

Cardiovascular Technology Program
Florida SouthWestern State College
Advisory Board Meeting
Kenneth P. Walker Health Science Hall Room #A-137
June 6, 2018 - 3:00 p.m.
Agenda

1. Welcome and Introductions
2. Overview of Graduate Outcomes
 - a. Number (1991-2017 = 311, 2017 = 10)
 - b. Placement statistics (1991-2017 = 94%, 2017 = 10/10-100%)
 - c. RCIS Registry statistics (1991-2017 = 95%, 2017 = 7/7 passed 100%, 3 planning to take)
3. Classes of 2018, 2019 and the incoming class of 2020
 - a. 2018 = 10 scheduled to graduate; Pinning Ceremony on June 14
2019 = 17 traditional students
2020 = Accepting applications, interviews in June, selections early July, selection criteria
 - b. Attrition/Retention statistics
4. Human Resources
 - a. Program administration and upcoming transitions
 - b. Instructional staff
5. Physical Resources
 - a. Simulator Coronary Pro upgrades for 2 Mentice VIST systems
 - b. Applied for upgrades to the on-campus cath lab and classroom space
6. Clinical Resources and Clinical Coordinator Report
 - a. NCH to Tampa General Hospital
7. Curriculum/Program Review
8. Medical Directors Perspective
9. Students Perspective
10. Public Member Input
 - a. Community outreach (AHA heart Walk, Go Red for Women, Heart Week)
11. JRC-CVT/CAAHEP Accreditation Status
 - a. Continuing to meet and/or exceed all thresholds
12. Continuing Education
 - a. Transradial approach, future opportunities
13. Baccalaureate Degree in Cardiopulmonary Sciences Update
14. Open Discussion
15. Adjournment

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June 14, 2017-3:00 p.m.
Minutes

1. Welcome and Introductions

Jeff Davis welcomed committee members and introductions were made.

Members present:

- *Robert Grohowski, MD, Cardiologist, Lee Health, & Medical Director CVT Program*
- *Beth Moss, RN, System Director Invasive Cardiology, Lee Health*
- *Brian Crosby, RN, RCIS, Cath Lab Educator, Lee Health*
- *Jim Steger, RCIS, Cath Lab Educator, Gulf Coast Medical Center*
- *June Hall, RCIS, Cath Lab, HealthPark Medical Center*
- *Stephen Cooke, RN, RCIS, Cath Lab Director, Naples Community Hospital*
- *Heleomar Zanga, RN, Cath Lab Manager, Tampa General Hospital*
- *Angela Leland, RN, Cath Lab Educator, Tampa General Hospital*
- *Trisha Carr, RCIS, Lee Health, Graduate 2016*
- *Abraham Zaragoza, RCIS, Lee Health, Graduate 2016*
- *Jeff Elsberry, PhD, RRT, Associate Dean, Cardiopulmonary & Emergency Care*
- *Leslie Yaniga, RCIS, Clinical Coordinator, Cardiovascular Technology*
- *Ray Lenius, RCIS, Faculty, Cardiovascular Technology*
- *Jarrod Bauldree, President CVT student Class of 2017*
- *Jessica Eaton, Vice President CVT student Class of 2017*
- *Rebecca Kelley, CVT student Class of 2018*
- *Zuleyka Rodriguez, CVT student Class of 2018*
- *Jeff Davis, RRT, RCIS, Program Director, Cardiovascular Technology Program*

The previous meeting minutes were reviewed and the minutes were accepted.

2. Overview of Graduate Outcomes

- a. Number (1991-2016 = 301, 2016 = 13)
- b. Placement statistics (1991-2016 = 93%, 2016 = 13/13-100%)
- c. Registry statistics (1991-2016 = 95%, 2016 = 11/13- 85%)

Jeff Davis reviewed the data collected regarding graduate outcomes including; number of graduates, 13, from last year (2016), their positive placement, 13 of 13, and RCIS registry, 11 of 13 have been successful on the RCIS exam (2 graduates are scheduled to take the RCIS exam at this time). The results of the 2015 graduate and employer surveys were discussed. In general, 80-100% of the graduates felt they had acquired the cognitive, psychomotor and affective skills necessary to function as entry level cardiovascular technologists and that the program resources are appropriate. Additionally, 80-100% of the employers felt, the graduates that they had hired possessed the cognitive, psychomotor and affective skills necessary to function as entry level cardiovascular technologists and that the program resources are appropriate.

3. Classes of 2017, 2018 and the incoming class of 2019

- a. 2017 = 10 scheduled to graduate on June 23, Pinning ceremony on June 15

2018 = 12 (traditional students)

2019 = Accepting applications, interviews in June, selections early July, selection criteria

b. Attrition/Retention statistics

Jeff Davis reviewed the number of second year students (10), which represent the Class of 2017; all 10 are scheduled to graduate at the end of the Summer A semester, June 23, 2017. The class of 2017 has also been involved in the community with the American Heart Association (AHA) Heart Walk in December. The class of 2018 is comprised of 12 traditional students. The program is planning on admitting a full cohort of 20 students for the Fall 2017 start date. The current selection criterion was reviewed and determined to be appropriate for the CVT Program. This is the first year that on-line applications have been available for applicants to the CVT Program. Program attrition has been steady and continues to meet the JRC-CVT/CAAHEP threshold. Program Attrition has been in the 28-29% range. Strategies to improve attrition include; open labs, tutorial sessions, implementation of response devices during lectures, posting lecture power points and MP3 audio files of lectures at the course Canvas internet sites.

4. Human Resources

a. Program administration

b. Instructional staff

The human resources of the CVT Program were outlined for committee members. Included:

- *President, Dr. Jeffrey Allbritten*
- *Provost/Vice President of Academic Affairs, Dr. Jeff Stewart*
- *Dean, School of Health Professions, Dr. Marie Collins*
- *Associate Dean, Cardiopulmonary & Emergency Care, Dr. Jeffrey Elsberry*
- *Program Director, CVT Program, Jeff Davis, RRT, RCIS*
- *Clinical Coordinator, CVT Program, Leslie Yaniga, RCIS*
- *CVT Faculty, Ray Lenius, RCIS*

The program is continuing to utilize Clinical Associates to provide supplemental instruction during laboratory courses. The CVT program expressed its appreciation of the cath lab employers giving their staff time off to come on campus and help with the laboratory courses. The consensus of the advisory board and the program is that the human resources are sufficient and meet the needs of the program.

5. Physical Resources

a. Simulator Coronary Pro upgrade

b. Second Mentice VIST

c. Applied for upgrades to the cath lab

The programs classroom and laboratory resources were reviewed and determined to be more than appropriate. The Program Resource Survey completed by Students and Program personnel both indicate over 80% of respondents strongly agree or agree the physical resources are appropriate. The classroom offers a teaching podium with computer and internet access, document/object camera projector, and overhead projector. The lab includes a state- of- the- art catheterization laboratory and WITT physiological monitoring system with archived images so that students can practice in a realistic environment. The lab also includes two Mentice VIST Endovascular Simulators with the following modules; diagnostic coronary and left ventricular grams, coronary intervention, carotid diagnostic and intervention with distal protection, renal diagnostic and intervention, iliac and SFA diagnostic and intervention. The Mentice VIST Endovascular Simulators have recently been upgraded with the newest version of the Coronary Pro software. This upgrade will enable students to

practice procedures for both the femoral and radial artery access sites and simulate ACS/STEMI cases. The additional simulator will further enhance instruction in laboratory courses. The program is obtaining quotes to upgrade the monitors in the cath lab. One potential area of enhancement would be a dedicated study area with computers for health professions students. The consensus of the advisory board and the program is that the physical and financial resources are sufficient and meet the needs of the program.

6. Clinical Resources and Clinical Coordinator Report

a. NCH to Tampa General Hospital

The second year students are currently rotating through Naples Community Hospital, Physicians Regional Healthcare System, Gulfcoast Medical Center, HealthPark Medical Center, Cape Coral Hospital, Bayfront Health Port Charlotte, Charlotte Heart and Vascular Institute, Fawcett Memorial Hospital, Manatee Memorial Hospital, Sarasota Memorial Hospital, and Tampa General Hospital. Tampa General is the newest clinical site and is proving to be a valuable addition to the program. An optional field trip experience is also offered at All Children's Hospital in St. Petersburg for those students wishing more pediatric exposure. Professor Leslie Yaniga, RCIS and clinical personnel all report that the students are functioning well and developing the psychomotor skills, knowledge base and affective attributes to allow them to function as cardiovascular technologists in the cath labs. Professor Yaniga also reported that she has increased mentoring opportunities for second year students by including them in selected laboratory classes where they work with first year students as they work to develop their psychomotor clinical skills. Beth Moss suggested clinical opportunities may exist in the new endovascular laboratory at HealthPark Medical Center. The program will follow up with Beth and explore this option. Suggestions to enhance the clinical component of the program include incorporating clinical simulation and observing live cases earlier in the program. The consensus of the advisory board and the program is that the clinical resources are sufficient and meet the needs of the program.

7. Curriculum/Program Review

Jeff Davis reported the CVT curriculum continues to be based on the 2015 Educational Guidelines for Invasive Cardiovascular Technology Personnel in the Cardiovascular Catheterization Laboratory. These guidelines were developed by the Society of Invasive Cardiovascular Professionals (SICP) and are referenced by the JRC-CVT/CAAHEP in the Standards for accreditation. The program will continue to make any adjustments necessary in order to incorporate any relevant content into the existing curriculum. The consensus of the advisory committee is that the curriculum is very appropriate and the fine-tuning of the curriculum that has been done has strengthened the program. Antidotal comments reflect the feeling that the curriculum and program does a good job addressing the professional education needs of the cardiac care community. Additional enhancements to the curriculum include incorporating advances in the profession including transradial access, IVUS, FFR, vascular diagnostic and interventional procedures, structural heart repair (catheter based heart valve repair/replacement, septal defect & PFO closure, and left atrial appendage closure).

8. Medical Directors Perspective

Dr. Grohowski indicated that, from his perspective, the graduates of 2016 and the class of 2017 have developed the skills and knowledge to function at or above the level of entry level cardiovascular technologists. His clinical experiences with the current class have been favorable and they appear to be developing well. He indicated they are developing into strong confident technologists and that they did a good job with their case study presentations. Dr. Grohowski expressed the importance of graduating students of the highest caliber and that the quantity of graduates should not be

compromised by decreasing quality. He advised the students to continue to keep up to date in the rapidly evolving fields of invasive cardiology.

9. Students Perspective

Jarrod Bauldree and Jessica Eaton provided the perspective for the second year students that will graduate Summer of 2017. They expressed a high level of student satisfaction with the program and that the students were proud to be a part of the program. They commented that it may be helpful to enhance the preceptor orientation process and to have all students complete an entire simulated left heart cath procedure during CVT 1801L. They also expressed the class's appreciation of the clinic sites and the staff that works with them during their clinical rotations. The first year students also indicated they had a very high level of satisfaction with the program. They also liked the fact the course websites were pre-populated with PowerPoints and handouts prior to their classes, and the availability of MP3 audio files for select lectures. They felt the ability to take home disposable cath lab supplies was helpful and felt the "shadow days" exceeded their expectations. Trisha Carr and Abraham Zaragoza provided the perspective of the 2016 graduates of the CVT program. They also expressed a high level of satisfaction with the program and indicated they felt they were well prepared for their responsibilities working the Southwest Florida cath labs and for the RCIS exam. The 2016 graduates were also invited to attend the C3 conference in Orlando and they all expressed that this was a very valuable experience. Dr. Dave has also invited the graduates of 2017 to the C3 conference later in June.

10. JRC-CVT/CAAHEP Accreditation Status

a. Continuing to meet and/or exceed all thresholds

Jeff reviewed the accreditation Standards and Thresholds, and the Goals of the program. The CVT Program has completed the most recent CAAHEP/JRC-CVT Report of Current Status (Annual Report). All accreditation thresholds and goals have been met or exceeded. The program continues to meet or exceed all accreditation Standards and thresholds and remains on continuing accreditation. The next CAAHEP/JRC-CVT accreditation self study/site visit is planned for 2018-2019.

11. Continuing Education

- a. On-line/simulation transradial approach
- b. Research possibilities

Professor Yaniga has developed an on-line/simulation CEU offering for the transradial approach for cardiovascular catheterization. The course has been designed for working professionals desiring to enhance their knowledge and skills for transradial procedures.

The CVT program is exploring options with Mentice Co. and Lee Health to develop a research study evaluating outcome benefits of an on-line/simulation educational offering for transradial catheterization. Initial pre-study benchmark data could be obtained for transradial adoption rates, procedural complications, and anticipation of complications, patient and staff radiation exposure, procedural time, patient satisfaction, costs, transradial adoption rates in ACS/STEMI, and/or possibly other domains. Cath lab personnel would participate in an on-line transradial catheterization educational offering. Upon successful completion of the on-line offering, they would complete the hands-on simulation component of the program. The outcomes identified above (or whatever outcomes ultimately identified as appropriate) would be measured again at predetermined intervals (for example 6 months, 12 months). Pre-study and post-study outcomes would be compared in an attempt to determine and quantify the benefits associated with the educational intervention. The on-line transradial catheterization educational course has been developed by the cardiovascular

technology program at Florida SouthWestern State College. The simulation component would utilize endovascular simulators by Mentice Co.

12. Baccalaureate Degree in Cardiopulmonary Sciences Update

Dr. Elsberry gave an update on the B.S. Degree Program in Cardiopulmonary Sciences. The program is open to the graduates of the Cardiovascular Technology and Respiratory Care Programs who have received either the RCIS or RRT Certifications. The program began offering courses in the Spring 2011 semester and plans to offer courses during the Fall, Spring and Summer semesters. The B.S. CPS Program continues grow with a significant number of students coming from the CVT Program and profession. Some of the graduates of the program have continued their education in Medical and Physician Assistant Programs. The Advisory Committee expressed a high level of support for this program and feel it will offer additional educational and professional opportunities for existing Cardiovascular Technologists and Respiratory Therapists.

12. Open Discussion

A discussion ensued about the logistics of cross training cath lab personnel including nurses functioning in the scrub/first assist roles and recording roles and RCIS's functioning in the circulating position. This model has been successfully implement in numerous cath labs and seems to be working well.

State licensure for RCIS's was also discussed and the need for this was identified. Members of the advisory board will discuss the logistics involved in an attempt to develop strategies to accomplish this.

The committee members express their gratitude for the Cardiovascular Technology program and indicated they were pleased with the number and quality of the graduates.

13. Adjournment

The meeting was adjourned at 4:15 pm.

**FLORIDA SOUTHWESTERN STATE
COLLEGE CARDIOPULMONARY
TECHNOLOGIES CRITERIA FOR
ADMISSION**

Admission into the Respiratory Care or Cardiovascular Technology Program is a simple process. **Phase I** evaluates applicants according to the number of points earned through: cumulative grade point average, math/science grade point average, and number of credit hours earned by or before the application deadline of **May 31st**. Courses not completed by the deadline are not considered. Following application submittal, the candidate will be informed of the dates available and complete the online scheduling process for the Watson-Glaser Critical Thinking Exam.

Phase I: Academic + Critical Thinking Exam

GPA points are based on college credits, with a minimum of eleven credits of college course work for the overall GPA and a minimum of seven credits in the co-requisite math/science courses, for the Math/Science GPA

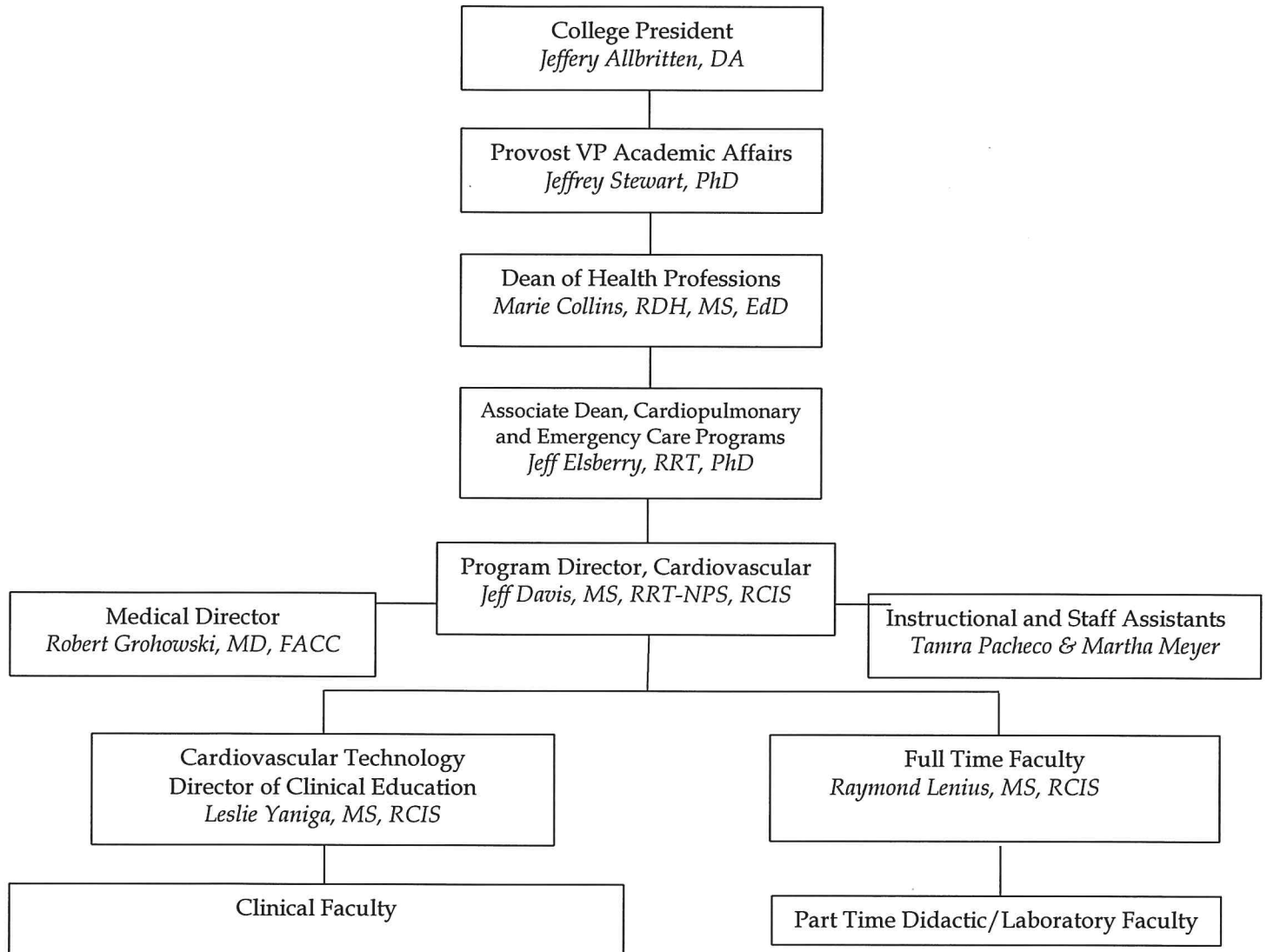
Criteria		Points	Maximum Points Obtainable
Overall GPA x 10			40
Math/Science GPA x 10			40
Watson Glaser Score			40
Educational Experience			13
Credits	Points		
100+	13		
92 -99	12		
84 – 91	11		
76 – 83	10		
68 – 75	9		
60 – 67	8		
52 – 59	7		
44 – 51	6		
36 – 43	5		
28 – 35	4		
20 – 27	3		
12 – 19	2		
4 – 11	1		
< 4	0		
Phase I Total Score			133

Phase II: Interview (pass/fail)

Phase II evaluates the affective and communication skills of applicants using an Admissions Panel interview. Only applicants who have met a minimum number of Phase I points will be scheduled for an interview. Successfully passing the interview is required for continuing in the admissions process. Those candidates with the highest total points from **Phases I and II** are offered admission in rank order. Applicants will be notified of admission status starting the first week of July.

****Interviews to be scheduled beginning in late May continuing through early June for the applicants with the most Phase I points.**

Cardiovascular Technology Program



**Florida SouthWestern State
College 2018-2019
Cardiovascular Technology - AS Degree
77 Credits**

FIRST YEAR

Fall Semester	Credit Hours
*MGF 1106 Math for Liberal Arts	3
CHM 2032 Chemistry for Health Sci	3
CHM 2032L Chemistry Health Sci Lab	1
**BSC 1093C or BSC 1085C Anatomy & Physiology I	4
ENC 1101 Composition I	3
RET 1024 Intro Cardiopulmonary Tech	3
Total	17

SECOND YEAR

Fall Semester	Credit Hours
CVT 2420C Invasive Cardiology I	6
CVT 2620C Non-Invasive Cardio Tech I	2
CVT 2805C Cardiovasc Interven Pre-Prac	3
CVT 2840L Cardiovascular Practicum II	3
Total	14

FIRST YEAR

Spring Semester	Credit Hours
PHY 1007 Physics for Health Sciences	3
BSC 1094C or BSC 1086C Anatomy & Physiology II	4
PSY 2012 Intro to Psychology	3
CVT 1200 Cardiovasc Pharmacology	3
RET 1613C Cardiopulmonary A & P	2
CVT 1800L Cardiovasc Pre-Practicum I Spring B only	3
Total	18

SECOND YEAR

Spring Semester	Credit Hours
CVT 2421C Invasive Cardiology II	6
RET 2244 Critical Care Applications	2
CVT 2841L Cardiovascular Practicum III	4
Total	12

FIRST YEAR

Summer Semester A	Credit Hours
**MCB 2010C Microbiology	4
CVT 1801L Cardiovasc Pre-Practicum II	3
Total	7

SECOND YEAR

Summer Semester A	Credit Hours
CVT 2920 Cardiovasc Tech as Professional	2
CVT 2842L Cardiovascular Practicum IV	4
Total	6

FIRST YEAR

Summer Semester	Credit Hours
HUM Humanities (Core Writing Intensive)	3
Total	3

*MAT 1033 or Testing may be a requirement for admission into MGF 1106.

**BSC 1010 or Testing is a prerequisite for BSC 1093C and MCB 2010C and should be taken prior to Fall semester.

Note: The math, chemistry and physics co-requisites listed above are the recommended courses; however, it may be possible to substitute another approved general education math, chemistry or physics course. Please see Program personnel or advisor for details.

JRC-CVT Outcomes Assessment Thresholds

Outcomes/thresholds questions may be directed to your program liaison or William W. Godling, Executive Director at (978) 456-5594 or jrcvlt@jrcvlt.org

Evaluation System	Cut Score	Threshold
Credentialing Examination Success (pass rate) – specific to each concentration/tract	National passing score.	≥ 60% of total number of individuals attempting the examination pass (3-year average)
Credentialing Examination Participation		≥ 70% of total number of graduates attempt the respective concentration/tract examination (3-year average)
Retention (Attrition)	Student is matriculated in the program and enrolled or stopped out (i.e. expected to return) –or – has graduated from the program.	≥ 70% retention of the total number of students in the enrollment cohort. (3-year average)
Job Placement	Employed full or part-time in a related field and/or continuing his/her education and/or serving in the military.	≥ 70% positive placement (3-year average)
Graduate Survey – Success	A rating of 3 or higher on a 5-point Likert scale for each item/statement.	Each item/statement has at least 80% of the responses rated 3 or higher.
Graduate Survey – Participation		≥ 50% of the graduates have returned surveys (3-year average)
Employer Survey – Success	A rating of 3 or higher on a 5-point Likert scale for each item/statement.	Each item/statement has at least 80% of the responses rated 3 or higher.
Employer Survey – Participation		≥ 50% of the employers have returned surveys (3-year average)

Cardiovascular Technology Program Accreditation Status

The Cardiovascular Technology Program is accredited by the Commission on Accreditation of Allied Health Education Programs in invasive cardiovascular technology, www.caahep.org, CAAHEP, 25400 U.S. Highway 19 N, Suite #158, Clearwater, FL 33763 (727-210-2350), upon the recommendation of the Joint Review Committee on Education for Cardiovascular Technology, www.jrccvt.org, JRC-CVT, 1449 Hill Street, Whitinsville, MA 01588-1032 (987-456-5594).

Cardiovascular Technology Program Mission Statement and Goals

Recognizing the worth and dignity of the individual and society's need for educated cardiovascular technologists, the Program's mission is to provide those post-secondary learning. Consistent with the concepts of college education and dedication to high standards of achievement, the Cardiovascular Technology Program at Florida SouthWestern State College fulfills its mission through the following specific goals and philosophies:

- To prepare competent entry-level cardiovascular technologists in the cognitive (knowledge), psychomotor (skills and competencies), and affective (behavior) learning domains for invasive cardiology.
- The average national certification examination pass rate will be 75 percent or greater over the preceding five years.
- The average job placement rate will be 75 percent or greater within 12 months of graduation over the preceding five years.

The first ideal is that it is recognized that each accepted student is a unique individual with particular talents and educational needs. Program faculty will strive to further develop student talents and fulfill expressed educational needs. The program adheres to the College's theme that Florida SouthWestern State College strives to help students "Dedicate to Graduate."

The second ideal is that the student that completes this program will have gained a special confidence in the educational process. The individual will have "learned how to learn," and feel confident to continue learning as an adult. As a result of completing this program, the graduate will have increased the art of self-discipline which is a primary purpose of higher education.

The third ideal of the program is to provide various learning environments for the student to progress in. The program offers opportunities to learn in several different clinical settings. They include but are not limited to small and large acute care medical facilities and diagnostic centers. The student not only learns the procedures but also is afforded the opportunity to learn under a variety of department management styles and with different types of patient care equipment and patient populations.

The fourth ideal is that the program operates as a competency-based educational system. Students know what they are expected to learn as a result of clearly stated behavioral objectives and evaluation methods. The ideal is to minimize student frustration and maximize effective learning.