



Joint Review Committee on Education in Radiologic Technology
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November 6, 2023

Timothy Crone, M.D.
President and Chief Executive Officer
Mercy Hospital/Cleveland Clinic Health System
1320 Mercy Drive NW
Canton, OH 44708

RE: Program #3009

Previous Accreditation Status: 5 Years

Most Recent Site Visit: 02/2023

Dear Dr. Crone:

The Joint Review Committee on Education in Radiologic Technology (JRCERT) appreciated the opportunity to evaluate the certificate radiography program sponsored by Mercy Hospital/Cleveland Clinic Health System. The JRCERT is the only agency recognized by the United States Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA) for the accreditation of traditional and distance delivery educational programs in radiography, radiation therapy, magnetic resonance, and medical dosimetry. Specialized accreditation awarded by the JRCERT offers institutions significant value by providing peer evaluation and by assuring the public of quality professional education in the radiologic sciences.

The continuing accreditation status of the program was considered at the October 27, 2023 meeting of the Joint Review Committee on Education in Radiologic Technology. The program was evaluated according to the **Standards for an Accredited Educational Program in Radiography (2021)**. The JRCERT awards:

PROBATION.

Consistent with JRCERT Policy 10.100, this accreditation action is not subject to appeal.

The JRCERT, after reviewing the findings of the site visit team and the program's response to the report of findings, has determined that the program is in non-compliance with **Standards One, Four, and Six:**

Objective 1.1 - Lack of assurance that the sponsoring institution and program provide students, faculty, and the public with policies, procedures, and relevant information. Policies and procedures must be fair, equitably applied, and readily available. (Provide documentation that students have been made aware of the updates to the program's policy manual.)

Objective 4.2 - Lack of assurance that the program provides a well-structured curriculum that prepares students to practice in the professional discipline. (Provide documentation that students have been made aware of the updates to the program's semester sequencing and the changes to the summer clinical semester.)

Therefore, a progress report documenting compliance with **Objectives 1.1** and **4.2** is required by **December 4, 2023**.

Objective 6.1 - Lack of assurance that the program maintains the following program effectiveness data: Five-year average credentialing examination pass rate of not less than 75 percent at first attempt within six months of graduation. (Provide documentation of the program's five-year (2020-2024) average credentialing examination pass rate for graduates within six months of graduation.)

The program's current five-year (2019-2023) average credentialing examination pass rate at first attempt within six months of graduation is 74% (20/27).

Objective 6.4 - Lack of assurance that the program analyzes and shares student learning outcome data to facilitate ongoing program improvement. (Provide documentation of the analysis of student learning outcome data and the sharing of the results with its communities of interest.)

Additionally, a progress report documenting compliance with **Objectives 6.1** and **6.4** is required by **August 1, 2024**.

The progress reports must be submitted via the JRCERT Accreditation Management System (AMS) and will be considered by the Board of Directors at the next available meeting after submission. Based on evaluation of the progress report, the Board of Directors will determine the appropriate accreditation action. An additional progress report may be required if the objectives are not adequately addressed.

Consistent with JRCERT Policy 11.400, the maximum compliance timeframe is 36 months. Based on the areas of non-compliance, the Board of Directors are extending the program's current 24-month compliance timeframe to a 36-month compliance timeframe. Therefore, the program must document compliance with all accreditation standards no later than **November 16, 2024** or identify mitigating circumstances hindering the attainment of this outcome for consideration by the JRCERT Board of Directors.

As required by the USDE and consistent with the **maximum** compliance timeframes set forth in JRCERT Policy 11.400, when the JRCERT Board of Directors determines that a program has failed to document compliance with the **Standards** and has not satisfactorily addressed the identified deficiencies, the existing accreditation status will be withdrawn. Such involuntary withdrawal of accreditation is considered an adverse accreditation action. The JRCERT defines an adverse action as involuntary withdrawal of accreditation. Involuntary withdrawal of accreditation will generally, but not necessarily, occur after a Probationary Accreditation status has been awarded. The Board may take adverse action prior to the expiration of the maximum compliance timeframe. Probationary status, as well as an adverse accreditation action, requires written notification to the United States Secretary of Education, the appropriate State licensing or authorizing agency, appropriate regional and/or other accrediting agencies, and the public.

Consistent with JRCERT Policy 10.700 (enclosed), the program must notify currently enrolled and accepted students, as well as the public via a website posting, of this status within 30 days of receipt of this letter. The program is required to submit a representative sample of such notification and list of recipients to the JRCERT no later than **December 6, 2023**.

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The program is advised that consistent with JRCERT Policy 11.600, the JRCERT reserves the right to conduct unannounced site visits of accredited programs. The sponsoring institution would be responsible for the expenses of any on-site evaluation.

The Joint Review Committee on Education in Radiologic Technology Directors and staff encourage you and the program faculty to continue your efforts in developing a quality educational program. If we can be of further assistance, do not hesitate to contact the office.

Sincerely,



Tracy Herrmann, Ph.D., R.T.(R), FAEIRS
Chair

TH/JEM/jm

copy: Acting Program Director: Devin P. Johnson, B.S., R.T.(R)(M)(CT)
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