ARC/STSA
Accreditation Review Council On Education
In Surgical Technology And Surgical Assisting

April 14, 2014

Kaye Walter, PhD
President
Bergen Community College
400 Paramus Road
Paramus, NJ 07652

Re: Surgical Technology Program

Dear Dr. Walter:

On behalf of the Accreditation Review Council on Education in Surgical Technology and Surgical Assisting (ARC/STSA), it is a pleasure to thank you, your colleagues, your graduates, and your students for the courtesies that were extended to Crit Fisher, CST, FAST and Eddie Williams, CST during the On-Site Evaluation of the Bergen Community College surgical technology program on February 24, 2014.

The application for Continuing Accreditation of your program will be reviewed and assessed for demonstration of compliance with the **Standards** by the ARC/STSA at its September 2014 meeting. The ARC/STSA will forward its findings and recommendation for review and accreditation action at the November 2014 Commission on Accreditation of Allied Health Education Programs (CAAHEP) meeting. The program will receive written notification of this accreditation action following the CAAHEP meeting, with notification being forwarded in writing to the institution's Chief Administrative Officer.

As part of the accreditation process, you are requested to respond to the following summary of the on-site evaluation report. This summary includes identification of the principal strengths within the program and any concerns regarding its compliance with the **Standards.**

Mr. Fisher and Mr. Williams identified the following strengths within the program:

1. The program faculty is well experienced and has a vested interest in the success of the students and the college.
2. The laboratory facility is well stocked with equipment and disposables.
3. College administration is supportive of the surgical technology faculty and the program.
4. Students are very complimentary of the faculty and their availability.
5. Students are complementary of the education they received from the college.
6. Graduates, employers and members of the Program Advisory Committee were very complimentary of the preparation of the students.

The following concerns were identified:

Standard II.B. The program must regularly assess its goals and learning domains. Program personnel must identify and respond to changes in the needs and/or expectations of its communities of interest. An advisory committee that is representative of these communities of interest must be designated and charged with the responsibility of meeting at least annually, to assist program and sponsoring institutional personnel in formulating and periodically revising appropriate goals and learning domains, monitoring needs and expectations, and ensuring program responsiveness to change.

The program does not provide evidence that all communities of interest are represented on the Program Advisory Committee [PAC], including a public member.

The program does not provide evidence that the PAC performs annual assessment of program goals, all program resources, and all program outcomes on at least an annual basis.

The program does not provide evidence that all communities of interest attend the PAC meetings.

*Please submit an updated ARC/STSA Program Advisory Committee Form demonstrating that the surgical technology Program Advisory Committee [PAC] is comprised of membership that represents **all** communities of interest, including a public member. An ARC/STSA Program Advisory Committee Form may be obtained online at www.arcstsa.org/index.php/educators/educators-surgical-technology/st-forms-and-facts/#stforms.*

*In addition, please note that the public member appointed to the surgical technology PAC holds a duty to represent the interests of the patient that may come under the care of the surgical technologist, and therefore has a vested interest in the proper education of the surgical technologist for quality patient care. The public member must **not** be:*
- *a current or former employee of the sponsoring institution*
- *a current or former employee of any clinical affiliate associated with the program*
- *a current or former student of the surgical technology program*
- *a current or former healthcare provider*

*In addition, please submit a detailed plan of action and timeline for implementation that will ensure that the PAC will meet at least once annually [once every 12 months], including a schedule that specifies when the PAC is scheduled to meet during **2014** [if applicable] and **2015**. This information should include a plan of action indicating future PAC input in the following areas:*
- *review and assessment of program goals and learning domains*
- *review and assessment of program resources*
- *review and assessment of program outcomes*
- *monitoring of program needs and expectations*

The plan of action should also ensure program responsiveness to change recommended by the PAC.

*Finally, please submit a detailed plan of action to increase attendance by **all** communities of interest represented on the PAC.*

Standard IV.B.2. The program must periodically submit to the ARC/STSA the program goal(s), learning domains, evaluation systems (including type, cut score, and appropriateness), outcomes, is analysis of the outcomes and an appropriate action plan based on the analysis. Programs not meeting the established thresholds must begin a dialogue with the ARC/STSA to develop an appropriate plan of action to respond to the identified shortcomings.

Standard V.A.4. The sponsor must maintain, and provide upon request, current and consistent information about student/graduate achievement that includes the results of one or more of the outcomes assessments required in the Standards.

The retention data reported on the 2011, 2012, and 2013 Annual Reports is not consistent with the data found on-site.

*Please submit comprehensive rosters of students organized by graduating cohort and then by student last name in alphabetical order, assigned an original or revised (if applicable) on-time cohort completion date (anticipated graduation date) of **August 1, 2009–July 31, 2010, August 1, 2010–July 31, 2011, and August 1, 2011–July 31, 2012**. Please specify the student's graduation, anticipated graduation or withdrawal/transfer out of the anticipated on-time cohort completion date. A comprehensive roster of*

students should include all students enrolled in and transferred into the completion cohort (students who change their on-time cohort completion date due to failed course, leave of absence, etc.).

In addition, please submit corrected retention results for the ARC/STSA reporting year of **August 1, 2009– July 31, 2010**, utilizing the ARC/STSA **2011** Annual Report Data Sheet, corrected retention results for the ARC/STSA reporting year of **August 1, 2010–July 31, 2011**, utilizing the ARC/STSA **2012** Annual Report Data Sheet, and corrected retention results for the ARC/STSA reporting year of **August 1, 2011–July 31, 2012**, utilizing the ARC/STSA 2013 Annual Report Data Sheet. The 2011, 2012 and 2013 Annual Report Data Sheets may be obtained by request at info@arcstsa.org.

In addition, please submit a detailed analysis of the actual retention results versus the ARC/STSA established threshold [**70%**] for each academic year specified above.

If the analysis indicates that retention does **not** meet the ARC/STSA threshold [**70%**] for the period of **August 1, 2011–July 31, 2012**, please submit a comprehensive, detailed plan of action and timeline for implementation that specifies how retention will be raised to and maintained at a level that meets or exceeds the ARC/STSA threshold.

Finally, please submit a detailed plan of action and timeline for implementation that specifies how retention data will be collected <u>and</u> accurately reported so that Annual Reports accurately reflect program outcomes.

Standard IV.B.2. The program must periodically submit to the ARC/STSA the program goal(s), learning domains, evaluation systems (including type, cut score, and appropriateness), outcomes, is analysis of the outcomes and an appropriate action plan based on the analysis. Programs not meeting the established thresholds must begin a dialogue with the ARC/STSA to develop an appropriate plan of action to respond to the identified shortcomings.

Standard V.A.4. The sponsor must maintain, and provide upon request, current and consistent information about student/graduate achievement that includes the results of one or more of the outcomes assessments required in the Standards.

The Outcomes Assessment Exam [CST Exam] participation and pass rate data reported on the 2011, 2012, and 2013 Annual Reports is not consistent with the data found on-site

Please submit an official NBSTSA CST Content Results by School Report for graduates listed on the rosters requested under Standard IV.B.2. & V.A.4. above. [Please note that if additional graduate score reports are included on the official NBSTSA CST Content Results by School Report submitted, please strike through each name that is not a graduate in the cohort(s) requested on the roster above and their exam results.]

In addition, please submit corrected CST Exam participation rate and pass rate results for the ARC/STSA reporting year of **August 1, 2009–July 31, 2010**, utilizing the ARC/STSA **2011** Annual Report Data Sheet, corrected CST Exam participation rate and pass rate results for the ARC/STSA reporting year of **August 1, 2010–July 31, 2011**, utilizing the ARC/STSA **2012** Annual Report Data Sheet, and corrected CST Exam participation rate and pass rate results for the ARC/STSA reporting year of **August 1, 2011–July 31, 2012**, utilizing the ARC/STSA 2013 Annual Report Data Sheet. The 2011, 2012 and 2013 Annual Report Data Sheets may be obtained by request at info@arcstsa.org.

In addition, please submit a detailed analysis of the actual CST Exam results versus the ARC/STSA established thresholds [**100%** participation rate, **70%** pass rate] for each academic year specified above.

If the analysis indicates that CST Exam results do not meet the ARC/STSA thresholds [**100%** participation rate and **70%** pass rate] for the period of **August 1, 2011–July 31, 2012**, please submit a comprehensive, detailed plan of action and timeline for implementation that specifies how outcomes assessment exam

results [participation and/or CST exam scores] will be raised to and maintained at a level that meets or exceeds the ARC/STSA threshold(s).

Finally, please submit a detailed plan of action and timeline for implementation that specifies how outcomes assessment exam data will be collected and accurately reported so that Annual Reports accurately reflect program outcomes.

Standard IV.B.1. The program must at least annually assess its effectiveness in achieving its stated goals and learning domains. The results of this evaluation must be reflected in the review and timely revision of the program. Outcomes assessments include, but are not limited to: performance on national credentialing examination program(s) accredited by the National Commission of Certifying Agencies, programmatic retention/attrition, graduate satisfaction, employer satisfaction, job (positive) placement, and programmatic summative measures. The program must meet the outcomes assessment thresholds.

Standard IV.B.2. The program must periodically submit to the ARC/STSA the program goal(s), learning domains, evaluation systems (including type, cut score, and appropriateness), outcomes, is analysis of the outcomes and an appropriate action plan based on the analysis. Programs not meeting the established thresholds must begin a dialogue with the ARC/STSA to develop an appropriate plan of action to respond to the identified shortcomings.

Standard V.A.4. The sponsor must maintain, and provide upon request, current and consistent information about student/graduate achievement that includes the results of one or more of the outcomes assessments required in the Standards.

The program does not meet the ARC/STSA threshold for graduate placement. A comprehensive, detailed plan of action and timeline to raise graduate placement to meet the ARC/STSA threshold was not provided for review. The graduate placement data reported on the 2011, 2012, and 2013 Annual Reports is not consistent with the data found on-site.

Please submit comprehensive rosters of students organized by graduating cohort and then by student last name in alphabetical order, assigned an original or revised (if applicable) on-time cohort completion date (anticipated graduation date) of **August 1, 2008–July 31, 2009.** *Please specify the student's graduation, anticipated graduation or withdrawal/transfer out of the anticipated on-time cohort completion date. A comprehensive roster of students should include all students enrolled in and transferred into the completion cohort (students who change their on-time cohort completion date due to failed course, leave of absence, etc.).*

For each student listed on the roster above and on the rosters for the periods of **August 1, 2009–July 31, 2010** *and* **August 1, 2010–July 31, 2011** *requested under Standard IV.B.2. & V.A.4. above, please indicate* **one** *of the four "placements" listed below:*
- *Placed in the field of surgical technology, a directly related field*, or on active military duty, OR*
- *Continuing their education, OR*
- *Placed in field of surgical technology, a directly related field* or on active military duty AND continuing their education in a related field, OR*
- *Not placed*

* Placement in a related field requires use of knowledge and skills acquired via the curriculum offered in the surgical technology program, e.g.—Central Sterile Supply Technician.

[Please note that CAAHEP does not grant or recognize graduate placement "waivers".]

In addition, please submit corrected graduate placement results for the ARC/STSA reporting year of **August 1, 2008–July 31, 2009** *utilizing the ARC/STSA 2011 Annual Report Data Sheet, corrected graduate placement results for the ARC/STSA reporting year of* **August 1, 2009–July 31, 2010**, *utilizing the ARC/STSA 2012 Annual Report Data Sheet, and corrected graduate placement results for the ARC/STSA reporting year of* **August 1, 2010–July 31, 2011**, *utilizing the ARC/STSA 2013 Annual Report Data Sheet. The 2011, 2012, and 2013 Annual Report Data Sheets may be obtained by request at* info@arcstsa.org.

In addition, please submit a detailed analysis of the actual graduate placement results versus the ARC/STSA established threshold [80%] for each academic year specified above.

If the analysis indicates that graduate placement does not meet the ARC/STSA threshold [80%] for the period of 8/1/2010–7/31/2011, please submit a comprehensive, detailed plan of action and timeline for implementation that specifies how graduate placement will be raised to and maintained at a level that meets or exceeds the ARC/STSA threshold.

Finally, please submit a detailed plan of action and timeline for implementation that specifies how graduate placement data will be collected and accurately reported so that Annual Reports accurately reflect program outcomes.

Standard IV.B.1. The program must at least annually assess its effectiveness in achieving its stated goals and learning domains. The results of this evaluation must be reflected in the review and timely revision of the program. Outcomes assessments include, but are not limited to: performance on national credentialing examination program(s) accredited by the National Commission of Certifying Agencies, programmatic retention/attrition, graduate satisfaction, employer satisfaction, job (positive) placement, and programmatic summative measures. The program must meet the outcomes assessment thresholds.

The program does not meet the ARC/STSA threshold for Employer Survey return rate. A comprehensive, detailed plan of action and timeline to raise Employer Survey return rate to meet the ARC/STSA threshold was not provided for review.

Please submit a detailed plan of action including a timeline of program follow-up that demonstrates how the program will administer the standardized ARC/STSA Employer Survey no sooner than 9 months after the date of employment to ensure effective programmatic assessment based on the feedback provided by this assessment tool. The plan should also specify the actions to be taken should employer surveys not be returned to the program in sufficient numbers to meet ARC/STSA threshold. A copy of the ARC/STSA Employer Survey is available online at www.arcstsa.org/index.php/educators/educators-surgical-technology/st-forms-and-facts/#stforms.
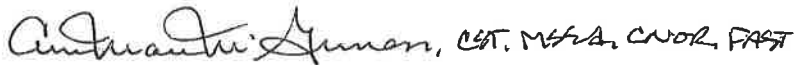
Our objective in sharing the summary of the recent on-site assessment is to determine the degree to which these observations appear to you to reflect fairly upon the present status of the Surgical Technology Program. Please submit your response, including a copy of this findings letter, to **Keith Orloff, CST, FAST, Executive Director, ARC/STSA, 6 West Dry Creek Circle, Suite #110, Littleton, CO, 80120**. The report, submitted as a single "seamless" electronic/digital document (on a CD-ROM, DVD, or external drive [stick drive, thumb drive, pencil drive, etc.] for documentation in excess of 20 pages, should be received by the ARC/STSA on or before close of business (4:30 PM, Mountain) on **June 9, 2014**. [Please note that submissions consisting of 20 pages or less can be submitted as a single PDF attachment via email sent to info@arcstsa.org.] The response should indicate the manner in which these citations have been resolved and should clearly demonstrate how the program meets or exceeds the *Standards*.

Please note that the ARC/STSA does **not** accept documentation that includes confidential personal identification information [e.g. - Social Security numbers] or personal health information. Please **delete** or **black out** all confidential personal identification information or confidential personal health information on documentation prior to submission. Documentation submitted with confidential personal identification information or personal health information will be returned to the program **without** ARC/STSA review.

The CAAHEP *Standards and Guidelines for the Accreditation of Educational Programs in Surgical Technology,* which are referenced in the citation(s) above, are available online at www.arcstsa.org. Please contact us if we can be of further assistance.

Sincerely,

Ann Marie McGuiness, CST, MSEd, CNOR, FAST

Ann Marie McGuiness, CST, MSEd, CNOR, FAST
Director of Accreditation Services

cc: Susan Barnard, PhD, Dean of Health Professions
        Carolan Sherman, MS, CST, Program Director
        Crit Fisher, CST, FAST, On-Site Evaluator
        Eddie Williams, CST, On-Site Evaluator
        Elizabeth Slagle, MS, RN, CST, President, ARC/STSA
        Connie Bell, CST, FAST, Vice-President, ARC/STSA
        Thomas Bates, BA, CST, Secretary/Treasurer, ARC/STSA
        Reid Adams, MD, FACS, Director, ARC/STSA
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