# SITE VISIT REPORT

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<th>General Information</th>
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<td>Program Name:</td>
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<td>Dates Visited:</td>
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<td>Clinical Affiliates Visited:</td>
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<td>Name of Team Chair (Print):</td>
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<td>Name of Team Member (Print):</td>
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<th>Learning Concentrations and Status</th>
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<td>Adult Cardiac</td>
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INSTRUCTIONS FOR USE

This Site Visit Report has been designed by JRC-DMS for report consistency and standardization in the evaluation of diagnostic medical sonography programs. Please utilize this instrument during the site visit. A separate narrative is not required unless the team believes exceptional findings necessitate additional explanation.

The program director may be provided with this document to provide familiarity with the evaluation procedure. It is recommended that the program provide blank copies of the Site Visit Report to attendees of the exit summation to aid in understanding the site visit team’s findings.

The primary function of the site visit team is to gather information and report findings. It is the responsibility of the JRC-DMS to determine, on the basis of the application, Self-Study Report, and team findings, the extent and degree of sponsor/program compliance with the Standards. The site visit team is present only to substantiate information submitted by the program.

As the site visit proceeds, each criterion appropriate to program operation will be evaluated. The site visit team will check the line that describes the degree of compliance. For any criterion checked "NO," the team must provide findings and substantiation, since this assessment represents a potential deficiency in program compliance with the Standards. Each item reviewed in connection with substantiation will be checked off on the report form by the team.

The following definitions and examples may assist the site visit team in determining the degree of compliance:

**YES** – Conforming or agreeing with the Standards. The program satisfies the evaluation criterion.

*NO* – Not conforming or agreeing with the Standards. The program does not satisfy the evaluation criterion.

Standard: III.B.1.b. – Program Director Qualifications:
1) possess a minimum of a Baccalaureate degree;
2) possess the appropriate credential(s) specific to one or more of the concentration(s) offered;
3) have documented experience in supervision, instruction, evaluation, student guidance and in educational theories and techniques; and
4) have a minimum of two years of clinical experience as a registered sonographer in the professional sonography field.

Finding: The program is seeking accreditation for the vascular concentration. The program director is the only faculty member and is not appropriately credentialed for the vascular concentration, and an appropriately qualified vascular concentration coordinator was not identified.

The Site Visit Report must be signed by each team member and submitted by the team chair to the JRC-DMS Executive Office. An accompanying narrative is not required. The team members meet privately prior to the exit summation to ascertain team agreement on all the findings. The exit summation must reflect team findings and relate only to the Standards.
Standard I: Sponsorship

A. Sponsoring Institution

A sponsoring institution must either award credit for the program or have an articulation agreement with an accredited post-secondary institution, and must be at least one of the following:

1. A post-secondary academic institution accredited by an institutional accrediting agency that is recognized by the U.S. Department of Education and authorized under applicable law or other acceptable authority to provide a post-secondary program, which awards a minimum of a certificate/diploma at the completion of the program.
2. A hospital, clinic or medical center that is institutionally accredited and authorized under applicable law or other acceptable authority to provide healthcare, which awards a minimum of a certificate/diploma at the completion of the program.
3. A branch of the United States Armed Forces or other Federal agency, which awards a minimum of a certificate/diploma at the completion of the program.

Required documentation to be submitted/uploaded with self-study:
- Verification of Sponsoring Institution’s Accreditation certificate
- URL link to organization’s website to locate verification

Documents to be available at time of site visit:
- Electronic or paper copy of verification of current Institutional Accreditation certificate.

Select the programs in compliance with this standard:

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Substantiated by:
- [ ] Institutional Accreditation Document
- [ ] Electronic confirmation
- [ ] Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:
Click or tap here to enter text.

Notes:
Click or tap here to enter text.

B. Consortium Sponsor

1. A consortium sponsor is an entity consisting of two or more members that exists for the purpose of operating an educational program. In such instances, at least one of the members of the consortium must meet the requirements of a sponsoring institution as described in I.A.
2. The responsibilities of each member of the consortium must be clearly documented as a formal affiliation agreement or memorandum of understanding, which includes governance and lines of authority.
Required documentation to be submitted/uploaded with self-study:
- Legal agreement or Memorandum of Understanding
- Organizational table and narrative of responsibilities of each organization

Documents to be available at time of site visit:
- Electronic or paper copy of verification of current Institutional Accreditation certificate.

Select the programs in compliance with this standard:

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Substantiated by:
- ☐ Legal agreement of Memorandum of Understanding
- ☐ Other: [Click or tap here to enter text.]

If, “No” – provide findings and substantiation:
[Click or tap here to enter text.]

Notes:
[Click or tap here to enter text.]

C. Responsibilities of Sponsor
The Sponsor must assure that the provisions of these Standards and Guidelines are met.

Required documentation to be submitted/uploaded with self-study:
- Programmatic organizational structure for reporting

Documents to be available at time of site visit:
- Programmatic organizational structure for reporting
- Overview of responsibilities for each and flow of communication to ensure effectiveness of the program

Select the programs in compliance with this standard:

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Substantiated by:
- ☐ Organizational structure
- ☐ Interviews
- ☐ Other: [Click or tap here to enter text.]

If, “No” – provide findings and substantiation:
[Click or tap here to enter text.]

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Standard II. Program Goals

A. Program Goals and Outcomes
There must be a written statement of the program’s goals and learning domains consistent with and responsive to the demonstrated needs and expectations of the various communities of interest served by the educational program. The communities of interest that are served by the program must include, but are not limited to, students, graduates, faculty, sponsor administration, employers, physicians, and the public.

Program-specific statements of goals and learning domains provide the basis for program planning, implementation, and evaluation. Such goals and learning domains must be compatible with the mission of the sponsoring institution(s), the expectations of the communities of interest, and nationally accepted standards of roles and functions. Goals and learning domains are based upon the substantiated needs of health care providers and employers, and the educational needs of the students served by the educational program.

Required documentation to be submitted/uploaded with self-study:
- A narrative on the historical development of the program(s)
  - For programs that are currently accredited, please provide any changes that have occurred since the last accreditation review process.
- Describe special considerations that impact your program characteristics (e.g., student population, financial constraints, availability of clinical experiences, national and/or state regulations for your college system, etc.).
- State the Mission of the sponsoring institution.
  - A narrative sharing how the program mission or philosophy aligns with the institutional mission.
- Program goals and student learning outcomes (SLO) for each concentration or curricular track

Documents to be available at time of site visit:
- Sponsoring Institution’s mission
- Sponsoring Institution’s catalog

Select the programs in compliance with this standard:

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If, “No” – provide findings and substantiation:
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B. Appropriateness of Goals and Learning Domains
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, which is representative of at least each of the communities of interest named in these Standards, must be designated and charged with the responsibility of meeting at least annually, to assist program and sponsor personnel in formulating and periodically revising appropriate goals and learning domains, monitoring needs and expectations, and ensuring program responsiveness to change.
Advisory committee meetings may include participation by synchronous electronic means.

Required documentation to be submitted/uploaded with self-study:
- A narrative to describe the program’s method to aggregate and report assessment data as per the institutional requirement.
- Advisory Board/Committee Members Table (Template provided)
- Advisory Committee meeting minutes from the most recent meeting (identify members present)

Documents to be available at time of site visit:
- Sponsoring Institution’s mission
- Sponsoring Institution’s catalog

Select the programs in compliance with this standard:

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If, “No” – provide findings and substantiation:
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C. Minimum Expectations
The program must have the following goal defining minimum expectations: To prepare competent entry-level sonographers in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains for the following concentration(s) it offers:
- Abdominal sonography - Extended
- Adult cardiac sonography
- Breast sonography
- Musculoskeletal sonography
- Obstetrics and gynecology sonography
- Pediatric cardiac sonography
- Vascular sonography

Programs adopting educational goals beyond entry-level competence must clearly delineate this intent and provide evidence that all students have achieved the basic competencies prior to entry into the field.

Nothing in this Standard restricts programs from formulating goals beyond entry-level competence.

Required documentation to be submitted/uploaded with self-study:
- A narrative on where the goal statement for each concentration is published

Documents to be available at time of site visit:
- Program materials publishing the program’s goal statement and student learning outcomes.
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Substantiated by:

- [ ] Program Materials
- [ ] Other: Click or tap here to enter text.

If, "No" – provide findings and substantiation:

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Standard III. Resources

A. Type and Amount

1. Program Resources
Program resources must be sufficient to ensure the achievement of the program’s goals and outcomes. Resources must include, but are not limited to: faculty, clerical and support staff; curriculum; finances; offices; classroom, laboratory, and ancillary student facilities; clinical affiliates; equipment; supplies; computer resources, instructional reference materials, and faculty/staff continuing education.

Support staff should be available to provide counseling or referral for problems that may interfere with the student’s progress through the program. Guidance should be available to assist students in understanding course content and in observing program policies and practices.

Required documentation to be submitted/uploaded with self-study:
- A narrative on how the budget supports the program to provide the resources to offer an effective educational program

Documents to be available at time of site visit:
- Transcripts of faculty continuing education
- List of instructional and reference materials
- Tour of classroom, lab equipment, and supplies
Select the programs in compliance with this standard:

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Substantiated by:
- ☐ Transcripts of faculty continuing education
- ☐ List of instructional and reference materials
- ☐ Tour of classroom, lab equipment, supplies
- ☐ Interviews
- ☐ Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:
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2. Clinical Affiliates
Clinical affiliates must provide each student access to adequate numbers and a variety of types of diagnostic medical examinations to develop clinical competency in both normal and abnormal findings for the learning concentration(s) being offered.

Programs should provide students with a variety of patient care settings in which sonographic procedures are performed on in-patients and outpatients. These settings may include the following: ambulatory care facilities, specialty centers, emergency/trauma, intensive/critical/coronary care, surgery, angiography/cardiac catheterization.

The number of students assigned to the clinical affiliate should be determined by a student/clinical staff ratio that ensures equitable experiences and outcomes are met.

Required documentation to be submitted/uploaded with self-study:
- Clinical affiliate form for each concentration* (Clinical affiliate form by concentration template required – form available on JRC-DMS website Self Study documents)
- Record of clinical placement for each student (Clinical rotation matrix below)
- Documentation of the number of examinations participated in for each student (Student Clinical Log Participation table below)

Documents to be available at time of site visit:
- Updated Clinical affiliate form for each concentration
- Updated Clinical placement table for most recent graduating cohort(s) and enrolled cohort(s)
- Official class roster for each clinical course for each cohort
- Updated documentation on number of examinations participated in for each student.
- Access to Student Clinical Tracking/Management System if applicable
*Clinical affiliates must be listed using the names as titled in the clinical affiliate contracts with all campuses and departments to be identified on separate lines. Affiliate names must be used consistently in self-study documents.

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If, “No” – provide findings and substantiation:
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**Notes:**
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**B. Personnel**

The sponsor must appoint sufficient faculty and staff with the necessary qualifications to perform the functions identified in documented job descriptions and to achieve the program’s stated goals and outcomes.

**1. Program Director**

The program director must hold an academic degree and be an appointed faculty member or institutional equivalent with the sponsor.

**A. Responsibilities**

The program director must be responsible for:

1. the structure and daily operation of the program
2. the organization, administration, periodic review and evaluation, continued development, and effectiveness of program curricula
3. ensuring the effectiveness of all clinical affiliates is maintained

*Ensuring the effectiveness of clinical affiliates may be demonstrated through overseeing, monitoring, and communicating with the Clinical Coordinator regarding student clinical rotations, the number of cases, and completion of required competencies by all students.*

**Required documentation to be submitted/uploaded with self-study:**

- Job/Position description

**Documents to be available at time of site visit:**

- Updated Clinical affiliate form for each concentration
Select the programs in compliance with this standard:

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Substantiated by:

- [ ] Job/Position Description
- [ ] Interviews
- [ ] Other: Click or tap here to enter text.

If, "No" – provide findings and substantiation:
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B. Qualifications

The program director must:

1. possess a minimum of a Baccalaureate degree
2. possess the appropriate credential(s) specific to one or more of the concentration(s) offered
3. have documented experience in supervision, instruction, evaluation, student guidance and in educational theories and techniques
4. have a minimum of two years of clinical experience as a registered sonographer in the professional sonography field

A master’s degree is preferred.

Documentation of experience in educational theories and techniques may include completed college courses, seminars, or in-service sessions on topics including, but not limited to, learning theory, curriculum design, test construction, teaching methodology, or assessment techniques

Required documentation to be submitted/uploaded with self-study:

- Summary Curriculum Vitae (CV)
  Required form is available on JRC-DMS Website Self-Study Documents

Documents to be available at time of site visit:

- Verification of certification
- Verification of academic degree
- Documentation of faculty development participation
- Instructor and course evaluations results
Select the programs in compliance with this standard:

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Substantiated by:
- Verification of certification and academic degree
- Faculty development participation
- Instructor/course evaluation results
- Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:
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2. Clinical Coordinator(s)

Programs must have a faculty member or institutional equivalent designated as the Clinical Coordinator. The Clinical Coordinator(s) must be an appointed faculty member or institutional equivalent with the sponsor.

A. Responsibilities

The clinical coordinator(s) must:
- be responsible for coordinating clinical education with didactic education as assigned by the program director
- evaluate and ensure the effectiveness of clinical experiences for the concentration(s) students are enrolled in
- provide clinical instruction and document the evaluation and progression of clinical performance leading to clinical competence

Required documentation to be submitted/uploaded with self-study:
- Job/Position description
- A narrative on the process to document the evaluation and progression of student clinical performance and verifying students achieved all required competencies.

Documents to be available at time of site visit:
- Student clinical evaluation documentation
- Clinical visit schedule and documentation
- Student Clinical Tracking/Management system or student records relating to clinical education
Select the programs in compliance with this standard:

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Substantiated by:
- ☐ Student clinical evaluation documentation
- ☐ Clinical visit schedule and documentation
- ☐ Student clinical tracking/management or clinical student records
- ☐ Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:
Click or tap here to enter text.

Notes:
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B. Qualifications

The clinical coordinator(s) must:
1. possess an academic degree no lower than an Associate degree and at least equal to that for which the graduates are being prepared
2. possess the appropriate credential(s) specific to the concentration(s) that s/he coordinates
3. have documented experience in supervision, instruction, evaluation, student guidance and in educational theories and techniques; and
4. have a minimum of two years of clinical experience as a registered sonographer in the professional sonography field.

Documentation of experience in educational theories and techniques may include completed college courses, seminars, or in-service sessions on topics including, but not limited to, learning theory, curriculum design, test construction, teaching methodology, or assessment techniques.

The Clinical Coordinator may also serve as the Concentration Coordinator for the concentration(s) for which the Program Director does not possess an appropriate credential.

Required documentation to be submitted/uploaded with self-study:
- Summary Curriculum Vitae (CV)
  Required form is available on JRC-DMS Website Self-Study Documents

Documents to be available at time of site visit:
- Verification of certification
- Verification of academic degree
- Documentation of faculty development participation
- Instructor and course evaluation results
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Substantiated by:
- Verification of certification and academic degree
- Faculty development participation
- Instructor/course evaluations results
- Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:
Click or tap here to enter text.

Notes:
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3. Concentration Coordinator(s)

The Concentration Coordinator(s) must be appointed faculty member or institutional equivalent with the sponsor.

A. Responsibilities

Concentration Coordinator(s) report(s) to the Program Director and must be designated and responsible for the coordination of concentration(s) for which the Program Director does not possess the appropriate credential.

Required documentation to be submitted/uploaded with self-study:
- Job/Position description

Documents to be available at time of site visit:
- Job/Position Description

Select the programs in compliance with this standard:

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Substantiated by:
- Job/Position Description
- Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:
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B. Qualifications

Concentration Coordinator(s) must:
1. possess an academic degree no lower than an Associate degree and at least equal to that for which the graduates are being prepared
2. possess the appropriate credential(s) specific to the concentration(s) that s/he is designated to coordinate
3. have documented experience in supervision, instruction, evaluation, student guidance and in educational theories and techniques
4. have a minimum two years of clinical experience as a registered sonographer in the professional sonography field
Documentation of experience in educational theories and techniques may include completed college courses, seminars, or in-service sessions on topics including, but not limited to, learning theory, curriculum design, test construction, teaching methodology, or assessment techniques.

The Concentration Coordinator may also serve as the Clinical Coordinator for the concentration(s) for which the Program Director does not possess an appropriate credential.

Required documentation to be submitted/uploaded with self-study:
- Summary Curriculum Vitae (CV)
  Required form is available on JRC-DMS Website Self-Study Documents

Documents to be available at time of site visit:
- Verification of certification
- Verification of academic degree
- Documentation of faculty development participation
- Instructor and course evaluation results

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4. Medical Advisor

A. Responsibilities
The medical advisor must provide guidance that the medical components of the didactic and clinical curriculum meet current acceptable performance standards.

Required documentation to be submitted/uploaded with self-study:
- Job/Position description

Documents to be available at time of site visit:
- Job/Position description
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Substantiated by:
- ☐ Job/Position Description
- ☐ Interviews
- ☐ Other: Click or tap here to enter text.

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B. Qualifications
The medical advisor must be a licensed physician, certified by the American Board of Medical Specialties (ABMS), with relevant experience and knowledge in diagnostic medical sonography.

The medical advisor should participate in goal determination, curriculum development, and outcomes assessment.

Required documentation to be submitted/uploaded with self-study:
- Summary Curriculum Vitae (CV)
  Required form is available on JRC-DMS Website Self-Study Documents

Documents to be available at time of site visit:
- Curriculum Vitae

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Substantiated by:
- ☐ Curriculum Vitae
- ☐ Other: Click or tap here to enter text.

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5. Faculty/Instructional Staff
All faculty must be familiar with program goals and be able to demonstrate the ability to develop an organized plan of instruction and evaluation.

A. Responsibilities
Faculty/Instructional Staff must be responsible for providing instruction, evaluation of students, documentation of progress, and periodic review of course content.

Required documentation to be submitted/uploaded with self-study:
- Job/Position description(s) for a faculty member and instructional staff

Documents to be available at time of site visit:
- Instructor and course evaluations
- List of courses with assigned faculty with identification of primary faculty member if courses are team-taught.
Select the programs in compliance with this standard:

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Substantiated by:
- ☐ Curriculum Vitae
- ☐ Instructor and course evaluations
- ☐ List of courses with assigned faculty
- ☐ Interviews
- ☐ Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:
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B. Qualifications
Faculty/Instructional Staff must:
1. be qualified by education and experience, and be effective in teaching the subjects assigned; and
2. possess appropriate credential(s) for the learning concentration s/he are providing instruction and performing student evaluations.

Required documentation to be submitted/uploaded with self-study:
- Summary Curriculum Vitae (CV) for each faculty member and instructional staff
- Required form is available on JRC-DMS Website Self-Study Documents

Documents to be available at time of site visit:
- Verification of certification
- Policies/procedures for orientation and mentoring of faculty/Instructional staff
- Instructor and course evaluations results

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Substantiated by:
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- ☐ Instructor/course evaluations results
- ☐ Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:
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6. Clinical Instructor(s)
A clinical instructor must be identified for each clinical affiliate.

A. Responsibilities
A clinical instructor must be available to students whenever a student is assigned to a clinical setting, provide appropriate clinical supervision, and be responsible for student clinical evaluation.

Required documentation to be submitted/uploaded with self-study:
- Job/Position Description for clinical instructor/preceptor
Documents to be available at time of site visit:
- Student evaluation of the clinical experience

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B. Qualifications
Clinical instructors must have the appropriate credential in the concentration(s) for which they evaluate student performance and document required clinical competencies.

Required documentation to be submitted/uploaded with self-study:
- Clinical affiliate form by concentration with designated Clinical Instructor(s) names, credentials with specialties, and credential number

Documents to be available at time of site visit:
- Verification of certification
- For each clinical affiliate, a list of sonographers who perform clinical competencies/evaluations and credential verification for each sonographer performing and documenting clinical competency evaluations.

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C. Curriculum
The curriculum must ensure the achievement of program goals and learning domains. Instruction must be an appropriate sequence of the classroom, laboratory, and clinical activities. Instruction must be based on clearly written course syllabi that include a course description, course objectives, methods of evaluation, topic outline, and competencies required for graduation.

The program must demonstrate by comparison that the curriculum offered meets or exceeds the content and competencies specified in Appendix B.

Required documentation to be submitted/uploaded with self-study:
- Curricular sequence and schedule of courses required by cohort(s) of students.
  - Submit a document for each cohort if the schedule or instructor(s) differs between cohorts.
• Curriculum map (cross-reference document) for each concentration (Curriculum map required form(s) are available on JRC-DMS Website Self Study Documents)
  o For each learning concentration, the program’s master list of clinical competencies required for completion or graduation

Documents to be available at time of site visit:
• Schedule of courses by cohort(s) of students
  o Update as applicable since submission of the self-study
• Course materials
  o Syllabus for each course
  o Lecture materials
  o Lab activity documents
  o Exams
• Curriculum map (cross-reference document) for each concentration (highlight any updates since self-study submission)
• Clinical evaluation and competency process and documents

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D. Resource Assessment
The program must, at least annually, assess the appropriateness and effectiveness of the resources described in these Standards. The results of resource assessment must be the basis for ongoing planning and appropriate change. An action plan must be developed when deficiencies are identified in the program resources. Implementation of the action plan must be documented, and results measured by ongoing resource assessment.

Required documentation to be submitted/uploaded with self-study:
• Narrative of program strengths and action plan(s) to address deficiencies
• Program Resource Matrix Compilation of Results
• Copies of most recently completed Program Personnel Resource Surveys
• Copies of most recently completed Student Resource Surveys

Documents to be available at time of site visit:
• Program personnel resource surveys
• Student resource surveys
• Compilation and analysis of results for each year
Required forms are available on JRC-DMS Website Self-Study Documents

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Substantiated by:

- [ ] Program personnel resource surveys
- [ ] Student resource surveys
- [ ] Completion and analysis of results for each year
- [ ] Interviews
- [ ] Other: Click or tap here to enter text.

If, "No" – provide findings and substantiation:
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Standard IV: Student and Graduate (Outcomes)
Evaluation/Assessment

A. Student Evaluation

1. Frequency and purpose
Evaluation of students must be conducted on a recurrent basis and with sufficient frequency to provide both the students and program faculty with valid and timely indications of the students’ progress toward and achievement of the competencies and learning domains stated in the curriculum.

Required documentation to be submitted/uploaded with self-study:
- A narrative on the program’s process and frequency on conducting and documenting each student’s academic and clinical progression to achieve all student learning outcomes and required clinical competencies
- Schedule of clinical evaluations conducted for the past six (6) months

Documents to be available at time of site visit:
- Clinical evaluation schedule
- Documentation of activity for each clinical evaluation by program faculty
- Student counseling record
- Student evaluation/advising documentation
Program and Clinical Communication Log form is available on JRC-DMS Website Self-Study Documents

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Substantiated by:
- [ ] Clinical evaluation schedule
- [ ] Documentation of activity for each clinical evaluation
- [ ] Student counseling record
- [ ] Student evaluation/advising documentation
- [ ] Interviews
- [ ] Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:
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2. Documentation
Records of student evaluations must be maintained in sufficient detail to document learning progress and achievements.

Records indicating the number and type of diagnostic medical examinations performed by the student, the examination findings, the extent of student supervision, and the level of involvement of the student in scanning/performance must be maintained.

Official records or electronic equivalent used to document the progression of learning and achievements must include name, credentials, and signature of the supervising sonographer.

Required documentation to be submitted/uploaded with self-study:
- A narrative on how the program tracks student records to document the number of examinations, level of participation, exam findings, and extent of student supervision

Documents to be available at time of site visit:
- Student records
- Student records of clinical examinations
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B. Outcomes

1. Outcomes Assessment

The program must periodically 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 must include, but are not limited to: national credentialing examination(s) performance, programmatic retention/attrition, graduate satisfaction, employer satisfaction, job (positive) placement and programmatic summative measures. The program must meet the outcomes assessment thresholds.

“Positive Placement” means that the graduate is employed full or part-time in the profession or in a related field; or continuing his/her education or serving in the military. A related field is one in which the individual is using cognitive, psychomotor, and affective competencies acquired in the educational program.

“National credentialing examinations” are those accredited by the National Commission for Certifying Agencies (NCCA) or American National Standards Institute (ANSI). Participation and pass rates on national credentialing examination(s) performance may be considered in determining whether or not a program meets the designated threshold, provided the credentialing examination(s), or alternative examination(s) offered by the same credentialing organization, is (are) available to be administered prior to graduation from the program. Results from said alternative examination(s) may be accepted, if designated as equivalent by the organization whose credentialing examination(s) is (are) so accredited.

Required documentation to be submitted/uploaded with self-study:

Documentation requested is for the cohort(s) with graduates of 9-15 months prior to submission of self-study

If the program has more than one cohort completing in the previous year, for each cohort, please submit documentation separating each cohort.

- Retention calculation and analysis of causes of attrition
- Graduate & Employer Feedback Compilation of results (Required form available on JRC-DMS Website Self-Study Documents)
- Copies of completed Graduate Surveys per cohort (Survey form available on JRC-DMS Website Self-Study Documents)
- Copies of completed Employer Surveys per cohort (Survey form available on JRC-DMS Website Self-Study Documents)
- Official (ARDMS, ARRT, CCI) national credentialing results for the past two graduating cohorts
Documents to be available at time of site visit:

Programs applying for continuing accreditation, documentation from the cohorts completing in the past three years is expected to be available. For initial accreditation, the cohort of students enrolled/completed in the past two years as applicable.

- Class list/roster of first DMS course and last course for each cohort
- Graduate & Employer Feedback Compilation of results (template provided)
- Copies of completed Graduate Surveys per cohort (link to survey)
- Copies of completed Employer Surveys per cohort (link to survey)
- Official national credentialing reports

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Substantiated by:
- ☐ Class list/roster of first DMS course & last course per cohort
- ☐ Graduate & Employer Feedback compilation of results
- ☐ Graduate surveys per cohort
- ☐ Employer surveys per cohort
- ☐ Official national credentialing reports
- ☐ Other: Click or tap here to enter text.

If, "No" – provide findings and substantiation:
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2. Outcomes Reporting

The program must periodically submit to the JRC-DMS the program goal(s), learning domains, evaluation systems (including type, cut score, and appropriateness), outcomes, its 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 JRC-DMS to develop an appropriate plan of action to respond to the identified shortcomings.

Required documentation to be submitted/uploaded with self-study:
- Narrative on analysis of outcomes to include strengths, areas of deficiencies and action plan(s) to address any deficiencies.

Documents to be available at time of site visit:
- Update(s) applicable to program’s action plan(s)

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Substantiated by:
- ☐ Update(s) applicable to program’s action plan(s)
- ☐ Interviews
- ☐ Other: Click or tap here to enter text.

If, "No" – provide findings and substantiation:
Click or tap here to enter text.

Notes:
Click or tap here to enter text.
Standard V. Fair Practices

A. Publications and Disclosure

A.1 Publications and Disclosure
Announcements, catalogs, publications, and advertising must accurately reflect the program offered.

Required documentation to be submitted/uploaded with self-study:
- Narrative on analysis of outcomes to include strengths, areas of deficiencies and action plan(s) to address any deficiencies.

Documents to be available at time of site visit:
- Copy of current catalog or electronic link to document
- Website information

Select the programs in compliance with this standard:

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Substantiated by:
- Copy of current catalog or electronic link to document
- Website information
- Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:
Click or tap here to enter text.

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Click or tap here to enter text.

A.2 Publications and Disclosure
At least the following must be made known to all applicants and students: the sponsor’s institutional and programmatic accreditation status as well as the name, mailing address, web site address, and phone number of the accrediting agencies; admissions policies and practices, including technical standards (when used); policies on advanced placement, transfer of credits, and credits for experiential learning; number of credits required for completion of the program; tuition/fees and other costs required to complete the program; policies and processes for withdrawal and for refunds of tuition/fees.

Required documentation to be submitted/uploaded with self-study:
- Information provided to applicants that is not published in the Institutional catalog or available to public on program’s website

Documents to be available at time of site visit:
- Technical standards/Essential functions
- For currently enrolled students, the transcripts from outside institutions illustrating credits earned and accepted at the institution.
- Student admission documents
Select the programs in compliance with this standard:

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Substantiated by:
- ☐ Technical standards/Essential functions
- ☐ Transcripts from outside institutions (currently enrolled students)
- ☐ Student admission documents
- ☐ Interviews
- ☐ Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:
Click or tap here to enter text.

Notes:
Click or tap here to enter text.

A.3 Publications and Disclosure
At least the following must be made known to all students: academic calendar, student grievance procedure, criteria for successful completion of each segment of the curriculum and graduation, policies for student leave of absence, exposure to bloodborne pathogens, communicable diseases, and pregnancy, and policies and processes by which students may perform clinical work while enrolled in the program.

Required documentation to be submitted/uploaded with self-study:
- Information provided to applicants that is not published in the Institutional catalog or available to public on program’s website

Documents to be available at time of site visit:
- Document or electronic link to program handbook

Select the programs in compliance with this standard:

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Substantiated by:
- ☐ Document or electronic link to program handbook
- ☐ Interviews
- ☐ Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:
Click or tap here to enter text.

Notes:
Click or tap here to enter text.

A.4 Publications and Disclosure
The sponsor must maintain, and make available to the public: current and consistent summary information about student/graduate achievement that includes the results of one or more of the outcomes assessments required in these Standards

Required documentation to be submitted/uploaded with self-study:
- Electronic link to website documenting program outcomes

Documents to be available at time of site visit:
- Electronic link to website documenting program outcomes
Select the programs in compliance with this standard:

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Substantiated by:
- ☐ Electronic link to website documenting program outcomes
- ☐ Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:
Click or tap here to enter text.

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Click or tap here to enter text.

B. Lawful and Non-discriminatory Practices
All activities associated with the program, including student and faculty recruitment, student admission, and faculty employment practices, must be non-discriminatory and in accordance with federal and state statutes, rules, and regulations. There must be a faculty grievance procedure made known to all paid faculty.

A procedure should be established for determining that a student’s health will permit him or her to meet the documented technical standards of the program.

Required documentation to be submitted/uploaded with self-study:
- A narrative on student and faculty recruitment processes
- A narrative on accommodating students who disclose disabilities

Documents to be available at time of site visit:
- College catalog
- Faculty handbook/policies
- Faculty grievance process
- Student program handbook
- Process for students who disclose disabilities
Select the programs in compliance with this standard:

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Substantiated by:

- [ ] College catalog
- [ ] Faculty handbook/policies
- [ ] Faculty grievance process
- [ ] Student program handbook
- [ ] Process for students who disclose disabilities
- [ ] Interviews
- [ ] Other: Click or tap here to enter text.

If, “No” – provide findings and substantiation:

Click or tap here to enter text.

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C. Safeguards

The health and safety of patients, students, and faculty, and other participants associated with the educational activities of the students must be adequately safeguarded.

All activities required in the program must be educational and students must not be substituted for staff.

Diagnostic medical sonography students must be readily identifiable to patients and clinical co-workers as diagnostic medical sonography students.

The program must ensure voluntary and prudent use of students or other human subjects for non-clinical scanning. Students’ grades and evaluations must not be affected by participation or non-participation.

Required documentation to be submitted/uploaded with self-study:

- Policy on the use of human subjects for educational purposes
- Scan consent form for student volunteers
- Scan consent form for volunteers other than students (if applicable)

Documents to be available at time of site visit:

- Signed student consent forms
- Signed volunteer consent forms
- Infection control process
Select the programs in compliance with this standard:

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If, “No” – provide findings and substantiation:
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D. Student Records
Satisfactory records must be maintained for student admission, advisement, counseling, and evaluation. Grades and credits for courses must be recorded on the student transcript and permanently maintained by the sponsor in a safe and accessible location.

Required documentation to be submitted/uploaded with self-study:
- Provide a narrative on location and security of student records for currently enrolled and graduates.

Documents to be available at time of site visit:
- Student records for past four years. If program is less than 4 years old, all student records are to be available.
- Official transcript of graduates

Select the programs in compliance with this standard:

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If, “No” – provide findings and substantiation:
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Notes:
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E. Substantive Change
The sponsor must report substantive change(s) as described in Appendix A to CAAHEP/JRC-DMS in a timely manner. Other substantive change(s) to be reported to JRC-DMS within the time limits prescribed include:
1. Added or deleted learning concentrations
2. Change in award (certificate, diploma, degree) granted at the completion of the program
3. Change in clock or credit hours for completion of a program
4. Change in the length of a program
5. Change in location or method of delivery of curriculum (ex: satellite campus, distance education)

Documents to be available at time of site visit:
- Letter from JRC-DMS approving a change, if the change occurred after the submission of self-study.
Select the programs in compliance with this standard:

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If, "No" – provide findings and substantiation:
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Notes:
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F. Agreements
There must be a formal affiliation agreement or memorandum of understanding between the sponsor and all other entities that participate in the education of the students describing the relationship, role, and responsibilities between the sponsor and that entity.

The delineation of responsibilities should include student supervision, benefits, liability, and financial arrangements, if any. The agreement should include a clause to protect students and to ensure due process.

An affiliate is an institution having adequate resources to provide a broad range of appropriate clinical education opportunities for students.

A clinical education center is a department, division, or other designated part of a clinical affiliate having adequate resources to provide clinical education opportunities for students. Multiple clinical education centers may be identified within a clinical affiliate.

Required documentation to be submitted/uploaded with self-study:
- Clinical affiliate list

Documents to be available at time of site visit:
- Updated Clinical affiliate list
- Contracts for each clinical affiliate
- Credential verification for each clinical instructor

Select the programs in compliance with this standard:

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If, "No" – provide findings and substantiation:
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Notes:
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Additional Observations

- Program Strengths:
  Click or tap here to enter text.

- Program Deficiencies:
  Click or tap here to enter text.

- Additional Comments/Notes to the Board Reviewer:
  Click or tap here to enter text.