoclave	Y	Y	

FINANCIAL RESOURCES

Source of Funds (i.e. college budget, grant, etc.)	Meets current needs: Y or N	Will meet needs for next five years: Y or N	For any no in columns 2 or 3, explain why	For any no in columns 2 or 3, identify expected source of additional funds
College Budget	Y	Y		

COLLIN COLLEGE

DIVISION OF HEALTH SCIENCES AND EMERGENCY SERVICES

SURGICAL TECHNOLOGY COURSE SYLLABUS

Course Information

Course Number: HPRS 2300

Course Title: Pharmacology for Health Professions

Course Description: A study of drug classifications, actions, therapeutic uses, adverse effects, routes of administration, and calculation of dosages. Major Requirement: AAS – Surgical Technology.

Course Credit Hours: 3
    Lecture Hours: 3

Prerequisites: SRGT 1260 and SRGT 1409

Corequisites: SRGT 1541 and SRGT 1561

Student Learning Outcomes: Upon successful completion of this course, students should be able to do the following:
1. Categorize the classification of drugs
2. Calculate drug dosages
3. Identify the therapeutic use, routes of administration, indications, contraindications and adverse effects.
4. Apply arithmetic, algebraic and higher-order thinking to modeling and solving medication administration problems.
5. Demonstrate an understanding of basic mathematical information verbally, numerically, graphically and symbolically.
6. Apply mathematical reasoning skills and formal logic to develop convincing mathematical arguments.
7. Use appropriate technology to enhance mathematical thinking and understanding and to solve mathematical problems and judge the reasonableness of the results.
8. Interpret mathematical models such as formulas, graphs, tables and schematics, and draw inferences from them.
9. Recognize the limitations of mathematical models.
10. Apply general terminology to medication use.
11. Prepare and manage medications and solutions.
12. Use medications in the care of the surgical patient.
13. Analyze the principles of anesthesia administration.

14. Compare and contrast:
    a. Methods
    b. Agents
    c. techniques of anesthesia administration
15. Compare anesthesia monitoring devices with patient homeostasis.
16. Explain anesthesia complications and interventions.
17. Interpret the legal responsibilities of the surgical technologist and other surgical team members.
18. Assess the resources that aid the surgical technologist in interpreting and following professional standards of conduct.
19. Analyze the key elements related to developing a surgical conscience.
20. Organize information with a procedural and individual patient focus.
21. Utilize information and knowledge for application to each patient situation.
22. Explain the necessity of each component of anesthesia preparation of the surgical patient.
23. Interpret:
    a. Prevention
    b. Correction
    c. documentation techniques that may positively impact risk management issues
24. Identify and describe the principles of environmental safety controls and guidelines.
25. Evaluate the common sources of documentation utilized in the operating room.
26. Determine the importance and impact of proper documentation.
27. Analyze the recommended practices and legal elements of proper documentation.

Withdrawal Policy: See the current *Collin Registration Guide* for last day to withdraw.

Collin College Academic Policies: See the current *Collin Student Handbook*

Americans with Disabilities Act Statement: Collin College will adhere to all applicable federal, state and local laws, regulations and guidelines with respect to providing reasonable accommodations as required to afford equal educational opportunity. It is the student's responsibility to contact the ACCESS office, SCC-G200 or 972.881.5898 (V/TTD: 972.881.5950) to arrange for appropriate accommodations. See the current *Collin Student Handbook* for additional information.

COLLIN COLLEGE

DIVISION OF HEALTH SCIENCES AND EMERGENCY SERVICES

COURSE SYLLABUS

Course Information

Course Number: SRGT 1171

Course Title: Transition to Practice for the Surgical Technologist

Course Description: This course provides surgical technology students with information and skills to assist in transition from the role of student to the role of a practicing surgical technologist. Information gained about high performance work teams is applied to the surgical setting. Service quality management and diversity concepts are applied to surgical settings. Lab required. Major Requirement: AAS – Surgical Technology.

Course Credit Hours: 1
    Lecture Hour: 1
    Lab Hour: 1

Prerequisites: HPRS 2300, SRGT 1541 and SRGT 1561

Corequisites: SRGT 2130 and SRGT 2561, or consent of Program Director

Student Learning Outcomes: Upon successful completion of this course, the student will:
1. Compare and contrast the roles of team members in the operating room
2. Compare and contrast the concepts of team management
3. Analyze rationale for the proper chain of command in the operating room
4. Compare and contrast hospital departments that relate to direct and indirect patient care in the surgical suite
5. Assess errors that may occur in the operating room and devise a plan for investigation, correction, and notification
6. Interpret prevention, correction, and documentation techniques that may positively impact risk management issues
7. Assess the resources that aid the surgical technologist in interpreting and following professional standards of conduct
8. Interpret the legal responsibilities of the surgical technologist and other surgical team members
9. Analyze the role of mortality during ethical decision making
10. Evaluate information using the latest technology available
11. Acknowledge the importance of cooperative behavior by team members
12. Develop awareness of different cultural perspectives applicable to peri-operative care

13. Identify different cultural perspectives applicable to peri-operative care
14. Identify and describe the principles of environmental safety controls and guidelines
15. Describe potential hazards to the patient in the operative environment

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Collin College Academic Policies: See the current *Collin Student Handbook*

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COLLIN COLLEGE

DIVISION OF HEALTH SCIENCES AND EMERGENCY SERVICES

COURSE SYLLABUS

Course Information

Course Number: SRGT 1260

Course Title: Clinical – Surgical Technology I

Course Description: A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. Major Requirement: AAS – Surgical Technology.

Course Credit Hours: 2
   Clinical Hours: 8

Prerequisite: Admission to the Surgical Technology Program

Corequisite: SRGT 1409 or consent of the Program Director

Student Learning Outcomes: Upon successful completion of this course, students should be able to do the following:
1. Apply the theory, concepts, and skills involving specialized materials, tools, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the occupation and the business/industry
2. Demonstrate legal and ethical behavior, safety practices as they apply to the operating room environment, interpersonal and teamwork skills, and appropriate written and verbal communication skills using the terminology of the occupation and the business/industry
3. Apply practices of aseptic technique in maintenance of a sterile field
4. Manage the use and care of instrumentation and equipment of the operating room through application of knowledge
5. Apply intervention strategies appropriate to the surgical technologist in the prevention of wound contamination
6. Clasify wounds according to stage of healing or degree of microbial contamination.
7. Apply general surgical procedures in case preparation for interventions in the following areas:
   a. Basic general surgery   c. Basic Otorhinolaryngologic (ENT)
   b. Obstetric and gynecologic   d. Minor Orthopedic
8. Set up and maintain a sterile field using basic surgical technology procedures
9. Identify information critical to case analysis: anatomy, physiology, pathophysiology, diagnosis, surgical intervention, post-operative care, prognosis, complications and wound management for all mocked procedures

10. Employ basic routines of intra-operative case management for the following basic core procedures:
    a. Mini Laparotomy
    b. Tracheostomy
    c. Colectomy
    d. Abdominal hysterectomy
    e. Laparoscopy
    f. Breast biopsy
    g. Tubal ligation
    h. Hernia repair, inguinal
    i. Appendectomy
    j. Lap assisted vaginal hysterectomy
    k. Bunionectomy
    l. Tonsillectomy and Adenoidectomy
    m. Thyroidectomy
    n. Others as appropriate
11. Exercise the role of the surgical technologist in preoperative, intra-operative and post operative care
12. Assess the appropriateness of instruments, equipment and supplies utilized to reconstruct the sequence for selected surgical procedures
13. Display behaviors consistent with a surgical conscience
14. Organize information with an individual patient focus
15. Integrate information and knowledge (critical thinking) for application within the surgical setting
16. Implement peri-operative applications for the AHA's Patient's Bill of Rights
17. Identify ethical situations and problems in the surgical arena
18. Choose behaviors consistent with the surgical technologist's role as a member of the surgical team
19. Employ communication through the proper chain of command in the operating room scenarios
20. Manage actual or potential risk-laden behaviors present in the operating room
21. Perform patient documentation according to legal and quality principles during peri-operative experiences
22. Identify normal progressive and regressive anatomy of general surgical wounds
23. Describe applications of ethical considerations and decision-making in peri-operative care

Withdrawal Policy: See the current *Collin Registration Guide* for last day to withdraw.

Collin College Academic Policies: See the current *Collin Student Handbook*

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COLLIN COLLEGE

DIVISION OF HEALTH SCIENCES AND EMERGENCY SERVICES

COURSE SYLLABUS

Course Information

Course Number: SRGT 1409

Course Title: Fundamentals of Peri-operative Concepts and Techniques

Course Description: In-depth coverage of peri-operative concepts such as aseptic / steile principles and practices, infectious processes, wound healing, and creation and maintenance of the sterile field. In addition, peri-operative, intra-operative and post operative patient care concepts, the role of the surgical technologist on the surgical team, development of a surgical conscience; critical thinking; ethical and legal aspects and basic concepts of workplace management are reviewed. Lab required. Major Requirement: AAS – Surgical Technology.

Course Credit Hours: 4
    Lecture Hours: 4
    Lab Hour: 1

Prerequisite: Admission to the Surgical Technology Program

Corequisites: SRGT 1260 or consent of Program Director

Student Learning Outcomes: Upon successful completion of this course, students should be able to do the following:
1. Demonstrate principles and practices of aseptic / sterile techniques
2. Identify infectious processes and concepts of wound healing
3. Create a sterile field utilizing basic case preparation
4. Exhibit maintenance of the sterile field during procedures
5. Identify surgical technologist's interventions to prevent would contamination
6. Explain concepts of wound classification and healing
7. Identify basic principles of case preparation for general core surgical procedures:
    Basic general surgery
    Obstetric and gynecologic
    Otorhinolaryngologic
    Genitourinary
    General surgery endoscopic / laparoscopic
8. Identify common surgical instruments and instrument sets
9. Identify initial techniques in sterile field preparation using basic case procedures
10. Identify the role of the surgical technologist in peri-opertive, intra-operative and post-operative care

11. Identify behaviors consistent with a surgical conscience
12. Organize information with an individual simulated patient focus. Identify information and knowledge (critical thinking) for application to each patient case simulation
13. Analyze peri-operative applications for the American Hospital Association's Patient's Bill of Rights
14. Site examples of ethical situations and problems in health professions
15. Compare and contrast the role of surgical team members in the operating room
16. Identify proper chain of command in the operating room
17. Identify actual or potential risk-laden behaviors present in the operating room
18. Identify legal and quality aspects of patient documentation during peri-operative experience
19. Discuss basic core surgical procedures as to the basic surgical intervention format
    a. Basic surgical interventions are those procedures that must be taught to the greatest degree of depth
    b. Content:
        Anatomy
        Physiology
        Pathophysiology
        Diagnostic intervention
        Diagnostic exams
        Preoperative testing
    c. Surgical intervention
        Special considerations (e.g., patient factors, set-up, etc)
        Anesthesia
        Position / positioning aids Skin prep
        Draping
        Incision
    d. Supplies
        Routine
        Specialty
        Suture
        Medications
        Catheters / drains
    e. Equipment
    f. Instrumentation
    g. Procedural steps
    h. Counts
    i. Initial
    j. Closure
    k. Dressing materials
    l. Specimen care
    m. Postoperative destination
    n. Postoperative patient care considerations Prognosis
    o. Complications
    p. Wound classification / management

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Collin College Academic Policies: See the current *Collin Student Handbook*

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COLLIN COLLEGE

DIVISION OF HEALTH SCIENCES AND EMERGENCY SERVICES

COURSE SYLLABUS

Course Information

Course Number: SRGT 1541

Course Title: Surgical Procedures I

Course Description: Introduction to surgical procedures and related pathologies. Emphasis on surgical procedures related to the general, obstetrics/gynecology, genitourinary, otorhinolaryngology, and orthopedic surgical specialties incorporating instruments, equipment, and supplies. Lab required. Major Requirement: AAS – Surgical Technology.

Course Credit Hours: 5
    Lecture Hours: 5
    Lab Hours: 1

Prerequisites: SRGT 1260 and SRGT 1409

Corequisites: HPRS 2300 and SRGT 1561 or consent of the Program Director

Student Learning Outcomes: Upon successful completion of this course, students should be able to do the following:
1. Relate anatomy and pathology for selected procedures
2. Demonstrate patient preparation
3. Utilize instruments, equipment, and supplies and reconstruct the sequence for selected specialty basic procedures
4. Demonstrate case management skills, sequentially
5. Identify expected outcomes and possible complications
6. Describe the care of the specimen
7. Describe special considerations of populations a) geriatric patient, b) immuno-compromised patient, c) mentally challenged patient, d) pediatric patient, e) physically impaired patiend and f) trauma patient
8. Identify steps of the problem-solving process for a given situation
9. Describe applications of ethical considerations and decision-making in perioperative care
10. Identify patient preparation for selected surgical procedures

11. Discuss selected intermediate core and specialty surgical procedures as related to the intermediate surgical format:
    a. Intermediate surgical interventions are those that must be taught to a greater degree of depth than advanced level procedures, but to a lesser depth than basic procedures
    b. Content:
        1) Pathophysiology
        2) Diagnostic intervention
        3) Surgical intervention
            a) Special considerations (e.g., patient factors, room set-up, etc.)
            b) Position / positioning aids
            c) Incision
            d) Supplies
            e) Equipment
            f) Instrumentation
            g) Procedural steps
            h) Counts
            i) Specimen care
        4) Complications
        5) General Surgery Procedures (hernias, laparotomy, bowel procedures, gastric procedures, biliary System, liver, pancreas, spleen and breast procedures)
        6) Gynecological Procedures (Abdominal Surgical Procedures, Vaginal Surgical Procedures
        7) Genitourinary Surgery (Cystoscopy, Ureteroscopy, Open procedures of the external genitalia, transabdominal surgical procedures)
        8) Orthopedic Surgery
        9) Otorhinolaryngologic Surgery
        10) Others as time permits

Note: The student should continue to practice and perform other clinical skills learned and utilized in the previous semester of study at an acceptable level of practice.

Withdrawal Policy: See the current *Collin Registration Guide* for last day to withdraw.

Collin College Academic Policies: See the current *Collin Student Handbook*

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COLLIN COLLEGE

DIVISION OF HEALTH SCIENCES AND EMERGENCY SERVICES

COURSE SYLLABUS

Course Information

Course Number: SRGT 1542

Course Title: Surgical Procedures II

Course Description: Introduction to surgical procedures and related pathologies with emphasis on surgical procedures related to thoracic, peripheral vascular, plastic / reconstructive, ophthalmology, cardiac, and neurological surgical specialities incorporating instruments, equipment, and supplies. Lab required. Major Requirement: AAS – Surgical Technology.

Course Credit Hours: 5
    Lecture Hours: 5
    Lab Hour: 1

Prerequisites: HPRS 2300, SRGT 1541, and SRGT 1561

Corequisite: SRGT 1171, SRGT 2130 and SRGT 2561, or consent of Program Director

Student Learning Outcomes: Upon successful completion of this course, students should be able to do the following:
1) Relate anatomy and pathology for selected procedures
2) Demonstrate patient preparation
3) Utilize instruments, equipment, and supplies
4) Demonstrate case management skills
5) Identify outcomes and possible complications, for selected procedures
6) Discuss selected intermediate core and specialty surgical procedures as to the intermediate surgical format:
    a. Intermediate surgical interventions are those that must be taught to a greater degree of depth than advanced level procedures, but to a lesser depth than basic procedures
    b. Content:
      i. Pathophysiology
      ii. Diagnostic intervention
      iii. Surgical intervention
        a) Special considerations (e.g., patient factors, room set-up, etc.)
        b) Position / positioning aids
        c) Incision
        d) Supplies
        e) Equipment

                f) Instrumentation
                g) Procedural steps
                h) Counts
                i) Specimen care
                j) Complications

     iv. General Surgery Procedures (hernias, laparotomy, bowel procedures, gastric procedures, biliary System, liver, pancreas, spleen and breast procedures)
      v. Gynacological Procedures (Abdominal Surgical Procedures, Vaginal Surgical Procedures
     vi. Genitourinary Surgery (Cystoscopy, Ureteroscopy, Open procedures of the external genitalia, transabdominal surgical procedures)
    vii. Orthopedic Surgery
   viii. Plastic and Reconstructive Surgery
     ix. Neurosurgery
      x. Otorhinolaryngologic Surgery
     xi. Pediatric Surgery
    xii. Peripheral Vascular Surgery
   xiii. Cardiothoracic Surgery
   xiv. Others as time permits

Listed below are procedures the student should be able to perform after completing this course:

☞ Prepare the operating room for orthopedic, neurosurgery, pediatric, peripheral vascular, ENT, cardiothoracic and plastic surgical cases
☞ Identify and secure the supplies and equipment needed for orthopedic, neurosurgery, pediatric, peripheral vascular, ENT, cardiothoracic and plastic surgical cases
☞ Assist with patient positioning for orthopedic, neurosurgery, pediatric, peripheral vascular, ENT, cardiothoracic and plactic surgical cases
☞ Assist with patient prepping for orthopedic, neurosurgery, pediatric, peripheral vascular, ENT, cardiothoracic and plastic surgical cases
☞ Set up basic operative procedures in the surgical specialities of orthopedic, neurosurgery, otorhinolaryngologic, pediatric, peripheral vascular, cardiothoracic and plastic surgical cases
☞ Assist with the operative site draping in orthopedic, neurosurgery, otorhinolaryngologic, pediatric, peripheral vascular, cardiothoracic and plastic surgical cases using correct techniques
☞ Pass instrument, sutures, and supplies to surgeon and assistants in orthopedic, neurosurgery, pediatric, peripheral vascular, cardiothoracic, ENT, and plastic surgical cases

NOTE: The student should continue to practice and perform other clinical skills learned and utilized in the previous semester of study at an acceptable level of practice.

Withdrawal Policy: See the current *Collin Registration Guide* for last day to withdraw.

Collin College Academic Policies: See the current *Collin Student Handbook*

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COLLIN COLLEGE

DIVISION OF HEALTH SCIENCES AND EMERGENCY SERVICES

COURSE SYLLABUS

Course Information

Course Number: SRGT 1561

Course Title: Clinical – Surgical Technology II

Course Description: A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. The student is allowed to participate as a member of the surgical team under the supervision of the affiliate hospital staff or a clinical instructor in an aseptic environment. Case assignments will be assigned according to specific clinical rotations. Major Requirement: AAS – Surgical Technology.

Course Credit Hours:　　　5
　　　Clinical Hours:　　　20

Prerequisites: SRGT 1260 and SRGT 1409

Corequisite: HPRS 2300 and SRGT 1541 or consent of Program Director

Student Learning Outcomes: Upon successful completion of this course, students will:
1. Apply the theory, concepts, and skills involving specialized materials, tools, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the occupation and the business/industry
2. Demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills, and appropriate written and verbal communication skills using the terminology of the occupation and the business/industry.
3. Prepare for assigned cases by reviewing the procedure as described in the textbook, and utilizing other resources (peer, staff CST, RN, residents, etc.).
4. Restate knowledge of procedures during A.M. roll call
5. Apply aseptic technique during surgical routines
6. Set-up sterile instrument tables in a timely manner as appropriate
7. Predict the surgeons' needs demonstrating an understanding for the need to minimize discussion during the surgical procedure to minimize the risk of infection
8. Use and identify all surgical instruments and equipment, properly
9. Determine appropriate measures to prevent and/or correct contamination
10. Identify and record pertinent patient data in daily logs
11. Apply skills necessary to assist the circulator in preparing for subsequent cases

12. Demonstrate a satisfactory level of proficiency through experiences and written examinations
13. Demonstrate composure during stress provoking situations
14. Utilize first scrub responsibilities that are within the scope of his/her practice (cut sutures; retract tissue and approximate tissue with forceps)
15. Generate surgical technologist's responsibilities with hospital staff on major procedures

Withdrawal Policy: See the current *Collin Registration Guide* for last day to withdraw.

Collin College Academic Policies: See the current *Collin Student Handbook*

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COLLIN COLLEGE

DIVISION OF HEALTH SCIENCES AND EMERGENCY SERVICES

COURSE SYLLABUS

Course Information

Course Number: SRGT 2130

Course Title: Professional Readiness

Course Description: Overview of professional readiness for employment, attaining certification, and maintaining certification status. Major Requirement: AAS – Surgical Technology.

Course Credit Hours: 1
Lecture Hour: 1

Prerequisites: HPRS 2300, SRGT 1541 and SRGT 1561

Corequisites: SRGT 1171, SRGT 1542 and SRGT 2561 or consent of Program Director

Student Learning Outcomes: Upon successful completion of this course, students should be able to do the following:

1. Demonstrate job-seeking skills
2. Identify strengths and weaknesses in preparation for the certification examination
3. Assess current trends and employment opportunities for the surgical technologist
4. Develop a plan of action to secure employment in the health care field
5. Evaluate personal employability qualities that include positive characteristics
6. Develop an employmnet strategy that includes positive characteristics
7. Develop a professional resume
8. Compare and contrast various types of employment/application correspondence
9. Analyze various interview strategies
10. Compare and contrast the various roles in the surgical technology profession
11. Demonstrate responsible behavior within the role of the surgical technologist
12. Demonstrate responsible behavior within the competencies of the surgical technologist
13. Assess the various functions of professional credentialing and relate their significance to the profession of surgical technology
14. Compare and contrast certification, registration, and licensure
15. Assess the personal and professional importance of becoming certified
16. Compare and contrast the various methods of professional development
17. Formulate a plan for professional development
18. Compare and contrast professional organizations and credentialing related to the profession
19. Evaluate and locate information using the latest technology available

20. Apply the latest technology effectively in a variety of formats including: 1) written, b) verbal, and c) electronic
21. Analyze activities that reflect positive examples of surgical conscience
22. Organize information with an individual patient focus
23. Develop an increased sensitivity to the influence of ethics in a professional practice
24. Compare and contrast major criminal and civil liabilities and the consequences for these acts
25. Assess the resources that aid the surgical technologist in interpreting and following professional standards of conduct

Withdrawal Policy: See the current *Collin Registration Guide* for last day to withdraw.

Collin College Academic Policies: See the current *Collin Student Handbook*

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COLLIN COLLEGE

DIVISION OF HEALTH SCIENCES AND EMERGENCY SERVICES

COURSE SYLLABUS

<div style="border:1px solid black; display:inline-block; padding:4px;">Course Information</div>

Course Number: SRGT 2561

Course Title: Clinical – Surgical Technology III

Course Description: A health-related work-based learning experience that enables the student to apply specialized occupational theory, skills, and concepts. Direct supervision is provided by the clinical professional. Major Requirement: AAS – Surgical Technology.

Course Credit Hours: 5
    Clinical Hours: 20

Prerequisites: HPRS 2300, SRGT 1541 and SRGT 1561

Corequisite: SRGT 1171, SRGT 1542 and SRGT 2130 or consent of Program Director

Student Learning Outcomes: Upon successful completion of this course, students should be able to do the following:
1. Apply the theory, concepts, and skills involving specialized materials, tools, equipment, procedures, regulations, laws, and interactions within and among political, economic, environmental, social, and legal systems associated with the occupation and the business/industry
2. Demonstrate legal and ethical behavior, safety practices, interpersonal and teamwork skills, and appropriate written and verbal communication skills using the terminology of the occupation and the business/industry.
3. Describe patient and family response to hospitalization and surgical intervention
4. Identify and discuss the specific needs of pediatric, geriatric, and immunocompromised surgical patients
5. Describe and demonstrate the physical preparation and care of the patient, including: a) the identification process, b) safe patient transportation, c) chart review, d) legal condepts of informed consent, e) necessity of anesthesia preparation, f) steps and rationales of surgical skin preparation prior to the surgical procedure
6. Demonstrate appropriate surgical attire, case selection, equipment, instrumentation, and room preparation for specific surgical procedures
7. Identify the: a) classifications, b) names, c) parts, d) materials, e) finishes, and f) uses of basic core and speciality, intermediate core and specialty, and advanced core and specialty surgical procedures

8. Demonstrate preoperative, intra-operative, and postoperative case management for a surgical procedure
9. Demonstrate the key elements of a surgical conscience
10. Demonstrate principles of problem solving in ethical decision making
11. Demonstrate the concepts of team management
12. Demonstrate responsible and accountable behavior within the role and competencies of the surgical technologist

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Collin College Academic Policies: See the current *Collin Student Handbook*

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Surgical Technology Program Market/Needs Assessment

Introduction. Collin College is a community college with a primary service area based in Collin and Rockwall counties in North Central Texas. Collin College also serves the needs of many students from surrounding counties in the region including Dallas, Denton, Grayson, Fannin, Hunt and Cooke counties among others.

In the fall of 2006, the Health Sciences and Emergency Services Division of Collin College began a market survey to determine the feasibility of offering an Associate of Applied Science Degree in Surgical Technology. The survey was conducted under the direction of Dr. Merry McBryde-Foster, Dean of Health Sciences and Emergency Services. According to the Collin County website (http://www.co.collin.tx.us/public_information/features/numbers.jsp), at the time of the market needs survey Collin County boasted a population of approximately 699,000 people.

The Department of Labor anticipates the surgical technology field is expected to grow at the highest comparative level of any other occupation: 27%. Texas level projections for this field identify 38 percent in employment change, comparing the 2002 employment of 5,650 technologists to the 7,800 needed in 2012. The national and state trends are expected to further local need when coupled with the growth rate of medical services in Collin County. "Collin County ranks as one of the top growth areas in the state. Since the 2000 census, the county's population has grown by more than 15-percent and by 270-percent since the 1980 census." (Retrieved 9/1/06 from http://www.co.collin.tx.us/commissioners_court/mobility_projects/outerloop.jsp) All of these trends define an increase in the demand for all of healthcare workers in the county above national projections, including projections for the surgical technologist.

The employment outlook for the Dallas and Northeast Texas areas was assessed via the Socrates Occupational Profile at http://socrates.cdr.state.tx.us/. Local Dallas area information reveals the 2002 employment for surgical technologists at 772 and projected 2012 employment at 1,017. The north central Texas workforce development area 2002 employment was recorded at 215, increasing to 288 by the year 2012. Both geographical areas combined will need an increase of 318 surgical technologists in the next five years. In addition, the percent of job change in this field is reported for Dallas at 31.74% and for north central Texas at 33.95%. Both the projected growth needs and job change rates indicate workforce demand at high levels, supporting the need for additional preparation of surgical technologists. In addition, surgical technology is listed as one of the twelve most demanded health workforce needs in the remainder of this decade by *Interlink,* a business/education alliance for Regional Quality Workforce Planning affiliated with the North Texas Workforce Commission.

Health Career Needs Assessment Study. To better define the need for healthcare workers in the north and central Texas area, the Division of Health Sciences and Emergency Services and the Northeast Texas Consortium for Health Professions conducted a survey to ascertain the current and future needs for healthcare careers.

Surgical Technology Program Market/Needs Assessment

Preliminary data analysis shows surgical technology as one of the most needed areas in workforce development.

With thirteen inpatient facilities across nine central Texas metroplex and rural counties reporting on forty-four careers, surgical technology ranked sixth among careers expected to increase in the next three years. This ranking was without the input of free-standing surgical facilities as these were not included in the survey. With an expected 10.75 percent increase in positions, surgical technology was outranked only by registered nurses, certified nursing assistant, respiratory therapists, food service aides, and occupational therapy assistants. Data regarding the top ten health careers increasing in the next three years is reported in Table 1. Although the facility sample size was small, the facilities responding to the survey represented eight counties (both rural and metropolitan), had a bed size varying from less than 100 beds to 400 beds, and were predominantly acute full-service facilities, with in-patient rehabilitation, long-term acute and sub-acute facilities also represented.

Table 1. Local Health Career Needs by Projected Volume of Increase in Three Years

Health Career	Filled	Unfilled	Total FTE Positions	Vacancy Rate %	Increase Needed in 3 Years	New Total FTE's	% Increase
R.N	1703	161	1864	8.6	114	1978	6.1
Certified Nursing Assistant	237	48	285	16.8	32	317	11.2
Respiratory Therapist	130	11	141	7.8	15	156	10.6
Food Service Aide	94	4	98	4.1	12	110	12.2
Occupational Therapist Assistant	20	3	23	13	10	33	43.5
Surgical Technologist	87	6	93	6.5	10	103	10.7
P.T. Assistant	22	4	26	15.4	9	35	34.6
Comp. Tomography Tech	33	1	34	2.9	7	41	20.6
Radiology Tech	99	6	105	5.7	7	112	6.7
Health Information Coder	51	3	54	5.6	5	59	9.3
Med Rec Tech	12	0	12	0	5	17	41.7
Med Lab Tech	104	11	115	9.6	5	120	4.3

Surgical Technology Program Market/Needs Assessment

Table 2. A list of prospective clinical affiliates within the proposed community service area (Hospital, Surgical Center, and Ambulatory Care Center, etc.). List the facility name, designation (Hospital, SC, ACC, etc.) and institutional accreditation.

Facility	Designation	Institutional Accreditation
Baylor Hospital of Plano	Hospital	JCAHO
Medical Center of Plano	Hospital	JCAHO
Presbyterian Hospital of Plano	Hospital	JCAHO
Centennial Medical Center of Frisco	Hospital	JCAHO
Presbyterian Hospital of Allen	Hospital	JCAHO
Medical Center of McKinney	Hospital	JCAHO
Orthopeadic Associates of North Texas	Surgical Center	JCAHO
Plano Surgery Center	Surgical Center	JCAHO

Table 3. From the facilities listed, provide the facility name, number of operating room suites, and number of surgical procedures performed annually for each facility.

Facility	# of OR Suites	# of Annual Surgical Procedures	# or % of ST's Used in Facility
Baylor Hospital of Plano	14	14000	50
Medical Center of Plano	13	12500	50
Presbyterian Hospital of Plano	13	12500	60
Centennial Medical Center of Frisco	4	3000	50
Presbyterian Hospital of Allen	4	3000	50
Medical Center of McKinney	4	3000	50
Orthopeadic Associates of North Texas	4	3000	75
Plano Surgery Center	6	4500	75

Collin College Surgical Technology Program Survey. A survey of Collin County and closely surrounding employers of Surgical Technologists was conducted during September of 2006 to further identify data to support the AAS Program in Surgical Technology. This survey was sent to all in-patient acute care facilities, free-standing surgical facilities (day surgery centers), and a sample of surgeon groups in Collin County.

Surgical Technology Program Market/Needs Assessment

The survey explored the numerical need for surgical technologists, salary potential, potential clinical sites and
potential advisory committee members. Of the thirteen survey respondents eight indicated that they employ an average of 7.6 FTE Surgical Technologists and will each need two to three more in the next three years. This is consistent with the 2006 findings of the Health Career Needs Assessment Survey. The results are shown in Table 2 below:

Table 4. Collin County Surgical Technology Employers (see attached surveys)

Facility	Current Employment	Unfilled Positions	Additional ST Full-time positions	Type of Facility	Clinical Slots
1	6	0	2	Inpatient	Maybe
2	9	0	2	Inpatient	Yes
3	9	2	4	No response	Maybe
4	3	0	2	No response	Maybe
5	5	0	4	Inpatient	Maybe
6	13	0	2	Inpatient	No
7	5	0	No response	No response	Maybe
8	0	0	No response	Surgical Office	Maybe
9	0	0	No response	Surgical Office	Maybe
10	0	0	0	Surgical Office	Maybe
11	1	1	2	Orthopedics Office	Yes
12	0	0	0	OB/GYN Office	No response
13	10	0	2	No response	Maybe
Totals	61	3	20		Favorable

<u>Analysis of Regional Surgical Technology Programs</u>. Other community colleges in the north central Texas area provide Surgical Technology programs. The five colleges with AAS or certificate programs in Surgical Technology closest to Collin County reviewed were El Centro Community College, North Central Texas College, Paris Jr. College, Tarrant County College, and Trinity Valley Community College. Austin Community College programs were also reviewed. Only two programs offered AAS Degrees in Surgical Technology: Austin Community College and Trinity Valley. The lack of AAS degree programs supports the proposed program at CCCCD in the light of the fact that the AAS degree is a recommendation for entry level to the workforce by the Association of Surgical Technologists.

CCCCD's AAS in Surgical Technology will be different from surrounding programs as it will offer the only associate degree option in the region. The curriculum structure also provides for attainment of advanced competencies needed in the future healthcare workforce: high performance work teams, work flow redesign, and collaborative patient care.

Surgical Technology Program Market/Needs Assessment

Population Growth Projections. In 2006 the population of Collin County was estimated at 699,000 (http://www.co.collin.tx.us/public_information/features/numbers.jsp). Population growth projections are from the Texas State Data Center and Office of the State Demographer website: http://txsdc.utsa.edu/tpepp/2008projections/2008_txpoprrj_cntytotnum.php . The Texas State Data Center estimates the population of Collin County to be 842,364 by 2010 with a projected population increase of 224,291 by 2015 for a total estimated population of 1,066,655 residents. Further projection to the year 2020 reveals a population increase of 493,234 over the next 10 years bringing the population of Collin County to 1,335,598. That is an increase of 91.07% from 2006 to 2020. The 10 year projection for population increase in Collin County during the period of 2010 – 2020 stands at 58.55%.

The employment figures for North Central Texas, the region and the state combined with population projections for Collin County supports the establishment of an Associate Degree Surgical Technology program at Collin College. The projection of need for 318 additional surgical technologists in the region over the next 5 years more than justifies the Collin College belief that 24 students admitted once per academic year can be supported by the population and employment figures.

Qualified Instructional Staff

An assessment of the necessary faculty and staff included reviewing the requirements for accreditation by CAAHEP and the standards established by ARC-ST. Necessary resources may include a Program Director, Clinical Coordinator, faculty and support staff. The following requirements are those set by Collin College:

Director. A full-time Director is required for the program by the CAAHEP (Committee on Accreditation of Allied Health Educational Programs) standards (2003) and is responsible for all aspects of the program. The director was budgeted for hire in the spring of 2007. The director is expected to meet the minimal following criteria:
a) possess credentialing from an organization that is accredited by the National Commission on Certifying Agencies (NCAA), b) have a minimum of an Associates Degree in Surgical Technology (Bachelor's degree or higher in a related field is a plus), c) have a minimum of three years in the last five years of peri-operative experience as a surgical technologist in a scrub role in a hospital setting and/or three years of current experience as an instructor in surgical technology, d) computer literacy, e) teaching experience preferred, and f) experience/training as an educator is recommended.

Clinical Coordinator. A clinical coordinator is required for the program by the CAAHEP standards (2003) and is responsible for the organization, administration, continuous review, planning, development and effectiveness of clinical affiliation experience for enrolled students. This clinical director provides direction and guidance of

clinical instructors and also will have didactic and campus laboratory instructional assignments. Qualifications include the following criteria: a) credential in the field of surgical technology through a national credentialing organization accredited by NCCA (National Commission on Certifying Agencies), b) a minimum of one year of current operating room experience in a scrub role (three years is preferred) or one year of current experience as an instructor of surgical technology, c) a minimum of an Associate Degree in Surgical Technology or a Bachelor's degree in a related field, d) computer literacy, e) teaching experience or educational courses in teaching and learning is preferred.

Faculty. Additional faculty members may be hired as core instructors in the future. These faculty members will be assigned faculty load in didactic, campus lab and clinical experiences. Qualifications for faculty will include: a) credentialed in the field of surgical technology through a national credentialing organization accredited by NCCA, b) have attained a minimum of an Associate Degree in Surgical Technology (Bachelor's degree in a related field is a plus), c) a minimum of one year experience in a surgical technology scrub role and d) mentoring/teaching or in-service responsibilities or educational courses in teaching and learning is preferred.

Program Director

In August, 2007, Collin College hired Don Martin, CST, AAS, as Director of Surgical Technology. Mr. Martin came to the college as a Certified Surgical Technologist (CST) with 5 years experience as a CST and 18 years of related healthcare experience. He routinely performed in the operating room as a preceptor of students from various surgical technology programs in different geographic regions. Additionally, he has served as a new employee preceptor for certified surgical technologists at several hospitals.

Mr. Martin has also served in the capacity of primary instructor for anesthesia technicians and cell saver technicians in the hospital operating room setting. He was responsible for developing and implementing a training program for anesthesia technicians and cell saver technicians at a local hospital as well as being the primary trainer in the program.

Mr. Martin has served in the capacity of technologist coordinator for a large neurosurgery service in a Level I trauma center. In that capacity he was responsible for orientation to the neuro service of new employees to the operating room as well as current employees in the O.R. that were new to the service. Additionally, he was the service coordinator for plastic surgery in a busy plastic surgery service in a 15 room O.R. suite. In both capacities he was responsible as the primary preceptor for surgical technology students from the local surgical technology programs.

Mr. Martin has worked in a variety of facility types ranging from Level I trauma centers to ambulatory surgery centers over the past 20 years. His varied experience allows him to bring a unique view to the teamwork concept necessary to the proper function of the operating rooms of today. Combined with the appropriate experience and credentials this teamwork approach and his exposure to a wide variety of procedures, techniques and

surgeons qualifies him under the CAAHEP and ARC-ST Standards for the position of Director of Surgical Technology at Collin College.

Mr. Martin maintains his CST credential through continuing education. Using varied resources such as AST's CE offerings, AST National Conference, Instructor's Forums, Instructor's Workshops and State Assemblies he has exceeded the number of CE credits necessary for the maintenance of the CST credential. He utilizes continuing education opportunities provided by the college on an as offered/as available basis throughout the school year. He is also currently pursuing a Bachelor of Arts Applied Sciences in Surgical Technology from Texas A&M University – Commerce with plans to continue on with the Master of Arts Applied Sciences program at the same university.

Clinical Coordinator

Jeanne Glapion, CST, MBA, currently serves as the Collin College Surgical Technology Program Clinical Coordinator. Ms. Glapion comes to the program with a number of years service at Delgado Community College, New Orleans and Sanford Brown's Dallas, TX campus where she served in the same capacity.

Ms. Glapion is a Certified Surgical Technologist with 16 years (01/1990 – 01/2006) as instructor and Clinical Coordinator at Delgado and 1 ½ years (01/2006 – 06/2008) as Clinical Coordinator at Sanford Brown for a total of 17 1/2 years of teaching experience. She maintains her CST by attending continuing education opportunities through AST such as the Clinical Coordinator Forum and the AST National Conference. Her years of experience as a Clinical Coordinator and the CST credential qualify Ms. Glapion as a Clinical Coordinator under the CAAHEP and ARC-ST Standards for the position of Clinical Coordinator of Surgical Technology at Collin College.

Part-time Faculty

The program has identified a need for an additional instructor to meet the needs of the students and the requirements of the accreditation standards. The position has been requested and approved by the Collin College administration. Upon completion of an appropriate job description the position will be posted and a search will be conducted in accordance with the policies and procedures established by Collin College. Per the requirements of ARC-ST and CAAHEP the new didactic faculty member will be required to meet the qualifications of experience, education and the credential of CST. This individual will be responsible for instructing in the clinical lab (SRGT 1160 Clinical Lab – Surgical Technology I).

With the restated capacity of 12 students Collin College is well positioned to meet the accreditation requirements for student to staff lab ratio of 12:1. The total capacity for the program with 1 admission cycle per year is capped at 24. With 2 qualified full time

Surgical Technology Program Market/Needs Assessment

instructors and the hiring of 1 qualified part time instructor for 24 students the ratio will never by higher than 8:1 in the lab.

Monitoring Community Needs

The Surgical Technology program at Collin College will ensure that it meets the needs of the communities of interest by employing a number of different tools and strategies. The communities of interest are represented by the diverse membership of the Program Advisory Committee. Through a process of systematic review involving program survey tools, ARC-ST survey tools, PAC input and review the program will adjust student admissions in accordance with the needs of the communities of interest.

By surveying potential employers utilizing the original market survey form or an updated version and keeping abreast of employment and population statistics through government and employment organizations the program staff will stay informed of the market demand for new graduates. Adjustments to admissions will be made accordingly. However, employment potential evaluation cannot be made in a vacuum. The program will assess resources such as clinical slots available, instruction staff, physical facilities, financial resources and classroom resources among other things. Resource assessment will be completed by utilizing a combination of Faculty Resource Survey form, Student Resource Survey form, PAC Resource Survey form, budgets, clinical site input, Student Faculty Evaluation forms and other tools as necessary. The surveys will be completed in May of each year before the end of the school year. The collected data will be reviewed and assessed by the PAC and the program faculty/staff as well as the college administration.

The assessment will be done on a minimum of an annual basis. PAC review and assessment will take place at the annual summer meeting in July. PAC review, assessment, findings and recommendations will be reflected in the meeting agenda and meeting minutes. Faculty/staff review and assessment will involve an ongoing process of gathering information via clinical affiliate feedback, budget review, resource assessment and market surveys as well as the previously.

Future admissions will be based on the market need for new graduates in Surgical Technology, clinical affiliate slots available to the program, classroom/lab space and physical resource availability, qualified program faculty/staff availability, PAC recommendations, budget constraints and quality and size of the applicant pool.

Summary

The Collin College Surgical Technology Program is well positioned in a growing community with a diverse population. With the projected population growth of 91% from 2006 through 2020 there will be an increased demand for healthcare services in general and surgical services in particular. As the survey by the Division of Health Sciences and Emergency Services and the Northeast Texas Consortium of Health Professions demonstrates there will be an increased demand for surgical technologists in the field

Surgical Technology Program Market/Needs Assessment

within the programs service area. These figures are supported by the Socrates Occupational Profiles projected increase in the number of Surgical Technologist needed in this area by 2012 (from 215 in 2002 to 288 in 2012).

With no other surgical technology programs in Collin County, TX the Collin College program has a large pool of potential candidates to draw from. The nearest associate degree program is located approximately 65 miles away at Trinity Valley Community College in Kaufman, TX. While other certificate programs exist closer to the Collin College campus, no nearby programs offer the recommended associate degree in surgical technology for entry level surgical technologists.

Favorable responses from the local affiliates regarding the need for surgical technologists and the availability of clinical slots is further evidence of the potential for success and the need for such a program in Collin County. The stated program capacity of 11 students per admission with one admission per academic year is well within the capability of the healthcare communities of Collin County, North Texas and the state at large to absorb into the market. With attrition and the stated need from the facilities surveyed of an additional 20 full time employees over the next 3 years in Collin County alone the 22 potential graduates within that period will find ample opportunities for employment.

The resources necessary for a successful program include the availability of qualified instructional staff per Standard III.B., the support of clinical facilities in the form of Program Advisory Committee membership and provision of clinical slots along with willingness to precept students. These resources are all in place at this time. Additionally, a successful program requires the physical resources this school has willingly provided. With the market needs of today and the future, the availability of a large candidate pool, the results of the market survey and needs analysis conducted by the college beginning in 2006 and the support of the Collin College administration the Surgical Technology Program at Collin College is in position to contribute to the success of future students and the prosperity and well being of the community it serves.

Don Martin, CST, AAS

Program Director
Collin College

Advisory Committee Meeting Minutes

CHAIRPERSON: Merry McBryde-Foster, PhD, RN		
MEETING DATE: 12-14-2006	MEETING TIME: 4:30 PM – 6:00 PM	MEETING PLACE: E303
RECORDER: Merry McBryde-Foster		PREVIOUS MEETING: None

MEMBERS PRESENT: OTHERS PRESENT:

	Name and Title		Name and Title		Name and Title
x	Peggy Elkins,RN Surgical Services Director, Presbyterian Hospital of Allen		Jack Cooksey, AST, Educator, Presbyterian Hospital of Plano		Janice McKinght, Sterile Processing Coordinator, Baylor Medical Center of Plano
x	Debbie Taylor, RN, Director of Surgical Services, Lonestar Health	x	Al Cardenas, MD	x	Mary Savard, RN, Director of Surgical Services, Medical Center of Plano
x	Merry McBryde-Foster, PhD, RN, Dean of Health Sciences and Emergency Services, CCCCD				

Agenda Item	Action Discussion Information	Responsibility
Old Business:		
None		
Continuing Business:		
None		
New Business:		
Proposal for AAS in Surgical Technology	The meeting was called to order at 4:40 PM. The draft of the proposal to the Texas Higher Education Coordinating Board (THECB) was reviewed. The qualifications of the Program Director were discussed. The position is approved by the college for hire in the summer of 2007; qualifications are AST with AAS required, BS in Health Sciences preferred and recent experience in OR as a tech or preceptor.	Hiring responsibility is with the Dean of Health Sciences and Emergency Services

	The time line for submissions to College Curriculum Advisory Committee, administration and THECB were reviewed. Approval by this advisory committee is the first level approval that is needed.	Dr. McBryde-Foster is responsible for the proposal approval process.
	The employer survey results were reviewed. A need for surgical technologists ranked 6th among 33 health occupations in North Texas area. Of the 13 Collin County employers surveyed, 7 STs are employed on the average and an average increase of 3 STs will be needed in each facility in the next three years.	
Program Resources	CAAHEP/CoAST accreditation standards for program and resources were reviewed: a) Campus lab/classroom proposal to administration includes class room close to campus lab, two operating rooms, storage, scrub areas, observation areas, pre-operative holding area, scheduling/communications desk, dirty utility room with appropriate washing area, clean utility area with sterilizer. Floor space to accommodate high-fidelity simulation was noted as a consideration in recommending campus lab configuration. Major CPC renovations are being planned and Dr. McBryde-Foster is working with administration and architects on surgical technology space needs and configuration of the campus lab. b) Resources for the library (Learning Resource Center) as recommended by accreditation standards are being purchased. c) Support staff currently rests with the AA in the Division Office. d) Faculty Offices are tight on this campus; plan to hire two faculty: Program Director and Clinical Coordinator. e) Budget projections in the program proposal were reviewed. Projected budget is required by THECB and is based on contact hour funding from the state. Projected program budget was reviewed. Five year projection revealed a start-up cost of $190K for campus lab remodeling and equipment and an average annual cost thereafter of $100K. Income from tuition and state funding would increase to $155K in year five if student enrollments progress to 24 student admissions per year.	Dr. McBryde-Foster is responsible for program start up activities.
Curriculum Decisions:	The curriculum plan and the generic syllabi were reviewed. The program outcomes were reviewed and discussed by the committee. The option to offer a certificate was discussed. The committee was informed that a certificate was not going to be offered as there are multiple programs in central north Texas that offer a certificate and only two with an AAS option. These programs report that few students complete the degree. Dr. McBryde-Foster stated that the quality of the clinical facilities in Collin County and the surgical trends toward the more complicated	

	procedures will likely result in graduates with the AAS moving into expanded roles after a few years of experience. A broad based liberal education would be needed to support an expanded level of practice. Dr. McBryde-Foster stated that it was anticipated that certificate graduates in practice would look to community colleges to provide them with an AAS if and when the AAS becomes a requirement for entry. Dr. McBryde stated that the proposed curriculum is also based on the five core competencies recommended by the IOM in 2003. These competencies require a broader liberal education model. The committee members agreed with the AAS option without a certificate.	
Other:	Advisory Committee members offered to help supply equipment and supplies that the program may not be able to purchase in the future. They reported that from time to time they have instruments that are current but no longer in use or used infrequently and they would be glad to give it to the program.	

MINUTES

Key Discussion Points	Discussion/Decisions
Old Business:	None
Continuing Business:	None
New Business:	The proposal for the program was approved by general consent.
	The committee voiced agreement with the planned resources and commended the quality of support for the program.
Curriculum Decisions:	The program curriculum (plan, outcomes and syllabi) was approved.
Other:	The meeting was adjourned at 6:50 PM.

CHAIRPERSON SIGNATURE:	DATE: 12/17/06	NEXT MEETING: TBD

Advisory Committee Meeting Minutes

CHAIRPERSON: Don Martin		
MEETING DATE: October 2, 2008	MEETING TIME: 6:00PM	MEETING PLACE: CPC-B309
RECORDER: Cassie Peak		PREVIOUS MEETING: April 16, 2008

MEMBERS PRESENT: OTHERS PRESENT:

	Name and Company		Name and Company		Name and Company
	Sabrina Lundberg, Presbyterian of Plano		Winston Centeno, Medical Center of Plano		Dr. Merry McBryde-Foster, CCCCD
	Sandy Bever, Medical Center of McKinney		Judy Oyer, Presbyterian of Plano		Jeanne Glapion, CCCCD
	Richard MacCracken, TGM Incorporated		Debbie Taylor, Surgery Center of Plano		Cassie Peak, CCCCD
	Jeremy Johnston, Baylor Trophy Club		Don Martin, CCCCD		Melissa Cowart, CCCCD Student Representative
	Dr. Cecilia Lorenzo, Lorenzo Surgical				Megan Melton, Student
					Dondra Olmos, Student

Agenda Item	Action Discussion Information	Responsibility
Continuing Business:	Introductions	Don Martin
	Update on Program Progress	Don Martin
New Business:	Clinical Affiliation Agreements	Don Martin
	Second Fall Rotation	Don Martin
	Clinical Placement for Spring	Don Martin
	Spring Course Work	Don Martin
Other:	Open House	Don Martin
\	Student Organization	Don Martin

MINUTES

Key Discussion Points	Discussion
Continuing Business: Introductions	Meeting called to order at 6:24pm Old Minutes accepted • Don Martin introduced new clinical coordinator for the Surgical Technology Program, Jeanne Glapion. • Cassie Peak, Division Secretary for Respiratory Care and Surgical Technology. • Sandy Bever, Director of Surgical Services of Medical Center of McKinney.
Update on Program Progress *New Class* *Accreditation* *New Materials*	• Fall 2008 had twenty-four applicants and twelve were accepted for Fall. One student dropped within the first week. • First semester students cover Fundamentals of Perio-Operative Concepts and Techniques, Surgical Technology I Clinical and Pathophysiology. • Third semester students cover Surgical Procedures II, Surgical Technology III, and Physics. • Self Study should be completed by the end of the month. Still needs to be typed and handbooks to be copied. Once that is completed, Dr. Merry will need to review it before being sent off. • We will submit for a site visit in January, this can only be done have the first class is three-quarters of the way through. Once the site visit it can take up to six months to get accreditation. Board exams for students are an online-written exam consisting of 250 questions; students have to pass 75% for certification. • The program purchased two Simulation mannequins, Amputation Tray Set, Instrument Tray System, Camera System, Knee Model and Endoscopic Trunk. • Any unused materials from hospital either expired or opened and never used, please feel free to donate to the program. We will find a use for it.

New Business: *Clinical Affiliation Agreement*	• Fall the program added Medical Center of McKinney, 2nd rotation of Fall will also add Presbyterian of Allen. Still working on agreements for Baylor of Frisco, and Baylor Trophy Club.
2nd Fall Rotation at 8 Weeks	• First round feedback has been positive and constructive. • Within the five facilities we are needing to get the students as much experience as possible. • Student have a list of procedures to complete before certification. Covers general and all specialty procedures. • This semester had more variety of procedures than previous semesters. • List of procedures were given to each member to review. Most students are lacking Eyes, Neuro, and ENT. To get credit they must be scrubbed in.
Clinical Placement for Spring Semester	• 2nd year students will be at clinicals Monday, Tuesday, and Wednesday for the last semester, students will get to put in a request for the facility to end at. Students who started at the facility get the first choice on whether they want to end there or not. Cases will be string together to have students show start to finish. • Wanting 2nd years to be more exposed to different preceptors. Wills how students more different variations of techniques and procedures. • 1st year students will be going out on Thursdays next semester. Problem is the program has eleven students and only ten clinical spots. Trying to work out solution to problem.
Spring Course Work	• 2nd Year Students: Professional Readiness-Certification Prep Course, Covers previous three semesters, testing techniques. Exam-Prep AST Study Guide • May create a data file from recently certified AST. Type of questions, preparedness. Receiving information from two surgical schools that have already had students certify. • Dr. Lorenzo will start coming in for lab sessions. Show interaction with students, exposure for procedures, helps the students understand what surgeons are looking for.

	2nd Years: Transition to Practice(Resumes, interviews, teamwork), Professional Readiness, Surgical Technology IV (Capstone) Three days a week 1st Years: Pharmacology- OR related, Surgical Procedure I, Surgical Technology II - Logics will be done on-line for second years for spring- OR formulated. - High Performance Work team will also be OR formulated. - Professional Readiness- will integrate Joint Commission(quality management), regulations. - May integrate critical incidents.
Other: *Open House* *Student Organization* *Central Sterilizing Program*	1st Year Students are wanting to do an open house for family and friends. Will send out more information once they decide a date. - Creation of Surgical Technology Student Organization. Will take part in fundraising, community service and leadership for students. - Looking for Advisory Board Members, please spread throughout hospital that we are looking for members to help set up program. Adjournment 8:05pm

CHAIRPERSON SIGNATURE:	DATE:	NEXT MEETING:

Advisory Committee Meeting Minutes

CHAIRPERSON: Don Martin		
MEETING DATE: March 24, 2009	MEETING TIME: 6:30pm	MEETING PLACE: SCC I-202
RECORDER: Cassie Peak		PREVIOUS MEETING: 10/02/08

MEMBERS PRESENT: OTHERS PRESENT:

	Name and Title		Name and Title		Name and Title
	Sabrina Lundberg, Texas Health Resource of Plano		Peggy Elkins, Texas Health Resource of Plano		Cassie Peak, CCCCD
	Don Martin, CCCCD		Dr. Merry McBryde-Foster, CCCCD		Jeanne Glapion, CCCCD
	Melissa Cowart, Student Representative		Jean Biros, Medical Center of McKinney		
	Judy Oyer, Texas Health Resource of Plano		Stanley Manners, Texas Health Resource of Plano		
	Dr. Cecilia Lorenzo, Lorenzo Surgical				

Agenda Item	Action Discussion Information	Responsibility
Continuing Business:	Student Organization	Don Martin
	Clinical Site Development	Don Martin
New Business:	Graduation	Don Martin
	Program Resource Assessment	Don Martin
	Preceptor Orientation	Don Martin
	ARC-ST Site Visit	Don Martin
Other: 1	Central Sterile Tech	Dr. Merry McBryde-Foster
	Clinical Orientation for Fall	Jeanne Glapion

MINUTES

Key Discussion Points	Discussion
Continuing Business: *Student Organization*	• Megan Melton and Melissa Cowart created the Surgical Technology Student Organization. • The organization has designated Texas Scottish Rite Children's Hospital as its primary philanthropic beneficiary. • They have done a Thanksgiving Dinner, sorted a mountain of gifts at the Salvation Army Angel Tree warehouse, and are planning on doing Easter eggs and Easter Baskets with the children at Texas Scottish Rite Children's Hospital. • They will also be traveling to the National AST Conference in May. Seven students will be chosen from the organization to attend based on total points accumulated for service. • Jeanne Glapion will be the advisor on the trip. Once the organization returns they most create a video or book reviewing what they learned on the trip then present it back to the rest of the members and to share that knowledge with future members.
Clinical Site Development	• Stain on Clinical Sites for next Fall semester. Please give Jeanne Glapion any contact information you have on other sites, so she may contact them for becoming a clinical affiliate for the Fall. Must be within a sixty mile radius of the Central Park Campus in McKinney. • We confirmed Texoma Surgery Center as of today, March 24, 2009 as a new site. • Please prefer CCCCD students over other schools, we aren't able to place students at some facilities due to the fact other schools from different counties are there. Since we are based in this community we would hope that the facilities would give our students preferential treatment. Three-quarters of the student at the hospitals are from different schools.
New Business: Graduation	• Graduation for the first Surgical Technology Class will be held May 14, 2009, 7:00 p.m. at UTD.
Program Resource Assessment	• Program Resource Assessment handed out. We had hoped to have the survey turned in before the site visit April 6, 2009.
Preceptor Orientation	• Don and Jeanne want to come into the clinical facilities during an in-service day during this summer to meet with the preceptors. To go over procedures and evaluations, plus what they would like the students to work on. Jeanne also has a presentation on Preceptors that she could email out

	ahead of time.
Site Visit	• ARC-ST Accreditation Site Visit will be held April 6th and 7th. The site visitors will be going over program documentation, speaking to both the 1st and 2nd level classes, meeting with instructors, and have a general group session with administration on the 6th. On the 7th, Jeanne will be taking them to two clinical sites to evaluation the facility. • Also to meet with Advisory Board Member and Employers at this time. They will compile the report by 2:00 p.m. on the 7th. Students currently in the program at the time of the site visit will be eligible to be certified once the program achieves accreditation. • The recommendation will go to the ARC-ST board and then on to CAAHEP. We will know by November after the CAAHEP meeting if we are accredited.
Other: Central Sterile Tech	• Central Sterile Tech Certificate is in the works. Will have to present curriculum to THECB and WECM. • Purchased computer data program from the accreditation site. Will need to submit curriculum to CAB. • Program is in high demand because the closest program in the DFW area is in Houston. We are trying to get curriculum done for the April 17th CAB Meeting.
Clinical Orientation for Fall	• Jeanne wants to have an orientation day for students prior to the first day of clinicals. Students would come in to their designated hospital for an orientation only, a half day affair.

CHAIRPERSON SIGNATURE:	DATE:	NEXT MEETING:

Advisory Committee Meeting Minutes

CHAIRPERSON: Don Martin		
MEETING DATE: July 30, 2009	MEETING TIME: 6:30pm	MEETING PLACE: CPC-E210
RECORDER: Michelle Briggs		PREVIOUS MEETING:

MEMBERS PRESENT: OTHERS PRESENT:

Name and Title		Name and Title		Name and Title
	Dr. Merry McBryde-Foster, Dean of HSES		Carol Blalock, CMC		Michele Briggs, 2nd year Student
	Peggy Elkins, THR Allen		Melissa Cowart, CMC		
	Pam Parker, CMC		Denise Claussen, Children's		
	Linda Neff, Children's		Sabrina Lundbery, THR Allen		
	Sudy Oyer, THR Allen		Jeanne Glapion, Clinical Coordinator		
	Don Martin, Director				

Agenda Item	Action Discussion Information	Responsibility
Old Business: `	Progress Report	Don Martin
Continuing Business:	Program Textbooks	Don Martin
	Library Resources	Don Martin
	Screening Process	Don Martin
New Business:	Outcomes Assessment Plan	Don Martin
Curriculum Decisions:		
Other:		

MINUTES

Key Discussion Points	Discussion
Old Business: Progress Report	• Site Visit ARCST was done in April and will hear verdict in November from both ARCST and CAAHEP • 6 Graduated Class of 2009 • Graduate "working" status and locations discussed: ARCST defines "employed" as either working in the field or still attending school courses – all 6 are "employed" • New Fall 2009 class: 11 students accepted • New Clinical Affiliations: Park Central Surgical Center and Children's Medical Center of Dallas
Continuing Business: Program Textbooks	• Required books for students remain unchanged. • Current list of textbooks are available to all, including students.
Library Resources	• Library resources discussed – list provided to committee
Screening Process	• The point system is being refined, possibly incorporating a skill assessment course. Possibly incorporating a mandatory interview process – may enlist PAC members for interview process. • The PSB test would still be part of the application process
New Business: Outcomes of Assessment Plan	• Program goals, mission statements and measure goals were all discussed and found appropriate. • Possible MH simulation for Fall 2009 classes • Suggestion of doing a simulated fire in the OR simulation AORN video that can be utilized as a learning tool. • Specialty competences: Item 1-13 discussed competencies established by AST <u>Recommended Standards of Practice.</u> • Discussion of preceptor in-service regarding program and facility expectations: In-services to begin Summer 2010. • Possible Case requirement explored; Minimum cases – 80, standard has minimum number of cases – 125. Highest level has minimum number cases as 150. Collin College adopted the standard of 125 cases required and number seems adequate at this time. • Emergency situations are simulated in the lab to develop critical thinking skills.
	• Upping the required amount of clinical hours was discussed as a future possibility. Doing a skills class as a pre-req was discussed as a possibility for future classes. • AST core curriculum/crosswalk was discussed. • Employer surveys discussed, ARCST mandates these

	survey be sent out six to nine months post-graduation.
	• Student survey discussed, done as part of Collin College faculty survey an the end of each semester for each class.
	• Advisory Committee Resource Assessment done in Fall, Outcomes Assessment and Goals will be done Spring and Summer.
	• Discussion of Surgical Technology Lab needs – no recommendations at this time.
Other:	

| CHAIRPERSON SIGNATURE: | DATE: | NEXT MEETING: |

Advisory Committee Meeting Minutes

CHAIRPERSON: Don Martin		
MEETING DATE: December 17, 2009	MEETING TIME: 6:30pm	MEETING PLACE: CPC-B114
RECORDER: Cassie Peak		PREVIOUS MEETING:

MEMBERS PRESENT: OTHERS PRESENT:

	Name and Title		Name and Title		Name and Title
	Dr. Merry McBryde-Foster, Dean of HSES		Melissa Cowart, Baylor Plano		Michele Briggs, 2nd year Student
	Dr. Cecilia Lorenzo, Medical Director		Denise Claussen, Children's		
	Kim Bue, Children's		Cassie Peak, Division Secretary		
	Jeremy Johnston, Methodist McKinney				
	Stanley Manners, Baylor - Plano				
	Don Martin, Director				

Agenda Item	Action Discussion Information	Responsibility
Old Business: `	Accreditation Status Update	Don Martin
	AORN Fire Safety Video	Don Martin
	Preceptor In-Service	Don Martin
	Graduate Surveys	Don Martin
Continuing Business:	Healthcare Skills Class	Don Martin
	Current Class Progress	Don Martin
New Business:	PAC Resource Assessment Survey	Don Martin
	Student Issues	Don Martin
	Open Discussion	Don Martin
Other:		

MINUTES

Key Discussion Points	Discussion
Old Business: Accreditation Status Update	• As of November 20th, 2009 Collin College Surgical Technology Program was accredited through CAAHEP until November 30, 2014.
AORN Fire Safety Video	• AORN Fire Safety Video was purchased through the Learning Resource Center and is now on file and in use in the classroom.
Preceptor In-Service	• In-service day for preceptors was done with three hospitals.
Graduate Surveys	• Graduate Surveys have been mailed to all six students after six months of graduation, so far none have been returned.
Continuing Business: Healthcare Skills Class	• Part of the new screening process will be a Healthcare skills class. • Will need CAB approval before offering in Fall 2011.
Current Class Progress	• 80% retention rate out of the 2nd year students. • . We currently have eight students in each of the classes.
New Business: PAC Resource Assessment Survey	• Advisory Committee Survey Response Form was passed out during the meeting and filled out.
Student Issues	• The Program has a 2nd year student currently in remediation after she was asked to leave a clinical site. After first remediation session she injured herself and had to get an Incomplete for the semester. For the spring semester she will be doing clinicals three days a week and make up clinical from Fall on Fridays. • More critical thinking skills in the scenarios and that this student will have to check off before returning to clinicals and may place her with Sabrina at Plano.
Open Discussion	• Discussion targeted selection process with a neuro-psych exam as well as a critical thinking interview. • Discussion regarding UT Southwestern hi fidelity simulations and is currently waiting on a response. • Discussion about condensing the program to a one year clinical Fall and Spring and moving the majority of the didactic courses to pre-requisites. • Will develop a new curriculum plan and will have to take it to CAB then on to the Texas Higher Education Board.
Other:	Adjournment at 8:15pm

CHAIRPERSON SIGNATURE:	DATE:	NEXT MEETING:

Advisory Committee Meeting Minutes

CHAIRPERSON: Don Martin		
MEETING DATE: August 18,2010	MEETING TIME: 6:30pm	MEETING PLACE: SCC
RECORDER: Cassie Peak		PREVIOUS MEETING: December 2009

MEMBERS PRESENT: OTHERS PRESENT:

Name and Title		Name and Title		Name and Title
	Don Martin, Director		Michele Briggs, Children's	
	Linda Neff, RN. Children's		Judy Oyer, Texas Health Resources - Plano	
	Kimberly Bell, RN. Children's		DeAnn Bickerstaff, Medical Center of Plano	
	Jeanne Glapion, Clinical Coordinator		Denise Claussen, Children's	
	Sabrina Lundberg, Texas Health Resources- Allen			
	Winston Centeno, Medical Center of Plano			

Agenda Item	Action Discussion Information	Responsibility
Old Business: `	Review of the Minutes	Don Martin
Continuing Business:	May 2010 Graduation and Retention	Don Martin
	Curriculum Review	Don Martin
	Goals and Learning Domains	Don Martin
	Resource Survey	Don Martin
New Business:	Membership Change	Don Martin
	Certification Exam Results	Don Martin
	Upcoming Class	Don Martin
Other:		

MINUTES

Key Discussion Points	Discussion
Old Business: Review of Minutes	• Review of minutes and approval of minutes
Continuing Business: May 2010 Graduation and Retention	• 8 students graduated past May, started program with 10, or 80% retention rate • 14/16 or 87.5% retention rate out of first two classes.
Curriculum Review	• Dropped HPRS2201(Pathophysiology) and created and implemented local needs course HPRS2374(Physiopathology). Reasoning: WECM dropped HPRS2201. • Now a three hour course previously two hours. • Approval has been granted from ARC-STSA • All Syllabi must be now posted on the Collin website due to State Law HB2504 along with Instructor Curriculum Vitae. • Master Curriculum List, Curriculum Crosswalk, Curriculum Review Synopsis.
Goals and Learning Domains	• Mission Statement and Program Goals • Clinical Case Requirements • Each facility (case) hours should be the same. • Cases are broken down into levels by ARC-STSA • Preceptors needs to double check that the accurate case is on the evaluation. • Total of Seven Hospitals currently serving the program. • Education Outcomes, Goals and Learning Domains • Measurable Program Goals
Resource Survey	• Graduate Survey was sent out six months after eligible for certification, received three back from six. • Employer survey sent out 9 months after eligible for certification, received two from six. • Resource Survey will be sent out via email to complete by Advisory Board Members.
New Business: Membership Change	• Two people per facility. • New Graduate Member: : Michele Briggs • Inviting New Student Member by next meeting. • Stanley Manners leaving committee • Reasoning for change: some of the current members are no longer attending.

Certification Exam Results	• 9 students have attempted the exam to date • 6 out of 9 scored passing results • Overall Exam Results
Upcoming Class	• 40 applicants for Fall 2010 Class • 12 students accepted • Out of 12, all chose Surgical Technology as their first priority degree.
Other:	Adjournment at 8:15pm

CHAIRPERSON SIGNATURE:	DATE:	NEXT MEETING:

Advisory Committee Meeting Minutes

CHAIRPERSON: Don Martin		
MEETING DATE: December 9th, 2010	MEETING TIME: 6:45pm	MEETING PLACE: CHEC
RECORDER: Cassie Peak		PREVIOUS MEETING: August 2010

MEMBERS PRESENT: OTHERS PRESENT:

Name and Title	Name and Title	Name and Title
Abe Johnson, Dean of Health Science and Emergency Service	Kimberly Bell, Children's Medical Center	Sherri Edkin, Children's Medical Center
Don Martin, Director of Surgical Technology	Richard McCracken, Community at Large Member	Linda Neff, Children's Medical Cneter
Jeanne Glapion, Clinical Coordinator of Surgical Technology	Judy Oyer, Texas Health Resources of Plano	Dr.Cecilia Lorenzo, Medical Director
Cassie Peak, Division Secretary of Surgical Technology	Michele Briggs, Children's Medical Center	

Agenda Item	Action Discussion Information	Responsibility
Old Business: `	Approval of Last Meeting Minutes	Don Martin
	Central Sterile Processing Program Update	Don Martin
Continuing Business:	Membership Changes	Don Martin
	Associate Faculty Hiring	Don Martin
New Business:	Certification Exam Results	Don Martin
	Class Updates	Don Martin
Curriculum Decisions:	Curriculum Revision Update	Don Martin
Other:	Open Discussion	

MINUTES

Key Discussion Points	Discussion
Old Business: Approval of Last Meeting Minutes	Approval of Minutes of August 2010 Meetings
Central Sterile Processing Update	• Marketable Skills Certificate Handout • Pre-Requisites Handout • Marketed toward high school students who have an interest in the healthcare field • Majority of Surgical Technology perquisite are attained in the program, if student chooses to come back and achieve Surgical Technology Degree. • Taking curriculum to CAB in Spring 2011 • Currently, only one other CSP program in Metroplex and it is a for-profit school. • To be eligible to take exam students must attend 400 clinical hours. • For current CSP workers to attend the program they would only have to attend the didactic portion of course.
Continuing Business: Membership Changes	• Dropped several members of the Advisory Board for lack of attendance. • Looking for new members, hoping to get one member from each clinical site.
Associate Faculty Position	• Several applicants, unfortunately they didn't finish their application. • Associate Degree required in related field • Surgical Technology Certified, CORN certified, or RNFAs(who practice in the OR setting)
New Business: Certification Exam Results	• Ten students have taken the exam, eight students have passed. • Two out of the six from the Class of 2009 • Six out of the eight from the Class of 2010 • NBSTSA School Performance Report Handout • CST Examination Handout
Class Updates	• Measurable Goals Handout • Look into getting the Employer Survey onto Survey Monkey so it can be done through the internet.
Curriculum Decisions: Curriculum Revision Update	• Revision Handout • ARC/STSA Handout • New Curriculum from ARC/STSA coming out Spring

	2011, holding pattern for revision until we see how the core curriculum comes out.
	• Goal is to remove Physiopathology courses and teaching it within the classes of Fundamentals of Perioperative Concepts, Surgical Procedures I and Surgical Procedures II.
	• Currently, students must attend 600 clinical hours and only getting six hours of credit. Revision will bump credit hours to ten.
	• Condense and more intense program.
	• Clinical will be Fall and Spring with three consecutive days.
	• Removing High Performance Work Teams, currently Technology Faculty teaching not a Health Science instructor. Curriculum will transfer into Transition to Practice.
	• Taking to CAB Spring 2011
Other: Open Discussion	• Concern: Missed clinicals • Absences count toward their grade, but some students just care about passing and not their grade. • Nursing and Respiratory Therapy have a three strike out rule, when class size grows this policy may go into effect. Meeting adjournment: 7:45PM

CHAIRPERSON SIGNATURE:	DATE:	NEXT MEETING:

Advisory Committee Meeting Minutes

CHAIRPERSON: Don Martin		
MEETING DATE: August 10, 2011	MEETING TIME: 6:30pm	MEETING PLACE: SCC
RECORDER: Amber Schmid		PREVIOUS MEETING: December 2010

MEMBERS PRESENT: OTHERS PRESENT:

Name and Title	Name and Title	Name and Title
Don Martin, Director of Surgical Technology	Judy Oyer, Texas Health Resources of Plano	
Jeanne Glapion, Clinical Coordinator of Surgical Technology	Richard McCracken, Community at Large Member	
Amber Schmid, Division Secretary of Surgical Technology	Michele Briggs, Children's Medical Center	
Kimberly Bell, Children's Medical Center	Christine Hall, Medical Center of Plano	

Agenda Item	Action Discussion Information	Responsibility
Old Business: `	Approval of Last Meeting Minutes	Don Martin
	Curriculum Revision Update	Don Martin
	Central Sterile Processing Program Update	Don Martin
	Associate Faculty hiring	Don Martin
New Business:	Certification Exam Results	Don Martin
	Progress Report	Don Martin
	Goals and Learning Domains Assessment	Don Martin
Other:	Open Discussion	

MINUTES

Key Discussion Points	Discussion
Old Business: Approval of Last Meeting Minutes	Approval of Minutes of December 2010 Meetings
Curriculum Revision Update	• New Curriculum will cut the surgical technology program down to 1 year • All core classes will be pre-requisites • The new curriculum came from the new 6th edition AST • A new freshman level computer class was added in order to meet the AST computer skills proficiency requirement • The physics and logics classes have been removed from the program • Students have the opportunity to satisfy their humanities requirement by taking logic but logic is no longer required • Once approved through the college Introduction to the Health Care Systems will be changed to Basic Health Profession Skills • The Basic Health Profession Skills class is a good selection course because it allows the instructors to see and interact with the students in a health care environment before they apply and enter the surgical technology program • The entire second year of the new curriculum is all surgical technology courses except for Microbiology which students has the option of completing prior to entering the program or anytime during the first year • Eliminates the summer break • Students attends clinicals 3 days a week in the Fall and Spring semesters • No content for the surgical technology courses have been changed • The pathophysiology course has been removed from the curriculum because it has no value to the program and the instructor that taught the course is no longer available • The competencies from the pathophysiology course is included in other courses in the new curriculum • Degree drops from 69 credit hours to 64 which makes the program more approachable and effective • Once approved this will be the only program at Collin College in health sciences that allows a student to complete and graduate from the program in 2 years • 60 credit hours is mandatory to complete a degree • There are no mandatory technical credit hours to complete

	a degree. A suggestion of 50% is given. The curriculum has 33 credit hours in the core and 31 in surgical technology to meet this
	• Clinical hours dropped from 700 to 640 which helps prevent students from missing clinicals
	• MDCA 1348 (Pharmacology) has changed to HPRS 2300 to meet the math requirements for the curriculum
Central Sterile Processing Update	• Program started as a marketable skills achievement award but decided that wasn't the best way to go so changed to a certificate program instead
	• Same pre-requisites as Surgical Technology aren't necessary for the program
	• Needs to be 30 credit hours or less and must be able to complete in 3 semesters
	• Will use the International Association of Healthcare Central Service Material Management for certification
	• Added college local needs courses to fill in credit hours; 3 local needs courses in the 1st semester and 1 in the 2nd semester
	• 400 hours has to be completed in clinicals before a student can take the IAHCSMM Technical Certification Exam
	• Gives high school students a fast track into the medical field
	• Will be taken before the advisory board in September
	• If approved will hopefully start the program in 2012
	• Will be all online courses except the clinicals
	• Limit number of students to about 15 to 18 in order to keep track of all the students in clinicals
	• Students will find their own clinical sites but will provide assistance if needed
	• Very low percentage of people currently certified
	• There is a movement in the state legislator to make certification mandatory
Associate Faculty Hiring	• Multiple applications but most were not qualified or certified
	• Had 4 good candidates to interview but one withdrew themselves for personal reasons
	• Has settled on 1 candidate to hire
	• The college has looked at turning the part time associate faculty position into a lab skills instructor position which has caused a delay in hiring
	• Due to the college's hiring freeze if the position is turned into a lab skills instructor the part time associate faculty position may be taken away

	• Will have someone hired either as a part time associate faculty member or a lab skills instructor • Wants to have someone hired in the next two weeks so they will be in place for the start of the Fall semester
New Business: Certification Exam Results	• Currently 6 students have taken the exam and 2 have not taken the exam • 5 students have passed • 1 has rescheduled to take the exam and is confident they will pass the second time • Overall 17 students have taken the exam and 15 have passed • 1 student can't be contacted to try to take the exam • Students scored 108% of national average on test • 53% of people who take the test pass, 88% of Collin College's students have passed the exam • Have to turn in applications and payments as a group to NB-ST/SA • Will require students to pay the cashier at the college for the test at the end of their 1st semester of their last year. They will then bring the receipt to show proof of payment and fill out their applications in class so instructors can check them for mistakes. • Applications will be sent in at the beginning of the last semester to make sure enough time is given for any corrections to be made • Students will take the exam as a group at Collin College before the semester ends
Progress Report	• Retention standard is 75% • 2011 class was 9 students but 1 left due to academic reasons • 81% retention rate for class of 2011 • Class of 2012 started with 12 students but two withdrew; 1 for health reason the other personal reasons • 82% retention rate for class of 2012 • Overall the program has an 87% retention rate
Goals and Learning Domains Assessment	• Provide qualified graduates each year • Attrition rate of all surgical technology students in a given semester will not exceed 20%, admission cohort attrition will not exceed 30% • Have at least 85% of all new graduates employed within 6 months • Maintain the pass rate on the NT-ST/SA exam above the national average • Majority of returned surveys from employers will express

	satisfaction with graduates • Graduates will be encouraged to continue lifelong learning professional development activities by maintaining current credential status, attendance in continuing education seminars and pursuing a higher academic degree • Employer survey results 4.02 Likert Scale score • 8 of the original 9 students in the class of 2011 graduated within 2 years • 12 students admitted for the class of 2013 • 22 Graduates total • 17 graduated employed, 2 voluntarily unemployed, 2 recent graduated seeking employment, 1 unable to contact • Graduate survey results 3.91 Likert Scale score • 7 graduates currently pursuing higher level degrees or planning to start • Will begin to use North Star learning as a tool to prepare students for the certification exam • Considering an aptitude test as part of the selective admissions process • Considering sending a list of all the required procedures to the clinical facilities and wants to have students meet with the clinical instructor each day to discuss what they have done and which procedures they still need to complete
Other: Open Discussion	• IAHCSMM writes the standards, gives the exam and certification for the Central Sterile Processing Program • New clinical sites: Baylor, Dallas Presbyterian, Methodist Richardson, and Texas Heath Presbyterian Hospital-WNJ Meeting adjournment: 8:30PM

CHAIRPERSON SIGNATURE:	DATE:	NEXT MEETING:

Advisory Committee Meeting Minutes

CHAIRPERSON: Don Martin		
MEETING DATE: November 15, 2011	MEETING TIME: 6:30pm	MEETING PLACE: CPC
RECORDER: Amber Schmid		PREVIOUS MEETING: August 2011

MEMBERS PRESENT: OTHERS PRESENT:

Name and Title		Name and Title		Name and Title	
	Don Martin, Director of Surgical Technology		Cecilia Lorenzo, MD, Medical Director		
	Jeanne Glapion, Clinical Coordinator of Surgical Technology		Sabrina Lundberg, RN		
	Amber Schmid, Division Secretary of Surgical Technology				
	Christine Hall, Medical Center of Plano				

Agenda Item	Action Discussion Information	Responsibility
Old Business: `	Approval of Last Meeting Minutes	Don Martin
	Curriculum Revision Update	Don Martin
	Central Sterile Processing Program Update	Don Martin
	Associate Faculty hiring	Don Martin
New Business:	Progress Report	Don Martin
	Goals Review and Assessment	Don Martin
	Resource Review	Don Martin
	Certification Results	Don Martin
	Retention	Don Martin
	Open Discussion	
Other:	Program Advisory Committee Recommendations	

MINUTES

Key Discussion Points	Discussion
Old Business: Approval of Last Meeting Minutes	Approval of Minutes of August 2011 Meeting

Curriculum Revision Update	• Went in October to the curriculum advisory board for approval of revisions and was approved
	• Waiting on the Texas Higher Education Coordinating Board for approval
	• Surgical Technology Program is now the only true two year healthcare program in North Texas
	• First year students take core classes along with the prerequisites making all Collin core classes prerequisites for the program
	• In the second year Summer, Fall and Spring semesters all courses will be surgical technology courses with the exception of Microbiology
	• Program went from 69 credit hours to 64 credit hours
	• Eliminated BMGT 1307 High Performance Work Teams since the material is covered in other classes in the program
	• Replacing HPRS 1271 Introduction to the Healthcare System with HPRS 1204 Basic Health Profession Skills. This class will be used as part of the evaluation for admissions into the program. Allows instructors the chance to see how students perform before entering the program. Also gives students the opportunity to evaluate the different health science programs.
	• Eliminated PHYS 1405 Conceptual Physics
	• Eliminated SOCI 1301 Introduction to Sociology but the class is listed as an alternative to PSYC 2301 Introduction to Psychology
	• In order to reflect the correct credit hours the following courses will be deleted from Collin's inventory:
	    o HPRS 2374 Physiopathology
	    o MDCA 1348 Pharmacology and the Administration of Medications
	    o SRGT 1160 Clinical I (lab)
	    o SRGT 1161 Clinical II
	    o SRGT 2260 Clinical III
	    o SRGT 2361 Clinical IV
	• The following classes have been changed to reflect the correct credit hours:
	    o SRGT 1160 is now SRGT 1260
	    o SRGT 1161 is not SRGT 1561
	    o SRGT 2260 is not SRGT 2561

	- SPCH 1321 is now SPCH 1311 with all the core substitution options - PHIL 2303 now includes Introduction to Humanities with all the core substitution options - PSYC 2301 now allows SOCI 1301 as a core option - MDCA 1348 is now HPRS 2300 Pharmacology - Adding COSC 1301 Introduction to Computer Science to the program - Adding HPRS 1204 Basic Health Profession Skills to the program - Clinical hours will remain at 640 well above the required 450 - All outcomes are easily measured and assessed for the program revisions - BIOL 2402 meets outcome number 4 as being introduced - BIOL 2421 meets outcome number 4 as being introduced - COSC 1301 meets outcome number 1 as being introduced - HPRS 1204 meets outcome number 1 as being introduced - HPRS 2300 meets outcome numbers 1, 2 and 3 as being emphasized - SRGT 1171 meets all four outcomes as being assessed - SRGT 1260 meets outcome numbers 1, 2, and 3 as being introduced - SRGT 1301 meets outcome number 1 as being introduced - SRGT 1409 meets all four outcomes as being introduced - SRGT 1541 meets outcome number 4 as being emphasized - SRGT 1542 meets outcome number 4 as being emphasized - SRGT 1561 meets all four outcomes as being practiced and emphasized - SRGT 2130 meets all four outcomes as being assessed - SRGT 2561 meets all four outcomes as being practiced and assessed - The new syllabi for the revisions include more outcomes than other syllabi in order to meet accreditors requirements.
Central Sterile Processing Update	- Went to Collin's curriculum advisory board 11/11/2011 for approval and was approved - Waiting for approval from the Texas Higher Education

	Coordinating Board • Program will start Fall 2012 • Salary ranges from $13,000 to $52,000 • Will be a one year, 16 credit hour certificate program where all lecture classes are taught online • 11 credit hours in the Fall and 5 credit hours in the Spring • Program will have 400 clinical hours
Associate Faculty Hiring	• Hired a part time associate faculty member, Michelle Briggs • Graduated from the program one year ago • Worked at Children's • Will work in the Fall and Spring Semesters • Started around the second week of classes and is currently responsible the first year student's lab class and is doing very well; will take over the lecture part the last two weeks of the semester • Will take over the surgical procedures classes
New Business: Progress Report	• There are currently 22 students in the program, most students in the program at anytime • Will start the new class in June instead of August • Anticipate accepting 12 students into the program in June • The new class that enters in June will be the first class under the new revisions and will graduate in 2013 with the current first year students • Is some concern about finding jobs for 24 students at the same times instead of just 12 • Already has clinical spots for all the students • On course for students to take certification exam in May. • The bursar's office has an account set up for the students to pay for the exam. Once the students pay and show proof with their receipt they will then be allowed to register for spring classes. • The students will fill out their application for the certification exam together in class and turn in together for review so all applications can be sent in together in order for the students to take the exam together in May. • All the students are on track to get in there 600 clinical hours and 125 cases

Goals Review and Assessment	• Will start the new revised program in June and the new class will graduate with the current 1st year students • Will have a total of 24 graduates in 2013 and will be searching for job placement for all 24 graduates • Maintain the current retention rate of 82% with 22 total students in the program currently which is the most ever for the program • Set for all 2nd year students to take the certification exam this May. The exam will be taken together in the health science computer lab during the week of finals
Resource Review	• No recommendations from the committee for resources that can be budgeted for in the upcoming budget
Certification Results	• 10 students have taken the exam and all has passed except one and that student can't be contacted to see if they can retake the exam with an overall pass rate of 95% • 90% pass rate for students taking the exam the first time
Retention	• 10 second years students, 12 first year students • 2 students withdrew over the summer from the Class of 2012 due to personal reasons • Above the retention rate requirement of 75% with a retention rate of 82%
Open Discussion	• Excellence Fund: Considering using the fund as a scholarship for students to pay for certification exam which costs $207. The money in the excellence fund can be used at the discretion of the committee Money can be donated to the excellence fund from different sources such as individuals and hospitals. Will discuss other ideas from the committee members about ways to use the money in the excellence fund • Student Organization: Is currently working on a project to build a playground for Hopes Door. Needs to raise $4500 to build the playground and has already raised $2500.
Other: Program Advisory Committee Recommendations	• Christine Hall will be looking to see if she can have the students come to TMCP when company representatives are visiting her facility giving demonstrations • Dr. Lorenzo suggests that the committee members speak to the surgeons. Asking them to speak with the representatives about going to Collin to speak with the students about their company's instruments • Christine Hall suggests that the online introduction to the Da Vinci be used. The program is open to allowing the students using the Da Vinci as long as the facility allows it. • Sabrina Lundberg suggests the continued use of ORlive Meeting adjournment: 8:09PM

CHAIRPERSON SIGNATURE:	DATE:	NEXT MEETING:

Advisory Committee Meeting Minutes

CHAIRPERSON: Don Martin		
MEETING DATE: April 24, 2012	MEETING TIME: 6:30pm	MEETING PLACE: SCC
RECORDER: Amber Schmid		PREVIOUS MEETING: November 15, 2011

MEMBERS PRESENT: OTHERS PRESENT:

Name and Title		Name and Title		Name and Title	
	Don Martin, Director of Surgical Technology		Cecilia Lorenzo, MD, Medical Director		Judy Oyer, Texas Health Resources Plano
	Jeanne Glapion, Clinical Coordinator of Surgical Technology		Sabrina Lundberg, RN		Shulene Williams, Student
	Amber Schmid, Division Secretary of Surgical Technology		Kimberly Bell, Children's		
	Christine Hall, Medical Center of Plano		Melissa Cowart, Graduate		

Agenda Item	Action Discussion Information	Responsibility
Old Business: `	Approval of Last Meeting Minutes	Don Martin
	Central Sterile Processing Update	Don Martin
	Perioperative Services Certificate	Don Martin
New Business:	Fall Semester Outcomes	Don Martin
	CST Exam Pass Rate	Don Martin
	Program Admission Process	Don Martin
	Curriculum Revision and Review	Don Martin
	Clinical Site Student Placement Numbers	Don Martin
	AST Continuing Education Credits for CST	Don Martin
	Open Discussion	Don Martin
Other:	Program Advisory Committee Recommendations	

MINUTES

Key Discussion Points	Discussion
Old Business: Approval of Last Meeting Minutes	Approval of Minutes of November 2011 Meeting
Central Sterile Processing Update	• Program to begin next Spring 2013 semester • Instructors are in the process of learning how to use Blackboard

Perioperative Services Certificate	• Needs nursing program on board in order to start program since an RN is required to teach the program
	• Needs the surgical technology department to instruct on how to scrub
	• Advisory Committee is needed to put together ideas on what is needed in the program
	    o Who will accredit the program
	    o What standards needs to be met
	• Currently El Centro is offering the program and Collin College wants to be competitive with their program

New Business: Fall Semester Outcomes	• In August 2011 12 new students were admitted at the end of the Fall semester all 12 still in program, 100% pass rate • Level 2 started with 10 students in the Fall semester and ended with 10 students, 100% pass rate • In the Spring 2012 semester the level 1 class lost 1 student due to health reasons, so now there's only 11 students

CST Exam Pass Rate	• 12 students attempted the exam and 11 passed on 1st attempt • The one that didn't pass on the 1st attempt passed on the 2nd attempt • Received a Certificate of Merit from the NBSTSA for having a 92% pass rate • Collin College's program is doing much better than the national average, the national pass rate • Outscored the national average in every section of the exam • Program has seen a steady increase in the pass rate since the program began • Currently working on improving scores in the administration section of the exam

Admissions Process	• Application deadline has moved to the third Friday in April
	• Next cohort starts June 4th
	• 45 total applicants with 25 that are complete
	• Maximum GPA Points given 10 based on the cumulative GPA of the following classes that have been completed:
	    o Anatomy and Physiology I
	    o Anatomy and Physiology II
	    o Medical Terminology I
	    o Basic Health Profession Skills
	    o Microbiology
	    o Composition/Rhetoric I
	    o Fundamentals of Speech Communication
	    o Any Activity Course
	    o Computers and Technology
	    o High Performance Work Teams
	    o Behavioral Science
	    o Humanities, Philosophy or Fine Arts
	• A maximum of 14 points will be given for any pre-requisite/core course work completed
	• A maximum of 16 points will be given for the PSB Exam
	    o Academic Aptitude: Maximum 2 points
	    o Spelling: Maximum 2 points
	    o Reading/Comprehension: Maximum 4 points
	    o Natural Science: Maximum 6 points
	    o Vocational Adjustment: Maximum 2 points
	• A maximum of 5 points will be given for the essay
	    o Clearly Written: Maximum 1 point
	    o Grammar: Maximum 1 point
	    o Spelling: Maximum 1 point
	    o Answers the question "Why has surgical technology

	been selected as a career?”: Maximum 1 point
	o Answers the question “Why does the student want to come to Collin College?”: Maximum 1 point
	• Attended an information session: 10 points
	• Submission of Reference Letters: Maximum 5 points
	o 1 Letter: Maximum 2 ½ points
	o 2 Letters: Maximum 5 points
	• Submission of official transcripts: Maximum 5 points
	o High School: 1 point
	o College Transfer: 2 points
	o Collin College: 2 points
	• 2 additional points are giving for having a baccalaureate degree
	• 2 additional points are giving for all non SRGT courses complete
	• 1 point for being a first time allied health applicant
	• Total Possible Points: 70
	• Looking for new ways to tweak the admissions process
	• Admissions process has to be objective rather than subjective
	• Looked into having a behavioral test given but haven’t been able to find anyone willing to make one for students entering a college program
	• The basic health profession skills class will give the instructors a chance to work with and see how well the students can perform in their selected industry before entering the program
Curriculum Revision and Review	• Curriculum has been revised
	• Program now begins in the summer
	• Waiting on approval from the ARC-STSA and CAAHEP
	• Surgical Technology Program is now the only true two year healthcare program in North Texas and this has drawn more interest, over 100 students came to information sessions this year
	• First year students take core classes along with the prerequisites making all Collin core classes prerequisites for the program
	• In the second year Summer, Fall and Spring semesters all courses will be surgical technology courses with the exception of Microbiology
	• Program went from 69 credit hours to 64 credit hours
	• Eliminated BMGT 1307 High Performance Work Teams since the material is covered in other classes in the program
	• Replacing HPRS 1271 Introduction to the Healthcare System with HPRS 1204 Basic Health Profession Skills. This class will be used as part of the evaluation for admissions into the program. Allows instructors the chance to see how students perform before entering the program. Also gives students the

opportunity to evaluate the different health science programs.

- Eliminated PHYS 1405 Conceptual Physics
- Eliminated SOCI 1301 Introduction to Sociology but the class is listed as an alternative to PSYC 2301 Introduction to Psychology
- In order to reflect the correct credit hours the following courses will be deleted from Collin's inventory:
  - HPRS 2374 Physiopathology
  - MDCA 1348 Pharmacology and the Administration of Medications
  - SRGT 1160 Clinical I (lab)
  - SRGT 1161 Clinical II
  - SRGT 2260 Clinical III
  - SRGT 2361 Clinical IV
- The following classes have been changed to reflect the correct credit hours:
  - SRGT 1160 is now SRGT 1260
  - SRGT 1161 is not SRGT 1561
  - SRGT 2260 is not SRGT 2561
  - SPCH 1321 is now SPCH 1311 with all the core substitution options
  - PHIL 2303 now includes Introduction to Humanities with all the core substitution options
  - PSYC 2301 now allows SOCI 1301 as a core option
  - MDCA 1348 is now HPRS 2300 Pharmacology (no longer teaches administration of medicine)
- Adding COSC 1301 Introduction to Computer Science to the program
- Adding HPRS 1204 Basic Health Profession Skills to the program
- Clinical hours will remain at 640 well above the previous minimum requirements
- New Case Requirements:
  - Total Number of Cases Required:
    - General Surgery: 30, 20 as 1st scrub and 10 as second scrub
    - Surgical Specialties: 90, 60 as 1st scrub and 30 as second scrub
    - Diagnostic Endoscopy: 10 may be applied toward second scrub cases
    - Labor and Delivery: 5 vaginal deliveries may be applied toward the second scrub cases
- All outcomes are easily measured and assessed for the program revisions

	- BIOL 2402 meets outcome number 4 as being introduced - BIOL 2421 meets outcome number 4 as being introduced - COSC 1301 meets outcome number 1 as being introduced - HPRS 1204 meets outcome number 1 as being introduced - HPRS 2300 meets outcome numbers 1, 2 and 3 as being emphasized - SRGT 1171 meets all four outcomes as being assessed - SRGT 1260 meets outcome numbers 1, 2, and 3 as being introduced - SRGT 1301 meets outcome number 1 as being introduced - SRGT 1409 meets all four outcomes as being introduced - SRGT 1541 meets outcome number 4 as being emphasized - SRGT 1542 meets outcome number 4 as being emphasized - SRGT 1561 meets all four outcomes as being practiced and emphasized - SRGT 2130 meets all four outcomes as being assessed - SRGT 2561 meets all four outcomes as being practiced and assessed • Currently working on 10 year program review, deadline is May 7, 2012 but could seek an extension since the program just went through the curriculum revision
Clinical Site Student Placement Numbers	- Need more clinical sites - Some sites have kept Collin's students out due to them already having students from other colleges in the area - Needs ideas on how to arrange students and where to send them due to the lack of new sites - Can't send level 1 students to surgery centers - Would like Collin County hospitals to prefer Collin College students over students from other programs in other service areas - Running into roadblocks when looking for new clinical sites. Often the site initially agrees but then backs out due to accepting students from other programs - Looking for clinical sites within a 50 mile radius of McKinney - Tarrant County isn't an option since Tarrant Counties sites are full with the students from Tarrant County Community College, we want to respect boundaries - Needs advisor members to speak to other facilities in their systems to see if they would be willing to take Collin students

	- Looking to hire a part time faculty member that is a CST to help Jeanne with clinicals since she will be teaching the central sterile processing classes in the fall.
AST Continuing Education Credits for the CST	- In order to maintain certification CSTs are required to complete 60 CEUs in a 4 year cycle - AST Continuing Education Policies for the CST and CSFA is located on the AST website www.ast.org
Open Discussion	- Student A, a level 1 student hasn't done well at clinicals - Student A essentially was removed from clinicals due to a HIPAA violation and behavioral issues - Student A has a passive aggressive, manipulative personality - Student A doesn't follow directions for assignments - Facility noted that student A doesn't know their instruments - Student A has had conflicts not only with the educators and staff at the facility but also with their class instructors as well - Student A hasn't been following the chain of command or following procedures at the facility - Student A seems unsure of themselves and needs someone over them giving them their full attention all the time - Not at a point to where student A should be removed from the program due to lack of ways to document the behavior/personality issues - Student A is very defensive and doesn't take responsibility for their own actions - Student A was on probation for inappropriate behavior in class and the clinical site - Instructors needs to set guidelines for the use of technology in class, student A uses social media during class - Needs documentation of student A's HIPAA privacy violation while at clinicals in order to move ahead with appropriate action - Dean has told the instructor to give a written assignment to the student to take the place of the missed clinicals so the student doesn't fail the class - Instructor feels an assignment isn't appropriate since an essay can't give student A the experience of scrubbing and being in the operating room - Instructor feels that it is more appropriate for the student to receive an incomplete for the class and make the class up in the fall semester - Initially student A was given a 2 week probation, evaluated and sent back to clinicals before finally being removed - Collin College policies and procedures over rules any program/course policies and procedures but the HIPAA violation student A committed could make it a federal violation - Having a student such as student A in the program can hurt the reputation of the program. More importantly is having someone working in the industry like student A jeopardizes patient care - Plan of action for student A o Suspended from clinicals for HIPAA violation

	○ Give an incomplete grade ○ Have student A make up class in the fall semester ○ Set objectives the student needs to met - Student B was pulled from their clinical facility due to a possible learning disability - Student B comes in to the lab to practice during their scheduled clinical hours - Student B will have the chance to make up clinicals in the fall and still be able to graduate with their class - Program needs ideas on an admissions process that will help identify students such as student A and student B - Looking to add a program that will allow current CSTs that obtained their certification through an accredited program obtain an associates degree through Collin College ○ Needs guidelines to go by such as testing in instruments, gowning and gloving, draping, procedures, skills assessments, counting, role descriptions ○ Facilities send their competencies so a framework can be put together for this program
Other: Program Advisory Committee Recommendations	Meeting adjournment: 8:48 p.m.

CHAIRPERSON SIGNATURE:	DATE:	NEXT MEETING:

Advisory Committee Meeting Minutes

CHAIRPERSON: Don Martin		
MEETING DATE: November 6, 2012	MEETING TIME: 6:30pm	MEETING PLACE: SCC- D-121
RECORDER: Amber Schmid		PREVIOUS MEETING: April 24, 2012

MEMBERS PRESENT: OTHERS PRESENT:

Name and Title	Name and Title	Name and Title
Don Martin, Director of Surgical Technology	Cecilia Lorenzo, MD, Medical Director, Surgical Technology	Judy Oyer, Texas Health Resources Plano, Employer PAC Member
Jeanne Glapion, Clinical Coordinator of Surgical Technology, Faculty PAC Member	Sabrina Lundberg, RN, Employer PAC Member	Lindsay Harman, Student PAC Member
Amber Schmid, Division Secretary, Surgical Technology	Kimberly Bell, Children's, Employer PAC Member	Abe Johnson, Dean of Health Sciences, Administrative PAC Member
Christine Hall, Medical Center of Plano, Employer PAC Member	Melissa Cowart, Practicing CST PAC Member	Emily Smith, Student PAC Member
Janet Wellman, CST Medical Center of Plano, Employer PAC Member	Richard MacCracken, Public PAC Member	Pam Parker, CST Centennial Medical Center, Practicing CST Member

MEMBERS ABSENT: Crystal Stanford, Graduate PAC Member; Heather Martin, Graduate PAC Member

Agenda Item	Action, Discussion, Information	Responsibility
Old Business: `	Approval of Last Meeting Minutes	Don Martin
	Central Sterile Processing Update	Don Martin
New Business:	Progress Report	Don Martin
	Goals Review and Assessment	Don Martin
	Review Data from Resource Surveys, Budget, Inventory and Library Resources	Don Martin
	CST Exam Pass Rate	Don Martin
	Program Admission Process	Don Martin
	Curriculum Revision and Review	Don Martin
	PAC Membership and Attendance Guidelines	Don Martin
	Spring Meeting Schedule	Don Martin

	Dean's Comments	Abe Johnson
	Closed Discussion—Clinical Issue	Don Martin
Other:	Program Advisory Committee Recommendations	Don Martin

MINUTES:

Key Discussion Points	Discussion
Old Business: Approval of Last Meeting Minutes	Approval of Minutes of April 2012
Central Sterile Processing Update	• 16 credit hour program • Curriculum is approved by the International Association of Healthcare Central Service and Material Management (IAHCSMM) • A comprehensive online course in central service and sterile processing • Currently waiting for approval from the online advisory board • Start the first class with 12-15 students • Held first information session on November 5th w/3 more information sessions left during the Fall 2012 semester • Total of 8 applicants so far • Within the next 3 years IAHCSMM requires everyone to be certified • A total of 6 exams throughout the course and 1 comprehensive final exam • Considering adding a certification exam review class at the end of the program during clinicals • Interview will be added to the admissions process, needs ideas and suggestions to make the interview as objective as possible • Surgical Technology lab will be open for the central sterile processing students to come in and use when not in use by ST students • Certification requirements include 400 clinical hours and a certification exam through IAHCSMM • IAHCSMM Central Service Technical Manual, 7th edition will be used as text book • The curriculum overview and course objectives along with the syllabi were distributed to the committee for review • Don Martin answered specific questions committee members asked
New Business: Progress Report	• 1 student withdrew from cohort A due to health reasons • Cohort A has a 97% retention rate • Cohort B has a 100% retention rate

Goals Review and Assessment	• Program Outcomes were reviewed. Each member received a copy of the program outcomes. • Goals for each outcome is to meet or exceed the national average in the specific subject area of the National Board of Surgical Technology and Surgical Assisting Certified Surgical Technologist Exam

Review Data from Resource Surveys, Budget, Inventory and Library Resources	• Student Program Resource Surveys
	  o Average rating 4.2 on Likert Scale
	  o No rating was below a 3
	• Faculty Program Resource Surveys
	  o Hasn't been completed
	  o Will send out the information once surveys are completed
	• Advisory Committee Program Resource Survey
	  o Fill out the provided survey form and return before Spring meeting on March 19th
	  o Use the budget, program equipment inventory, and library reference material provided to fill out survey
	  o All material will be sent out electronically as well
	  o Committee members can send an email with their contact information and a self-addressed stamped envelope will be provided to return the survey in
	    ■ Previous Survey Results
	      • Received a total of 6
	      • Average rating 4.61 on Likert Scale
	      • No area was rated a 2
	      • Only 2 areas rated a 1 due to the person(s) who completed the survey being unfamiliar with the area
	• Review the library resources to see if any new material should be added
	• Recommendations of equipment and resources will be delayed until next meeting so committee members can review the equipment and resources material provided
	• Comments and suggestions were solicited from the members

CST Exam Pass Rate	• May 2012 - 10 Students took the certification exam • 9 students passed exam on 1st attempt • Waiting for 1 student to retake the exam • 90% pass rate which exceeds the 75% pass rate needed for accreditation • Received the National Certificate of Merit second year in a row
Program Admission Process	• Adding a process of an objective interview is entertained • Committee members will participate in the interview • Group of 5-6 will interview applicants

	• Possibly use the admissions point system to determine who to interview • Don Martin and Jeanne Glapion will observe the EMS program interview to gain ideas • Needs ideas and suggestions for how to conduct the interview and what questions to ask in order to objectively evaluate interpersonal and teamwork skills • Would like to implement the interview for the next group of surgical technology students • Comments from the committee were favorable • Need to verify the legal implications before implementing
Curriculum Revision and Review	• Submitted CST 6th edition core curriculum in April 2012 • CST 6th edition core curriculum has been approved • Submitted 10 year program accreditation review in May 2012 • Submitted 10 year program accreditation review revision October 31, 2012, currently waiting on decision

PAC Membership and Attendance Guidelines	• Due to 10 year program accreditation review findings a PAC Memberships and Attendance Plan of Action has been established to increase attendance of all communities of interest
	• Plan of Action
	  o Student representation on the PAC
	    ▪ Current program students will elect 2 student peers as representatives to the PAC to be appointed on or before November 1, 2012. The student representative attendance is mandatory at every PAC
	    ▪ One of the student representatives will deliver a mandatory report on the state of the class at each meeting to better assure student input to the PAC
	  o The PAC now includes a minimum of 2 practicing CST's
	  o The PAC now includes a minimum of 2 program graduates
	  o PAC members will be replaced if they miss 2 consecutive meetings. Replacement PAC members will be appointed at least 2 weeks prior to the next PAC meeting
	  o PAC members can send someone in their place (proxy) if they miss a meeting
	  o PAC member attendance will be tracked by use of a sign-in sheet

Spring Meeting Schedule	• Spring meeting: March 19th at 6:30 at Central Park Campus • All Spring meetings will be held at the Central Park Campus • All Summer meetings will be held at the Preston Ridge Campus • All Fall meetings will be held at the Spring Creek Campus
Dean's Comments	• Recommended to elect a president to head the PAC meetings which also shows input from the members • Submitted revisions to the 10 year program review • College is currently preparing for SACS accreditation. If the program isn't accredited, the college automatically gets cited • Decreasing current faculty load is being considered • Part-time faculty position open

	• Currently searching for new clinical sites; recently added Baylor Heart and Baylor McKinney as clinical sites
Closed Discussion— Clinical Issue	• One student had to be removed from clinicals, student is currently on probation • Student will return to clinical in the spring • Student will make up clinicals Fall 2013, won't graduate with class in May 2013 but will graduate December 2013 as long as behavior changes and student isn't dismissed from the program • Issue was documented and explained to the student • Classmates feel uncomfortable around student so they don't work with student • Student has been referred to the counselor; will make it mandatory for the student to visit with the counselor • Program handbook, which the student signed acknowledging agreement and understanding, states specifically how the situation is dealt with • Regular discussions with the student are currently going on about how to improve behavior. Some improvement has been noted • Interview process needs to be included to help identify these types of behaviors before the student enters the program • Include letters of recommendation in interview process • Possibly include if the student has ever been dismissed from any other program on application; if found not to be truthful, the student can be dismissed from the program • Looking for critical thinking classes that students can take • Go back to making students fill out evaluations everyday
Other: Program Advisory Committee Recommendations	Meeting adjournment: 9:03 p.m.

CHAIRPERSON SIGNATURE: Dr. Martin, CST	DATE: 11/9/12	NEXT MEETING: 3/19/13

Estimated Cost of Surgical Technology Program

Tuition and Fees: $2574
Books: $600
Scrubs (uniforms): $40
Total: $3214

Faculty Development

1. Faculty Development Day Conference, CHEC, Spring, 2013
2. IAHCSMM 47th Annual Conference, Albuquerque, NM   April, 2012
3. Best Little Workshop in Texas-Fostering Perioperative Clinical Skills, Fort Worth, Texas March.2012
4. Texas State Assembly, Fort Worth, Texas April, 2012
5. Teaching Critical Thinking For Academic Success, Career Readiness & Personal Development, Webinar, October, 2012
6. Retention Assessing Why Students Stay & Why They Leave, Webinar, November, 2012
7. EEO Laws and Discrimination Prevention for Higher Education, CPC November, 2012
8. Unlawful Harassment Prevention for Higher Education Faculty, CPC, November, 2012
9. Faculty Training/Certification Modules, CPC, December, 2012
10. Faculty Development Conference, Fall, 2012
11. Annual Clinical Coordinator's Instructors Forum, San Antonio, Texas, March, 2011
12. EDTC 3323- Instructional Multimedia Project II, Surgical Scrub, October,2011
13. Purdue University, Central Sterile Processing, December, 2011
14. IAHCSMM, Certification/Registered Central Sterile Processing, December, 2012
15. Basic Laparoscopic Instruments, IAHCSMM, December, 2011
16. Validation and Verification, IAHCSMM, December, 2011
17. Faculty Development Conference, CPC Spring, 2010
18. Essentials of Leadership, Collin College SCC, March 2010
19. Faculty Development Conference, SCC, August, 2009
20. AST Conference, Las Vegas, Nevada May, 2009

Description	Location	Credits Earned	Completion Date
Collin College Faculty Development Week	Collin College, McKinney, TX	6 hours	January, 2009
Association of Surgical Technologist (AST) Instructor's Forum	Memphis, TN	17 CEU's	February, 2009
AST Conference	Las Vegas, NV	29 CEU's	May, 2009
Collin College Faculty Development Week	Collin College, McKinney, TX	5 hours	August, 2010
AST Instructor's Workshop	Dallas, TX	20 CEU's	May, 2010
AST National Conference	Dallas, TX	28 CEU's	May, 2010
Collin College Faculty Development Week	Collin College, McKinney, TX	5 hours	August, 2011
AST Instructor's Forum	San Antonio, TX	20 CEU's	February, 2011
Collin College Faculty Development Week	Collin College, McKinney, TX	5 hours	August, 2012
Texas State Assembly of AST	Fort Worth, TX	12 CEU's	March, 2012
University of Texas at Brownsville BAAS Degree Program	Brownsville, TX (Distance Learning)	30 Credit Hours	January, 2010 - May, 2013

Collin College Surgical Technology Program 2013 Continuous Quality Improvement Plan (CQI)

It is important to document program assessment and plans for continuous improvement to be in compliance with the SACS Comprehensive Standard 3.3.1.1. Often it may not seem as if official planning took place. However, analyzing decisions that your program has made can uncover the planning that occurred. The questions below will guide you in determining which decisions in your program resulted from deliberate planning.

Continuous Improvement Plan

Describe one decision made or action taken in the past year. This could be a change in textbooks, a change in technology, course sequence, learning outcomes, etc.

In May, 2009, Collin College graduated the first cohort of surgical technology students. This was the first group eligible to sit for the national certification exam. With the graduation of the first cohort the program began to track the first time pass rates and content area scores of program participants. However, trends cannot be assessed from a single cohort. With the graduation of the second cohort in 2010 the program began to collect data to compare with national trends related to the certification exam. Upon receiving the exam results of the 2010 cohort the program began investigating methods to improve the surgical technology student outcomes on the National Board of Surgical Technology and Surgical Assisting Certification Exam (NBSTSA).Program faculty/staff began a search for tools and methods to help the surgical technology students better prepare for the exam. In 2011 the program elected to begin using a web based certification exam review platform known as NorthStar Learning.

Sources of Evidence

What prompted the decision? (i.e. what did you observe or what happened) Were you trying to fix a problem? What were your sources of information? What types of information or measures did you use to make this decision? How did your program come to the decision to make this change?

While the programs first time pass rate and content area scores were above the national average it was decided upon analysis that there was room for improvement. The decision to adopt the NorthStar

Learning platform was prompted by the desire to increase the NBSTSA Certification Exam first time pass rates of the Collin College Surgical Technology Program. Additionally, the faculty and staff were seeking a method to improve the overall scores on the certification exam of program completers.

An evaluation of the NorthStar Learning web based program was undertaken by the program faculty and staff. The program reviewed ease of use, cost per student, relevance of the instructional materials, and statistics related to national results as provided by NorthStar Learning.

The decision to utilize the NorthStar Learning review platform as part of the program certification exam preparation was discussed by the program faculty/staff. The decision was made by the faculty/staff to proceed with the use of the NorthStar Learning program.

Intended Outcomes

How did you expect student learning to be affected by the change your program made? What outcomes did you hope would come from this change?

The expectation was one of increased performance in the first time pass rates and content area scores of the Collin College Surgical Technology students.

Findings

Did the intended outcomes occur as a result of the change your program made? What outcomes actually occurred?

The program has achieved a 90%+ first time pass rate since adopting the NorthStar Learning platform. The program undertook to review the scores in each category of the certification exam. The results are shown in Table 1 below.

Table 1.

COLLIN COUNTY COMM COLLEGE - 3446

Certified Surgical Technologist Examination

Certified Surgical Technologist Examination

Date Range: 5/1/2012 - 7/31/2012

Content Area	1A	1B	1C	1TOT	2A	2B	2TOT	3A	3B	3C	3TOT	Total Raw
Max Possible Score	30.00	65.00	10.00	105.00	5.00	15.00	20.00	30.00	10.00	10.00	50.00	175.00

All Candidates Summary

	No.	%		1A	1B	1C	1TOT	2A	2B	2TOT	3A	3B	3C	3TOT	Total Raw
Total	10		Avg. Score	24.20	49.10	8.10	81.40	4.40	11.10	15.50	23.20	8.50	8.30	40.00	136.90
Passing	9	90%	% of Total	81%	76%	81%	78%	88%	74%	78%	77%	85%	83%	80%	78%
Failing	1	10%	% of National	111%	109%	107%	109%	117%	103%	106%	121%	107%	112%	115%	111%

First Time Candidates Summary

	No.	%		1A	1B	1C	1TOT	2A	2B	2TOT	3A	3B	3C	3TOT	Total Raw
Total	10		Avg. Score	24.20	49.10	8.10	81.40	4.40	11.10	15.50	23.20	8.50	8.30	40.00	136.90
Passing	9	90%	% of Total	81%	76%	81%	78%	88%	74%	78%	77%	85%	83%	80%	78%
Failing	1	10%	% of National	111%	109%	107%	109%	117%	103%	106%	121%	107%	112%	115%	111%

Repeat Candidates Summary

	No.	%		1A	1B	1C	1TOT	2A	2B	2TOT	3A	3B	3C	3TOT	Total Raw
Total	0		Avg. Score	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Passing	0		% of Total	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Failing	0		% of National	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%

National Mean

	No.	%		1A	1B	1C	1TOT	2A	2B	2TOT	3A	3B	3C	3TOT	Total Raw
Total	4094		Avg. Score	21.86	45.10	7.60	74.56	3.77	10.82	14.58	19.25	7.97	7.44	34.66	123.81
Passing	2653	65%	% of Total	73%	69%	76%	71%	75%	72%	73%	64%	80%	74%	69%	71%
Failing	1441	35%													

Note: Percentages are rounded up to the nearest whole number.
Does not include data for pre-graduate candidates.

Standard Met
Are the outcomes sufficient? Are you satisfied with the results from the change your program made?

As demonstrated by the data in Table 1 the program surpassed the national average pass rate of 65% with a program pass rate of 90%. Furthermore, the program also scored at least 103% of the national average in every category of the certification exam with some categories demonstrating scores as high as 121% of the national average. The program is satisfied with the process of change and believes the outcome will be of great benefit to the learners, the program and the community at large.

Next Action Plan
Based on the outcomes of the change made by your program, what is your next step?

The program will assess student performance in the form of improvement in various sections of the certification exam, this improvement will be reflected in higher scores on the student Total Scores and in each content area. The continued use of NorthStar Learning along with the addition of other new instructional materials should lead to an improvement in outcomes in the academic setting as well improved results on the certification exam.

In 2012 the Collin College Surgical Technology Program received approval of a revised curriculum through the Accreditation Review Council on Surgical Technology and Surgical Assisting (ARC/STSA), a Commission on Accreditation of Allied Health Education Programs review committee. The revision of the program curriculum was undertaken to comply with the standards introduced by the Core Curriculum for Surgical Technology, 6th edition. As part of the revision Collin College elected to rearrange the program curriculum into two 1 year sections. The first year includes all prerequisites while the second year includes the surgical technology program didactic, lab, and clinical courses. It is hoped the revision will lead to higher on time completion rates for the AAS degree as well as improved performance on the certification exam.