



Interim Report

(to be completed by the program director)

Program Information

Program Sponsor: _____

Program Type:

BMS ☐ CG ☐ DMS ☐ HT ☐ HTL ☐ MLA ☐
MLM ☐ MLS ☐ MLT ☐ Path A ☐ PHM ☐ PBT ☐

Program Location (City, State, Zip): _____

Program Director Name/Credentials: _____

Program Director Phone: _____

Program Director Email: _____

Date of Last Award: _____

The Interim Report serves to confirm the program is reviewed to ensure alignment with current standards, with attention to Standard II Assessment and Continuous Quality Improvement.

*Additional documentation may be submitted with the Interim Report to support narrative statements, although it is not required. The maximum number of pages submitted as documentation with the Interim Report should **not exceed 10 pages**.*

Complete the following chart with data from the last three active years of outcome measures since the ten-year accreditation award. If the program was inactive since the ten-year accreditation award, please note that in the chart and describe in the box below.

Outcome Measures	-	-	-
ASCP BOC Certification Rates	%	%	%
AMT Certification Rates	%	%	%
Other Certification Rates	%	%	%
Combined Certification Rates	%	%	%
Graduation Rates	%	%	%
Attrition Rates	%	%	%
Placement Rates	%	%	%



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Outcome Measures: Describe how all program reported outcome measures (certification rates, graduation rates/attrition rates, and placement rates) have been analyzed and used in program assessment and quality improvement.

- a. If a program change has occurred since the last accreditation cycle in response to assessment of program reported outcome measures, provide an example of the change.

- b. Describe the impact of that program change since implementation.

Graduate Feedback: Describe how graduate feedback that is collected at least three months post-graduation (for example, surveys, advisory committee, clinical visits, etc.) has been analyzed and used in program assessment and quality improvement.

- a. If a program change has occurred since the last accreditation cycle in response to assessment of graduate feedback, provide an example of the change.



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- b. Describe the impact of that program change since implementation.

Employer Feedback: Describe how employer feedback (for example, surveys, advisory committee, clinical visits, etc.) has been analyzed and used in program assessment and quality improvement.

- a. If a program change has occurred since the last accreditation cycle in response to assessment of employer feedback, provide an example of the change.

- b. Describe the impact of that program change since implementation.

Additional Review Measures (if applicable): Identify and include how other measures, including qualitative measures, are evaluated in this process (for example, review of student evaluations, end of course evaluations, other program or faculty evaluations, curriculum reviews).



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- a. If a program change has occurred since the last accreditation cycle in response to assessment of additional review measures, provide an example of the change.

- b. Describe the impact of that program change since implementation.

If during the last three active years, one or more Annual Survey Action Plan(s) have been required due to not meeting NAACLS benchmarks, describe the impact of the Action Plan(s) that was/were provided to NAACLS.

☐ **NA**, No Annual Survey Action Plan was required.

- a. Describe the benchmark(s) that was not met and the Action Plan created.

- b. Describe the impact of the Action Plan(s) since implementation.

Preparer

Important note: Please type your name below. Do not use E-Sign or "Save a certified copy".

Name: _____

Date: ____/____/____

Otero ML/Phlebotomy Program Documented Plan for Systematic Assessment

Overall Plan for All Outcomes and Goals

The General Plan for Systematic Assessment will follow the Four Step STAR Model.

1. S: Setting Goals

In the "Setting Goals" step the administration, program director, and faculty will set goals for improvement. They will look at the student population, the resources available, and will then plan courses, internships, and seminars to fit the current needs. Other influencing factors will be considered such as teaching methods (lectures, quizzes, exams, on-line content, laboratory practical exams, and discussions), student resources, budget, equipment and supplies and other factors that are used for student and program success.

2. T: Teaching the Material

In the teaching step of the cycle, faculty will teach the course material and assess the students.

3. A: Assess the Learning Experience

In the "Assessing" step of the cycle, the Program Director, Allied Health Director, Faculty, and Advisory Board will evaluate and assess the outcomes of the previous semester or academic year. This will involve data from tests, evaluations from students, evaluations from affiliate sites, feedback from the advisory committee, surveys from students and employers, and faculty input as to how well things worked during the indicated time frame.

4. R: Results to Plan for the next cycle

The last phase of the cycle is to "Report and Plan" what steps will be taken based on the findings in step 3. Improvement changes will be suggested and implemented for the next cycle.

Phase 1 of the cycle will be done at the beginning of the semester or program during faculty meetings and/or advisory board meetings.

Phase 2 of the cycle is an ongoing process throughout the semester and will be further discussed at faculty meetings.

Phase 3 of the cycle will be performed through grades, completion, board scores, graduate and student surveys, faculty evaluations, and employer and preceptor surveys.

Phase 4 of the cycle will be discussed at faculty and/or advisory board meetings at the end of the semester or with the Allied Health Director.

See *Schedule for Course and Program Improvement, assessment deadline, and overall MLT and Phlebotomy due dates* for a more specific timeline.

Program Outcomes Assessment Goals and Evaluation

1. 75% of students who take the BOC MLT/Phlebotomy exam will pass the exam within the first year of graduation. STAR will be applied:

S: Goal is 75% will pass the exam within the first year of completion of the degree or certificate.

T: Will be included in each course and evaluated with each course review.

A: Evaluate the BOC scores.

- The results of the BOC exams will be evaluated at least once per year. Individual and average scores will be compared to the National average to see where improvements are needed. Board of Certification scores will be evaluated by the director and faculty for continued improvement in course work and curriculum changes. This is yearly during January/February after MLT December graduates have taken their exams and September after the Phlebotomy students have taken their exams.
- A post-exam survey will be sent 1-2 weeks after the students have taken the exam to assess their preparedness. These results will also be evaluated at faculty meetings for curriculum adjustments if needed.
- Scores will be discussed at Advisory board meetings for input on ways to improve.

R: Pass rates will be reported to the advisory board, posted on the Otero/MLT website, and submitted to the yearly NAACLS outcome reports. Improvements will be planned and implemented for the next cycle.

2. 70% of students who have begun the final half of the program go on to successfully graduate from the program. STAR will be applied:

S: Goal is that 70% of students who have begun the final half of the program will successfully graduate. The final half of the MLT program at Otero College is when the students enter their 3rd semester and have passed MLT 1032 Hematology II not including the optional summer semester of their 1st year. Spring of 2nd year is the official beginning of the final half of the program.

T: Will be included in each course and evaluated with each course review.

A: Assessment will be made through each course pass rate and program pass rate. This will be evaluated at least once per year as courses and programs are completed. Faculty meetings and advisory board meetings will be held to discuss graduation rates and improvements.

R: Program pass rates will be reported to the advisory board and posted on the website. They will also be submitted to the NAACLS yearly outcome reports. Improvements will be planned and implemented for the next cycle.

3. 70% of graduates either find employment in the field or a closely related field, (for those who seek employment), or continue their education within one year of graduation. The impact of the MLT Program on our service area will be measured by the number of jobs that our students will occupy in the Southeastern Colorado region. This will include data from our contracted internship sites as well as other medical facilities throughout our area. A shortage of qualified laboratory employees

is acute in our Southeast Colorado area. One of the goals of the program is to fill this need. STAR will be applied:

S: Goal is the 70% of graduates either find employment in the field or a closely related field, or continue their education within one year of graduation.

T: Will be included in each course and evaluated with each course review.

A: Will be made through the Colorado Community College System Post-graduation V135 reports. Students will be contacted after graduation and information about employment or further education will be gathered. Program surveys will also be completed at this time to evaluate program improvements. Results will be discussed at faculty and advisory board meetings to determine ways to improve.

R: V135 reports will be submitted to the college system office and employment data will be posted to the website and NAACLS yearly outcome reports.

Improvements will be planned and implemented for the next cycle.

The STAR Components Are Applied to the Goals of the MLT/Phlebotomy Program Assessment and Quality Improvement not included in the outcome goals above.

1. Advisory committee members' input will be sought and discussed by the program director and faculty to determine if students are acquiring the necessary skills to enter the work force. Also, emerging skills and knowledge will be discussed to ensure our graduates are learning the techniques and skills for an emerging field. Advisory board meetings are held twice per year. Minutes are recorded and reviewed after each meeting and before the next to see if adjustments in program improvement have been met.

S: Goal is for students to have the skills necessary to enter the workforce.

T: Teaching is adjusted based on advisory board input on necessary skills.

A: Many advisory board members are employers who will provide informal assessment. Also, employer surveys will be conducted to assess the Otero graduates' skills upon entering the workforce.

R: Advisory board meeting minutes will be recorded along with employer surveys.

Improvements will be planned and implemented for the next cycle.

2. Student feedback after graduation and employment will be evaluated by the director to determine:
 - a. if students were given the necessary job skills to be successful in the workforce.
 - b. if the course work adequately prepared them for the BOC exams.
 - c. if their clinical rotations were sufficient to train them to step into the workforce with sufficient on the job training.

S: Goal is for students to feel confident to enter the workforce.

T: Teaching is adjusted based on student evaluation on workforce preparedness.

A: Assessment is based on future surveys to determine if the goal was met.

R: Improvements will be planned and implemented for the next cycle.

3. Graduation and employment surveys are included in the V135 reports required by the Colorado Community College System 1 year after graduation. These are completed Jan-March. Discussion is included at faculty meetings about the results of these surveys to determine if changes are needed.
 - S: Goals are for students to feel confident in their skills and ability to enter the workforce.
 - T: Teaching is adjusted based on advisory board input and student evaluations.
 - A: Graduate and Employment surveys will be collected annually to determine if students are entering the workforce prepared.
 - R: Surveys are reported in the V135 reports and at advisory and faculty meetings. Improvements will be planned and implemented for the next cycle.
4. Student feedback after clinical rotations is used for course improvement and clinical internship improvement. Feedback is evaluated and discussed during faculty meetings to determine if changes are needed. Compiled feedback is also sent to preceptors for their review to help improve the student experience at internships.
 - S: Goals are for students to get the most out of their clinical experience and gain the skills necessary to be successful in the workforce.
 - T: Teaching is adjusted based on student feedback after completing internships. This is included in each associated course improvement notes.
 - A: Assessment is through preceptor evaluations and student internship surveys.
 - R: Reports are made to preceptors and clinical sites for individual site improvement. Results are discussed at faculty and advisory board meetings. Improvements will be planned and implemented for the next cycle.
5. Employer evaluations will be used to determine if our graduates are meeting the needs of the workforce. These are completed 6-18 months after graduation. These are reviewed at faculty meetings and advisory board meetings to determine if changes are needed.
 - S: Goal is for students to enter the workforce prepared and for employers to have confidence in Otero's ability to graduate qualified personnel.
 - T: Teaching is adjusted based on employer feedback.
 - A: Assessment is made through employer surveys.
 - R: Reporting is through faculty meetings and advisory board meetings. Improvements will be planned and implemented for the next cycle.
6. Course Pass/Fail rates will be evaluated by the director and faculty to determine if students' needs are being adequately addressed through the college and what steps can be implemented to ensure the success of every student who enters the program. This is performed after each class with review before the next class is taught.
 - S: Goal is for every course to have a 70% pass rate.
 - T: Teaching is ongoing with adjustments made for individual students. The program director advises the MLT and phlebotomy students and suggests or requires tutoring or study help, including seeking help for family or work issues which are affecting student success. Students are referred to the learning commons staff for extra help if needed.
 - A: Teaching is assessed through each course by curriculum objectives, student engagement, faculty evaluations, and student course evaluations.

R: Reporting is through Academic Affairs, V135s, and faculty meetings. Improvements will be planned and implemented for the next cycle.

7. Faculty evaluations are performed through the college system and reviews are made by the Allied health director for improvements. They are performed during the fall and spring semester with results being distributed to the faculty under review. The Allied Director also meets with and discusses performance review with the program director and faculty three times per year (Initial-goals, Mid-year check, and Final review).

S: Performance goals are set at the beginning of each school year.

T: Teaching is ongoing and a major component of program success.

A: The Allied Health Director and Academic Affairs evaluate faculty through performance reviews and student evaluations. If improvement is needed, a plan is documented, and follow-up occurs.

R: Performance reviews and student evaluations are kept as a record of faculty success or need of improvement. Improvements will be planned and implemented for the next cycle.

If any outcome measure or assessment is found to need modification, the Program Director and MLT faculty along with the Allied Health Director, will plan for steps to be taken and implemented to improve student learning outcomes. This is done on a continuous basis with discussion at faculty meetings and advisory board meetings. See above for outcome measures.

Course Improvements and Assessment

In addition to program improvement discussed above, each course and internship have a course learning assessment chosen which aligns with the NAACLS/Program learning outcome goals. STAR is also applied to the evaluation of course improvements.

S: Each course has a specific objective/learning goal which will be used to evaluate course effectiveness.

T: Course improvements and assessment is reviewed from the previous year and course improvements are determined. Teaching is adjusted according to these set improvements.

A: At the end of each course, results of the assessment are documented on a score sheet. Instructor comments are made about the assessment, and a plan is formulated for the next year to improve the assessment.

R: These are documented for the course and compared year to year. Instructors also include overall class improvements and adjustments to make over the next year. These improvements can then be tracked and changed according to the needs of the course and/or program. Improvements will be planned and implemented for the next cycle.