



REPORT OF SITE VISIT TEAM FINDINGS CHECKLIST MAGNETIC RESONANCE

Name of Program	
City/State	
Date(s) Visited	
Clinical Education Setting(s) Visited <i>Include city and state</i>	
Name of Team Chair	
Name of Team Member(s)	

The Report of Site Visit Team Findings Checklist is based on the Joint Review committee on Education in Radiologic Technology (JRCERT) **Standards for an Accredited Educational Program in Magnetic Resonance**, adopted April 2020 and implemented January 1, 2021.

The Report of Site Visit Team Findings Checklist has been designed by the Joint Review Committee on Education in Radiologic Technology (JRCERT) to assure consistency in the evaluation of magnetic resonance programs. The checklist provides assurance that each site visit team is substantiating compliance with each standard by reviewing specific, pertinent information. Utilize this instrument in conjunction with the electronic Report of Site Visit Team Findings (RSVTF) available through the JRCERT Accreditation Management System (AMS)

The primary functions of the site visit team are to verify information, to assess program outcomes, and to report findings. Again, this is accomplished, in part, through the completion of the checklist; however, in no way does the checklist supersede the actual RSVTF. The JRCERT is responsible for determining the extent and degree of program compliance with the JRCERT **Standards**.

The completed checklist should be returned electronically to the JRCERT no later than one week post onsite evaluation.

Report of Site Visit Team Findings Checklist

Magnetic Resonance – 2021 Standards

Standard One:

Accountability, Fair Practices, and Public Information

Standard One: The sponsoring institution and program promote accountability and fair practices in relation to students, faculty, and the public. Policies and procedures of the sponsoring institution and program must support the rights of students and faculty, be well defined, written, and readily available.

Please indicate evidence the site visit team reviewed to assess whether the program meets each of the objectives of Standard One (Check all that apply).

- Reviewed institutional and program website
- Reviewed published program policies, procedures and/or relevant information related to the following:
 - admission and transfer of credit policies;
 - tuition, fees, and refunds;
 - graduation requirements;
 - grading system;
 - program mission statement, goals, and student learning outcomes;
 - accreditation status;
 - articulation agreement(s);
 - academic calendar;
 - clinical obligations;
 - grievance policy and/or procedures.
- Reviewed institutional and program materials.
- Reviewed program's website for the most recent:
 - five-year average credentialing examination pass rate data
 - five-year average job placement rate data
 - annual program completion rate data
- Reviewed student handbook
- Reviewed student records
- Reviewed formal grievance(s) record(s), if applicable
- Reviewed employee/faculty handbook
- Reviewed employee/faculty application form
- Reviewed institutional catalog
- Reviewed student academic and clinical records

- Toured program offices
- Toured clinical setting(s)

- Interviewed institutional administration
- Interviewed faculty
- Interviewed staff

- Interviewed students
- Interviewed admissions personnel, as appropriate
- Interviewed clerical staff, if applicable
- Interviewed clinical preceptor(s)
- Interviewed clinical staff

Please identify any other evidence the site visit team reviewed to assess whether the program meets each of the objectives of Standard One.

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Standard Two:

Institutional Commitment and Resources

Standard Two: **The sponsoring institution demonstrates a sound financial commitment to the program by assuring sufficient academic, fiscal, personnel and physical resources to achieve the program's mission.**

Please indicate evidence the site visit team reviewed to assess whether the program meets each of the objectives of Standard Two (Check all that apply).

- Reviewed organizational charts of institution and program
- Reviewed published program materials (i.e. appropriate administrative support, budget and expenditure reports, personal counseling, disability services, financial aid, other student resources)
- Reviewed meeting minutes
- Reviewed learning resources
- Reviewed surveys
- Reviewed records

- Toured the classroom, laboratories, and faculty offices
- Toured learning facilities

- Interviewed institutional administration
- Interviewed faculty
- Interviewed students
- Interviewed clerical staff, if applicable

Please identify any other evidence the site visit team reviewed to assess whether the program meets each of the objectives of Standard Two.

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Standard Three:

Faculty and Staff

Standard Three: The sponsoring institution provides the program adequate and qualified faculty that enable it to meet its mission and promote student learning.

Please indicate evidence the site visit team reviewed to assess whether the program meets each of the objectives of Standard Three (Check all that apply).

- Reviewed institutional policies for faculty workload and release time
- Reviewed faculty position descriptions, if applicable
- Reviewed clinical settings
- Reviewed a representative sample of program faculty's and clinical preceptors' current ARRT certification and registration or equivalent documentation
- Reviewed position descriptions
- Reviewed handbooks
- Reviewed program evaluation materials
- Reviewed faculty evaluation(s)
- Reviewed clinical preceptor evaluation(s), if applicable
- Reviewed institutional and/or program policies for professional development

- Interviewed institutional administration
- Interviewed faculty
- Interviewed students
- Interviewed clinical preceptor(s)
- Interviewed with clinical staff

Please identify any other evidence the site visit team reviewed to assess whether the program meets each of the objectives of Standard Three.

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Standard Four:

Curriculum and Academic Practices

Standard Four: The program's curriculum and academic practices prepare students for professional practice.

Please indicate evidence the site visit team reviewed to assess whether the program meets each of the objectives of Standard Four (Check all that apply).

- Reviewed published program materials (i.e., mission statement, clinical education plan, terminal award, clock and/or credit hours, distance education)
- Reviewed meeting minutes (i.e., review of mission statement)
- Reviewed didactic and clinical curriculum sequence
- Reviewed input from communities of interest
- Reviewed part-time, evening and/or weekend curricular track(s), if applicable
- Reviewed course syllabi
- Reviewed JRCERT database
- Reviewed clinical records
- Reviewed clinical placement process
- Reviewed course objectives
- Reviewed student clinical assignment schedules
- Reviewed clinical orientation process
- Reviewed student records
- Reviewed clinical rotation schedules, if applicable
- Reviewed course catalog
- Reviewed class schedules
- Reviewed the process of student identification (i.e. distance education)

- Observed a portion of any course offered via distance delivery

- Interviewed institutional administration
- Interviewed faculty
- Interviewed students
- Interviewed clinical preceptors
- Interviewed clinical staff

Please identify any other evidence the site visit team reviewed to assess whether the program meets each of the objectives of Standard Four.

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Standard Five:

Health and Safety

Standard Five: The sponsoring institution and program have policies and procedures that promote the health, safety and optimal use of radiation for students, patients and the public.

Please indicate evidence the site visit team reviewed to assess whether the program meets each of the objectives of Standard Five (Check all that apply).

- Reviewed program website (i.e. potential dangers of implants or foreign bodies)
- Reviewed published program materials (i.e. pregnancy policy, supervision policies, institutional safety policies)
- Reviewed student records
- Reviewed student magnetic resonance safety screening protocol
- Reviewed magnetic resonance safety policies/procedures
- Reviewed compliance records
- Reviewed program curriculum
- Reviewed student handbook
- Reviewed meeting minutes (i.e., supervision policies)

- Interviewed faculty
- Interviewed clinical preceptor(s)
- Interviewed clinical staff
- Interviewed students

Please identify any other evidence the site visit team reviewed to assess whether the program meets each of the objectives of Standard Five.

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Standard Six:

Programmatic Effectiveness and Assessment: Using Data for Sustained Improvement

Standard Six: **The extent of a program’s effectiveness is linked to the ability to meet its mission, goals, and student learning outcomes. A systematic, ongoing assessment process provides credible evidence that enables analysis and critical discussions to foster ongoing program improvement.**

Please indicate evidence the site visit team reviewed to assess whether the program meets each of the objectives of Standard Six (Check all that apply).

- Reviewed program effectiveness data
- Reviewed aggregated/disaggregated data
- Reviewed data analysis and actions taken
- Reviewed documentation that demonstrates the sharing of results with communities of interest
- Reviewed representative samples of measurement tools used for data collection
- Reviewed assessment plan (i.e. student learning outcome data, trends)
- Reviewed assessment methods
- Reviewed documentation related to the assessment process reevaluation
- Reviewed curriculum mapping documentation, if applicable

- Interviewed faculty
- Interviewed institutional assessment coordinator, if applicable

Please identify any other evidence the site visit team reviewed to assess whether the program meets each of the objectives of Standard Six.

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