

Thank you for your interest in becoming a Washburn University Radiation Therapy Clinical Affiliate. The following information is enclosed in this packet:

Information regarding the program. Requirements for becoming an Affiliate. A description of the Clinical Preceptor's role. A questionnaire for potential clinical sites. An *example* of the Affiliation Agreement. A list of the ARRT required clinical competencies.

Please review the program information. I am available to answer any questions that may arise. If your facility is interested in becoming an official Clinical Affiliate, please complete the enclosed form titled "Questionnaire for Clinical Affiliates" and submit all requested documentation. After review of the questionnaire form and documentation, the Radiation Therapy Program will con-tact the facility about whether or not the Program's criteria to be an Affiliate has been met. Please be sure to include an email address and telephone number on the questionnaire form.

Once your site is qualified to be an Affiliate, a copy of the Affiliation Agreement will be sent to your attention. Please have the appropriate person(s) review the documents and sign the Agreement where indicated. Once signatures are obtained, return the signed Agreement to my attention. At that time, I will obtain the appropriate University signatures. As soon as the Agree-ment is complete, I will return one (1) fully executed Agreement for your records.

Again, thank you for your interest. I look forward to receiving a completed questionnaire.

Sincerely,

Sean Conrad, B.A., R.T.(R)(T) Clinical Coordinator



# Washburn University

Radiation Therapy Program

### The Program



The Radiation Therapy program is administered through the School of Applied Studies, Department of Allied Health. The program curriculum at Washburn is a JRCERT accredited, online 13-month certificate of completion program. Upon successful completion of the pro-gram, graduates The Radiation Therapy program is administered through the School of Ap-plied Studies, Department of Allied Health. The program curriculum at Washburn is a JRCERT accredited, online 13-month certificate of completion program. Upon successful completion of the program, graduates are registry eligible with the American Registry of Radi-ologic Technologists (ARRT). Classes begin in late June and finish the following July. The program consists of 40 credit hours of didactic courses and clinical education.

Students complete didactic courses online and participate in clinical education at a Washburn affiliated radiation therapy center. Clinical consists of unpaid experience. In the fall and spring semesters clinical hours are Tuesday-Thursday (8am-4pm) and Friday (8am-12pm). The win-ter intersession (a component of the spring semester) consists of approximately three weeks in December and January in which student's complete clinical hours Monday-Friday, 8am-4pm. In the summer semester, clinical is scheduled Monday-Thursday (8am-4pm) and Friday (8am-12pm).

Faculty
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Program

Kristina Collins, MHS, BHS, RT(R)(T) Program Director MHS, Washburn University, 2019 BHS, Washburn University, 2009 Radiation Therapy, Washburn University, 2009 Radiologic Technology, Washburn University, 2008 785-670-1414 Kristina.collins@washburn.edu

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#### Program Mission, Program Mission

**Goals and Out**comes The Radiation Therapy Program is focused on the development of qualified radiation thera-pists who provide optimum patient care through technical competency and professional con-duct.



#### **PROGRAM EFFECTIVENESS OUTCOMES**

<u>Outcome 1</u>: Students will complete the program.

<u>Outcome 2</u>: Graduates will pass the national certification exam on the first attempt within 6 months of graduation.

- <u>Outcome 3</u>: Graduates will be gainfully employed in radiologic sciences within 12 months of graduation.
- <u>Outcome 4</u>: Graduates will be satisfied with the overall quality of the program.

<u>Outcome 5</u>: Employers will be satisfied with the overall competency of program graduates.

#### GOAL 1 – PROGRAM GRADUATES WILL BE CLINICALLY COMPETENT.

<u>Outcome 1</u>: Students will analyze pertinent data from treatment planning documents.

<u>Outcome 2</u>: Students will accurately positions patients for treatment delivery.

Outcome 3: Students will evaluate images using various imaging technologies (MV, kV,

CBCT) to ensure proper patient alignment.

# GOAL 2 – STUDENTS WILL DEMONSTRATE WRITTEN AND ORAL COMMUNICATION SKILLS.

<u>Outcome 1</u>: Students will demonstrate written communication skills. <u>Outcome 2</u>: Students will provide patient education within scope of practice.

#### GOAL 3 – STUDENTS WILL DEMONSTRATE CRITICAL THINKING SKILLS.

<u>Outcome 1</u>: Students will solve challenges related to non-routine clinical situations. <u>Outcome 2</u>: Students will demonstrate ability to perform specialized procedures.

#### GOAL 4 – STUDENTS WILL DEMONSTRATE PROFESSIONAL WORK STANDARDS.

North Wacker Drive, Suite 2850, Chicago, Illinois 60606-3182, (312) 704-5300, E-mail:

<u>Outcome 1</u>: Students will exhibit professional standards and behaviors. Outcome 2: Students will assess the importance of professional development.

Program assessment data is available on the program's website under the Quality Indicators & Accreditation menu option (www.washburn.edu/radiation-therapy) as well as at the following location on the Joint Review Committee on Education in Radiologic Technology (JRCERT)'s website: (https://www.jrcert.org/programs/washburn-university/)

The Radiation Therapy Program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). Joint Review Committee on Education in Radiologic Technology, 20

#### Accreditation Accreditation

A start

State Authorization



**State Authorization**: The admission of students into a Washburn University degree or certificate program offered online or at sites outside of Kansas is contingent upon the University's compliance with any applicable regulations or laws enacted by those states in which the students reside. The University is reviewing the regulations imposed by other states in which our current students reside to determine their applicability and the feasibility of complying with such regulations in the future.

#### Admission Admission Criteria

mail@jrcert.org

An applicant must be a graduate of an accredited Radiologic Technology program, possess a minimum of an Associate Degree from an institution that is accredited by an acceptable accrediting body according to the ARRT, and hold the professional designation of RT(R). Specific coursework evaluated in the application review process includes: human anatomy and physiology, mathematics (math course description should include content such as real number systems, algebra of sets, exponents, equations and inequalities, polynomial functions, graphing, radical expressions, operations, inverses of function, equations of lines and systems of linear equations, logarithmic and trigonometric functions), written communication (composition), verbal communication (communication or public speaking/speech course), and radiation physics from radiology program.

Students who have not yet met these requirements, but are in the process of doing so may also be consid-ered for admittance; however, acceptance will be contingent on meeting all admission requirements prior to the program's start date.

#### Acceptance is conditional on the following:

- Confirmation of acceptable clinical placement.
- Completion of a radiologic technology program.
- Verification of an associate degree or higher from an educational institution accredited by a body acceptable to the ARRT.
- Professional designation by the ARRT as a Registered Radiologic Technologist (RTR).
- Successful completion of a 10-panel drug screen.
- Successful completion of a criminal background check. A criminal background check will be required of all accepted Radiation Therapy students prior to the program start date. Successful completion of the Radiation Therapy program requires participation in clinical practicum courses. Students can only be placed in clinical practicum courses after a background check (at their expense) has been completed which discloses they do not present a criminal history of:
  - a. convictions of laws regulating controlled substances\*;
  - convictions, at the felony level of crimes, as defined under Kansas Criminal Code (K.S.A. 21-3101 et seq.) and amendments thereto, which are crimes against persons, crimes against property, or sex offenses;
  - c. conviction of an offense requiring registry as a sex offender under the Kansas Offender Registry Act or any federal, military or other state law-requiring registry;
  - d. conviction, at the felony level of crimes, involving moral turpitude which include but are not limited to: perjury, bribery, embezzlement, theft, and misuse of public funds.





\*Exception: Persons who have been convicted of a misdemeanor illegal drug offense may be permitted to participate in the clinical practicum pursuant to the process for Management of Misdemeanor Illegal Drug Exception set out below.

#### Management of Misdemeanor Illegal Drug Exception

- If a background check report demonstrates a discrepancy, the Clinical Coordinator will contact the university contact who has access to the details of background check reports.
- The university contact will determine the cause of the discrepancy and communicate it to the Clinical Coordinator.
- The Clinical Coordinator will report findings from the university contact to the Program Director.
  - The university background check policy will be applied as follows:
    - If offense is related to items a-d of the background check policy, the student will not be permitted to start the program.
    - If offense is a misdemeanor illegal drug offense and the student is currently on probation for the offense, the student will not be permitted to start the program.
    - If offense is a misdemeanor illegal drug offense and the student is NOT currently on probation for the offense, the student will be provided the following option.
      - Student may disclose the misdemeanor illegal drug offense to the Clinical Supervisor at the assigned clinical site.
      - Clinical Coordinator will follow-up with the Clinical Supervisor at the assigned clinical site about the student's disclosure.
      - If the disclosure prohibits student placement at the clinical site, the student will not be permitted to start the program.
      - If the disclosure does NOT prohibit student placement at the clinical site, the student will be permitted to start the program and student will be advised to complete the ARRT Pre-Application Ethics Review process - <u>https://</u><u>www.arrt.org/earn-arrt-credentials/requirements/ethics-requirements/ethicsreview-preapplication</u>

## Why Radiation Therapy @

#### n Why Major in Radiation Therapy at Washburn University?

- Dedicated to excellence in teaching, Washburn University today is recognized as an outstanding public, urban learning environment.
- Washburn University began in 1865 as Lincoln College, a school established by the Congregational Church. Lincoln College became Washburn College in 1868 in recognition of the financial support of New England philanthropist, Deacon Ichabod Washburn. In 1941, the citizens of Topeka voted to make Washburn a municipal university.
- Our educational objectives are to prepare individuals for careers and further study in a variety of disciplines for a lifetime of continuous learning.
- Washburn has a reputation as a "teaching" university rather than a "research" institution. More than 90% of our faculty holds doctoral degrees or the highest degree available in their discipline.



Statement of Non-Discrimination: *It is the policy of Washburn University to assure equal educational and employment opportunity to qualified individuals without regard to race, color, religion, age, national origin, ancestry, disability, sex, sexual orientation, gender identity, genetic information, veteran status, or marital or parental status.* 

#### **Clinical Affiliation Requirements** Clinical

#### 1. Accredited by TJC or equivalent accreditation. (See Question 2e for appropriate accreditation mechanisms) Requirements

Affiliation

- 2. Linear accelerator(s) with electron capabilities.
- 3. CT simulation equipment.
- 4. Computerized treatment planning.
- 5. Medical physicist available on-site daily or on a weekly basis.
- Full-time Oncologist(s). 6.
- 7. Minimum patient load of 20 patients per linac per day with a variety of procedures and cancer types.
- 8. Routine imaging using a variety of technologies include MV, kV, and CBCT or MVCT etc.
- 9. Radiation therapy staff that is willing and able to provide support, guidance and a positive learning environment to the student. This may be difficult if the department is short staffed or if staff is resistant to training students.
- 10. Able to provide the student with the opportunity to observe, assist/perform all aspects of radiation therapy including, but not limited to:
  - Nursing: Patient consults, status checks, follow ups, dietician/nutritionist consults, social work consults.
  - Block Room: MLC is the primary mode of field shaping today, however, graduates of our program must have experience with electron custom block construction.
  - Brachytherapy: Students are to participate in brachytherapy experiences and complete case studies and competency related to either LDR or HDR brachytherapy.
  - Special Procedures: All students will log experience with stereotactic and motion management procedures. The ARRT requires competencies for SBRT/SRS treatments, and a special simulation procedure. The ARRT requires competencies (which may be simulated) for Total Body Irradiation (photon or electron) and Craniospinal Axis Irradiation.
  - Simulation: CT units are the standard for simulation today. When CT simulation is used, students must follow the CT image data into the treatment planning computer or workstation to be involved in the virtual simulation process. During simulation rotations, students will log immobilization device fabrication activities. Students will complete 6 simulation competencies.
  - Treatment Room: All aspects of treatment delivery including patient education, patient alignment, diode readings, imaging, image critique, new starts, emergency cases, chart review, scheduling, and billing. Students are <u>not</u> allowed to activate the beam during the fall semester and in the spring/summer semesters beam activation is left to the facility's discretion. Even when the student is not activating the beam, the student MUST be involved in all activity up to beam activation and following beam deactivation (accessing chart, reviewing prescription, documentation, selecting fields for treatment, acquiring images, charging etc.)
  - Dosimetry: Students must complete competencies related to the completion of basic calculations as well as computer generated isodose plans.
  - Image Review: Students need frequent opportunity to critique and analyze the accuracy of positioning based on images. Students will complete 3 imaging competencies.
  - **Tumor Board**: This is a very beneficial learning experience, which is recommended.
  - Quality Assurance Procedures: Students will be required to perform quality control procedures, demonstrate competence in five quality control activities, demonstrate ability to ensure that treatment information is complete and accurate, and participate in the monthly guality control checks with the physicist.
- 11. Site must designate a registered Radiation Therapist as the Clinical Preceptor. This should be someone who is able to commit time to be a frequent source of support and guidance for the student. This individual must be willing to provide effective and timely feedback. Activities of the Clinical Preceptor include submission of competency and professional development evaluations and verification of time records. All evaluations and time records are submitted in Trajecsys (an online clinical management system). The Clinical Preceptor will be the primary contact for the program and shall communicate concerns about a student's clinical behavior, professionalism, and technical skills to the program Clinical Coordinator in a timely fashion.
  - 12. Other staff registered radiation therapists at the clinical site must be willing to also participate in mentoring and instructing students. The success of clinical education is highly dependent on the staff's commitment to creating a constructive learning environment.
  - 13. In some cases an exam proctor from the clinical site may be needed. Advanced warning would be granted to the clinical site if this circumstance arises.





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The student can/should work with a variety of registered radiation therapists, so the responsibility of the student is not completely on the Clinical Preceptor The completion of performance evaluations may be completed by the Clinical Preceptor or by the registered radiation therapists with whom the student has directly been working. It is the Clinical Preceptor who will review the results of professional development evaluations with the student and provide guidance. The Clinical Preceptor will also check-in with the student, organize rotations, provide feedback, answer questions, and mentor professional behavior. At all times the student must be directly supervised by registered radiation therapist or appropriately credentialed professionals. Students may not be used as staff or considered as staffing relief and all student clinical education hours are unpaid.



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Clinical Preceptor Responsibilities



Clinical

Education

Details

### A Clinical Preceptor must possess the following qualifications:

1. Credentialed in radiation therapy by the ARRT.

- 2. A minimum of two years experience as a RT(R)(T) in a Radiation Oncology Department.
- 3. Demonstrate proficiency in educational methodologies.
  - a. previous experience working with students
  - b. training (formal or continuing education) regarding the education of students

#### Responsibilities Include:

- 1. Student instruction and supervision.
- 2. Evaluation of student progress in clinical skill development and competency.
- 3. Reporting student progress or concerns regarding progress to program Clinical Coordinator.
- 4. Providing student with regularly scheduled feedback.
- 5. Providing scheduled learning opportunities if the student asks for additional help.
- 6. Familiarity with program goals and clinical objectives.
- 7. Providing clinical staff the means to be familiar with program goals and clinical objectives.
- 8. Providing new staff radiation therapists with an orientation to the education program.
- 9. Supervising the clinical attendance of students.
- 10. Providing clinical staff with the opportunity to provide suggestions to the program.

**Clinical Education Details**: All of the following information is included in the Clinical Preceptor's manual. Clinical sites hosting a Washburn University student in a given academic year will receive an updated Clinical Preceptor's manual at least 4 weeks prior to the date students report to clinical. The Clinical Preceptor's Manual will be provided in electronic and paper formats. The Program and Clinical Manual (which contains the Clinical Preceptor's manual) and program schedules are available online at <a href="https://www.washburn.edu/radiation-therapy">www.washburn.edu/radiation-therapy</a>.

#### **Treatment Delivery:**

- Students must demonstrate competence in 16 ARRT required treatment competencies that will be completed through the year. Thirteen procedures must be demonstrated on patients, 3 of the required 16 procedures may be performed under simulated conditions. Additionally, students will retest on certain procedures to demonstrate continued competency.
- Students must complete 3 imaging competencies that will be completed through the year utilizing MV, KV, and ConeBeam CT systems.
- Students must complete a treatment chart check competency and a verification simulation competency.
- Students will log stereotactic treatment procedures and will complete a SRS/SBRT competency.
- Students will log motion management experiences. These experiences may be accomplished through a variety of techniques (respiratory gating, abdominal compression or forced shallow breathing, or deep breath holds).

#### Simulation:

 Students must complete 6 ARRT required simulation competencies that will be completed through the year, all of which must be completed on actual patients. In addition, students must demonstrate competence in the fabrication of a thermoplastic mold and custom immobilize action device for the thorax or abdomen/pelvis. Students will complete the ARRT required Special Simulation competency.

#### **Dosimetry:**

• The ARRT identifies 6 dosimetry competency categories related to computerized treatment planning, photon beam calculations, and electron beam calculations. Students will also be challenged to develop skills in treatment plan interpretation and review.

#### Quality Assurance:

Students must complete 5 quality control activities. Students will also complete competencies related to the review of treatment data to ensure com-pleteness and accuracy.

#### Brachytherapy:

 Students also must observe a minimum number of brachytherapy procedures (low dose rate or high dose rate) and complete 1 brachytherapy competency. Electronic brachytherapy does not fulfill this requirement.

#### Nursing & Patient Care:

 Students will need to observe consultations, status checks, and follow-up appointments. Additionally students should sit in on dietary/nutrition consults and social work consults to gain a better understanding of the comprehensive care offered to cancer patients. The ARRT requires students to demonstrate competence in 4 patient care activities: CPR, Vital Signs, O<sub>2</sub> Administration, and Patient Transfer.

#### **Special Procedures:**

 The ARRT has defined 4 participatory procedures: TBI, Craniospinal, Brachytherapy, SBRT/ SRS, Special Treatment Simulation Procedure, & Custom Block. These may be infrequent, yet critical. Participation means that the student takes an active role in the procedure and understands the critical concepts that are vital to the procedure. These may be completed under simulated conditions, if necessary.

Tumor conferences and safety trainings (or other related activities) serve to enhance the clinical education experience and offer students a broad scope of radiation therapy as they strive to develop entry-level skills.

## Questionnaire for Clinical Affiliates Washburn University- Radiation Therapy Program

Date:

1. Why is your facility interested in becoming or continuing as a Clinical Affiliate of Washburn University's Radiation Therapy Program?

#### 2. Facility Information:

- a. Facility Name: \_\_\_\_\_
- b. Facility Address: \_\_\_\_\_
- c. Facility Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_
- d. Does the director/supervisor wish to be included on program email updates?
- e. Accreditation: Is your site accredited by any of the following accreditation mechanisms:
  - ACRO (American College of Radiation Oncology),
  - ACR (American College of Radiology)
  - AAAHC (American Association for Ambulatory Health Care)
  - TJC (The Joint Commission)
  - DNV Healthcare, Inc.
  - HFAP (Healthcare Facilities Accreditation Program,) State-issued license,
  - Tube/Linac Registration (Acceptable for free-standing clinics)

If yes, by which organization?

3. Staffing: Please respond to the following as they relate to the organization/staffing of your department.

a. How many licensed Radiation Oncologists?
b. Is there a licensed Radiation Oncologist on site daily?
c. How many registered Oncology Nurses?
d. How many certified Medical Physicists?
e. How often is the Medical Physicist at facility during workday hours?
f. How many certified Dosimetrists?
g. How many registered Radiation Therapists?
h. Is there a Dietician on site or available to patients?
i. Is there a Social Worker on site or available to patients?
It is proven that the clinical affiliate/student relationship is most productive if the clinical site staff is interest

 It is proven that the clinical affiliate/student relationship is most productive if the clinical site staff is interested and willing to participate in the education of a radiation therapy student. Is the staff interested and willing to help guide a student through the clinical aspect of the program?  It is proven that the clinical affiliate/student relationship is most productive if the clinical site staff is interested and willing to participate in the education of a radiation therapy student. Is the staff interested and willing to help guide a student through the clinical aspect of the program?

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- •Does the staff understand that a Radiation Therapy Student will gain repeated hands-on experience relate to the follow rotations: clerical, nursing, block room, treatment room, simulation, brachytherapy, dosimetry, and quality control rotations throughout the program year?
- •Does the administration & staff understand that students are not to be used as staff or considered when making staffing decisions and that student clinical education hours are unpaid?
- 4. Clinical Preceptor Information: Identify 1 registered Radiation Therapist, with a minimum of 2 years work experience as a radiation therapist, with experience working with students, or with continued education or formal education focused on teaching/learning to serve as the Clinical Preceptor. A description of this role is contained within this packet. Preferably this is a therapist who has a natural ability to teach, has had positive outcomes when mentoring students, and is willing to become familiar with Washburn's Radiation Therapy program. Please include the name of the individual as well as relevant contact information below. Also provide a copy of the designated Clinical Preceptor's and a complete resume using the form provided in the packet.

Name:	_ Phone:
Email:	
Name of Designated "Backup" Clinical Preceptor:	

Email of Designated "Backup" Clinical Preceptor:

- 5. Is your facility or organization affiliated with another Radiation Therapy Educational Program? If yes, please indicate the name of the school/program, the number of students placed at your facility per academic year, as well as the length of student rotations.
- 6. **Equipment**: (describe the equipment in the department, please include manufacturer & model) a. Linear Accelerators):

b. What is the average daily patient load per linear accelerator per day?

c. Image-Guidance (include all available methods: MV, kV, CBCT, MVCT, Ultrasound, MRI):

d. Stereotactic procedures (SRS, SRT, SBRT):

e. Motion management (Gating, Breath Holds, Abdominal Compression):

f. Simulator (Specify any modalities a student would participate in: CT, MR, PET):

g. Treatment Planning System:

h. Record and Verify System:

i. What form of brachytherapy (LDR or HDR) is available at your facility?

\*If brachytherapy is NOT performed at your facility are you able to provide contact information of any suggested locations for this experience? Please list facility name, address,& phone: \_\_\_\_\_

i. Are there any planned updates/changes at your facility in the near future? If so, please explain and provide projected dates:

7. Other Considerations:

a. After reviewing the ARRT requirements (enclosed), please indicate whether the student(s) could gain repeated hands-on experience with the various ARRT defined procedures to meet the ARRT competency requirements?

b. Could a student gain block cutting experience (photon or electron) at your facility (despite MLC capabilities)?\_\_\_\_\_

c. Could a student participate in chart rounds?

d. Could a student participate in quality control testing of equipment (linac and CT sim)?

e. Does your site treat pediatric patients?

- f. NOTE: Clinical sites provide a radiation detection device to each student per the affiliation agreement. Students will be required to review the device report at the clinical education site in alignment with the interval during which devices are collected. Please respond whether your site collect the staff's radiation detection badges on a quarterly or on a monthly basis.
- g. Please note that appropriate documentation must be submitted on ALL clinical sites, including main offices and satellite offices. Does your site have a satellite office/off-site location the students will rotate to? \_\_\_\_\_\_ If yes please list facility name, address, phone: \_\_\_\_\_\_

h. Is there anything more you would like to share about your facility?

# Please provide the following documents to:

Sean Conrad Sean.conrad@washburn.edu

Or via USPS to:

Sean Conrad Washburn University Allied Health Department 1700 SW College Topeka, KS 66621

1. Completed questionnaire form;

2. A letter, certificate, or print out demonstrating the facility's department's current accreditation;

3. Curriculum Vitae for the Clinical Preceptor using the attached form beginning on page 12;

4. Copy of the ARRT certification of individual who will be serving as the Clinical Preceptor



# **Clinical Preceptor Curriculum Vitae**

I. General Information	
Full Name/Credentials, i.e., R.T.(R)	
City and State of Residence	

## II. Experience in the Professional Field, Starting with the Most Recent

Job Title	
Name of Company	
City and State	
Dates of Employment, i.e., June 2018 - Present	
Duties, Including Supervision,	
Instruction, and Evaluation of	
Students	

Experience in the Professional Field (cont'd)	
Job Title	
Name of Company	
City and State	
Dates of Employment	
Duties, Including Supervision, Instruction, and Evaluation of Students	

Experience in the Professional Field (cont'd)	
Job Title	
Name of Company	
City and State	
Dates of Employment	
Duties, Including Supervision, Instruction, and Evaluation of Students	

Experience in the Professional Field (cont'd)	
Job Title	
Name of Company	
City and State	
Dates of Employment	
Duties, Including Supervision, Instruction, and Evaluation of Students	

Experience in the Professional Field (cont'd)	
Job Title	
Name of Company	
City and State	
Dates of Employment	
Duties, Including Supervision, Instruction, and Evaluation of Students	

Experience in the Professional Field (cont'd)	
Job Title	
Name of Company	
City and State	
Dates of Employment	
Duties, Including Supervision, Instruction, and Evaluation of Students	

Experience in the Professional Field (cont'd)	
Job Title	
Name of Company	
City and State	
Dates of Employment	
Duties, Including Supervision, Instruction, and Evaluation of	
Students	

# III. Baccalaureate or Higher Degree

Highest Degree Awarded	
Name of Institution	
Date of Graduation	

#### WASHBURN UNIVERSITY SCHOOL OF APPLIED STUDIES DEPARTMENT OF ALLIED HEALTH RADIATION THERAPY PROGRAM AFFILIATION AGREEMENT

This agreement and understanding entered into by and between Washburn University of Topeka, 1700 SW College, Topeka, KS 66621, hereinafter referred to as "University", and \_\_\_\_\_\_, hereafter "Facility", to memorialize the agreement of the parties concerning use of Facility as a clinical education site for Radiation Therapy students enrolled at University.

In consideration of the mutual promises hereinafter set forth, the parties agree as follows:

#### 1. PURPOSE

The purpose of this Agreement is to secure Facility as a site to provide clinical education in radiation therapy and to set forth the respective obligations of the parties.

2. TERM

THIS AGREEMENT shall become effective \_\_\_\_\_\_ and remain in force unless and until either Washburn University of Topeka or \_\_\_\_\_\_ request that it be terminated or modified. Agreement may be renewed by written approval of both parties.

#### 3. TERMINATION

Either party may terminate this Agreement by providing the other party written notice of termination. Thirty days after receipt of notice of termination, this Agreement shall terminate as though such date were originally fixed as date of termination; provided, however, such termination shall not adversely affect radiation therapy student learners who are currently enrolled in the Radiation Therapy Program at Facility. University shall be the sole judge as to whether a student under this program is being affected adversely for the purpose of termination. The provisions of Section 8 shall survive the termination of the Agreement.

#### 4. MUTUAL RESPONSIBILITIES

- a. It is mutually agreed by and between the parties that there will be no costs, direct or Indirect, charged to the University by Facility or the Facility by University for the use of clinical facilities under this Agreement; provided, however, the Facility agrees to pay for reasonable travel expenses of faculty for a site visit that the Facility requests. In the event that a student issue arises the University and Facility agree to make every effort to resolve student issues via email, telephone, and/or teleconference. If a student issue remains unresolved after such efforts, the University and the Facility shall agree to a site visit. Reasonable travel expenses of faculty for a site visitation shall be the responsibility of the Facility.
- b. University and Facility agree that students will not be scheduled for more than 40 hours each week, including didactic and clinical instruction.
- c. University and Facility will abide by the pregnancy policy developed for the radiation therapy students.

#### 5. UNIVERSITY RESPONSIBILITIES

- a. University assumes responsibility for offering an educational program in radiation therapy as set forth by accrediting agency guidelines.
- b. University will provide the faculty for the Radiation Therapy Program who are qualified according to accrediting agency guidelines.
- c. University will develop and establish learning competencies and objectives and practical clinical competencies to be reached by student participating in the clinical education under this Agreement.
- d. All medical record information is confidential, and University faculty and students will maintain the confidentiality of the information received during students' clinical education.
- e. University will consult with Facility's staff contact person, appointed by University faculty in agreement with Facility, on the status of each student and his/her clinical education experience at Facility.
- f. University faculty and students will abide by existing rules and regulations of Facility insofar as they may pertain to their clinical education experience at Facility.
- g. University will provide professional liability coverage in the amounts of \$1,000,000 per occurrence and \$3,000,000 per aggregate for all radiation therapy students.
- h. Each radiation therapy student will be required by University to have a physical examination prior to entrance into the program. The student's medical records will be on file with the Radiation Therapy Program. A copy of student's medical records shall be provided to Facility on written request.
- i. Documentation of each student's health insurance coverage will be on file with the Radiation Therapy Program. A copy of student's policy will be provided to Facility upon written request.
- j. Upon request by Facility, in writing, to remove a student from the clinical program for a reasonable cause related to the need for maintaining an acceptable standard of patient care, the University shall immediately comply with such request.

#### 6. FACILITY RESPONSIBILITIES

- a. Facility will use its best efforts to maintain standards which make the educational site eligible by accrediting agencies.
- b. Facility will provide University faculty reasonable access to energized laboratory facilities, equipment and supplies necessary for instruction.
- c. Facility will provide clinical education in all phases of treatment planning and delivery, quality assurance and radiation protection.
- d. Facility will provide the faculty and students with access to the charts of the patients for

whom they are providing care.

- e. Facility will provide qualified radiation therapists to provide instruction to, and direct supervision of, the radiation therapy students.
- f. Facility will designate a registered Radiation Therapist with a minimum of two years of employment as a radiation therapist and experience mentoring students. This individual will be the main contact for the University
- g. Facility will provide a radiation detection device for each individual student. Facility shall review and maintain radiation exposure reports for each student. Facility shall discuss, with the student and University faculty, any interval radiation exposure report that is above the appropriate dose equivalent limits as designated by the Facility's policy.
- h. Facility will provide students and faculty with locker facilities and cafeteria services, if available.
- i. Facility will provide reasonable parking space for students and faculty.
- j. This agreement does not constitute an employee/employer relationship between Facility and the students. While assigned for clinical education, the students will have the status of learners and will not replace Facility staff radiation therapists. The responsibility for radiation therapy will be retained by the Radiation Therapy Department of Facility.
- k. Facility will provide a written evaluation of each student's clinical progress according to the policy and procedure of University.
- 1. Upon written notice by University of an allegation made by a participating student of sexual harassment/sexual abuse by an employee of the Facility, the Facility shall follow its existing procedures to investigate such claims and shall take whatever actions appropriate and necessary to protect the complaining student and other University students at the Facility during and after the investigation process.

#### 7. HIPAA COMPLIANCE

The parties acknowledge that Facility, is a "covered entity," as is defined in the Health insurance portability and Accountability Act of 1996 ("HIPAA") and the regulations regarding the privacy and security of individually identifiable health information promulgated at 45 C.F.R. parts 160 and 164 9the "HIPAA Regulations"), and is required to protect the privacy and security of protected health information of persons to whom it provides health care services. To the extent the university students have access to protected health information by virtue of their participation in the university's Radiation Therapy program at Facility, the parties agree that such students will be considered part of Facility's "workforce" for HIPAA compliance purposes only. Such students shall be subject to and abide by facility's policies and procedures governing the use and disclosure of such protected health information by Facility and its staff. Facility shall train such students regarding the requirements of its policies and procedures. Notwithstanding the foregoing, University shall educate such students regarding their obligations to protect the privacy, security, and confidentiality of all individually identifiable health information and the fundamental requirements of HIPAA. Nothing in this agreement is intended or shall be deemed to create an employer-employee relationship or a business associate relationship between Facility

and University.

#### 8. NON-DISCRIMINATION

The parties agree that no person shall be denied participation in the clinical experience on account of race, color, religion, age, national origin, ancestry, sex, sexual orientation, gender identity, genetic information, veteran status, marital or parental status, disability or handicap, or any basis prohibited by federal, state or local law or University's equal education opportunity statement.

#### 9. HOLD HARMLESS

University will indemnify and hold harmless Facility, its employees, agents, directors, officers, and trustees, from and against any and all claims, actions, liability, damages or demands (including settlements, judgments, court costs and attorney fees) arising out of this Agreement, caused by, resulting from negligent or acts or omissions, related to the providing of professional health care services, of University, its students, faculty or agents; provided however, that the extent of University's indemnification and hold harmless obligations are subject to and limited by the Kansas Tort Claims Act (Sections 75-6101 *et seq.* K.S.A.) . Facility will indemnify and hold harmless University, its governing board, officers, agents and employees, from and against any and all claims, actions, liability, damages or demands (including settlements, judgments, court costs and attorney fees) arising out of this Agreement, caused by, resulting from negligent or acts or omissions of Facility related to the providing of professional health care services, its employees, agents directors, officers and trustees.

#### 10. INTERPRETATION

This Agreement shall be interpreted in accordance with the laws of the State of Kansas.

#### 11. VALIDITY

If any provision of this Agreement shall, for any reason and to any extent, be held invalid or unenforceable, the remainder of the Agreement shall not be affected thereby, but rather shall be enforced to the greatest extent permitted by law.

#### 12. WAIVER

No waiver of a breach of any provision of this Agreement will be construed to be a waiver of any other breach of this Agreement, whether of a similar or dissimilar nature.

#### 13. AGREEMENT COMPLETE

This Agreement contains the entire understanding of the parties and supersedes all prior agreements. This Agreement may not be amended or modified except by mutual written agreement.

#### 14. NOTICE

Any notice required or permitted to be given shall be in writing and shall be effective if sent by certified mail, return receipt requested:

To University at:	To Facility at:
Sean Conrad	
Washburn University	
Clinical Coordinator	
1700 SW College	
Topeka, KS 66621	Attn:

In WITNESS HEREOF, the duly authorized representatives of the parties have set their hand on the date so noted.

#### FOR THE UNIVERSITY:

#### FOR THE FACILITY:

Dr. JuliAnn Mazachek	Date	Date
President		
Washburn University	kamp	ble
Dr. Zach Frank Dean, School of Applied Studie Washburn University	Date	Date

Kristina Collins, MHS, R.T(R)(T)DateRadiation Therapy Program DirectorWashburn University

Date



# Radiation Therapy

# 1. Introduction

Candidates applying for certification and registration under the primary eligibility pathway are required to meet the Professional Education Requirements specified in the *ARRT Rules and Regulations*. ARRT's *Radiation Therapy Didactic and Clinical Competency Requirements* are one component of the Professional Education Requirements.

The requirements are periodically updated based upon a <u>practice analysis</u> which is a systematic process to delineate the job responsibilities typically required of radiation therapists. The result of this process is a <u>task inventory</u> which is used to develop the clinical competency requirements (see section 4 below) and the content specifications which serve as the foundation for the didactic competency requirements (see section 3 below) and the examination.

# 2. Documentation of Compliance

Verification of program completion, including Didactic and Clinical Competency Requirements and all degree-related requirements including conferment of the degree, will be completed on the Program Completion Verification Form on the ARRT Educator Website after the student has completed the Application for Certification and Registration.

Candidates who complete their educational program during 2022 or 2023 may use either the 2017 Didactic and Clinical Competency Requirements or the 2022 requirements. Candidates who complete their educational program after December 31, 2023 must use the 2022 requirements.

# 3. Didactic Competency Requirements

The purpose of the didactic competency requirements is to verify that individuals had the opportunity to develop fundamental knowledge, integrate theory into practice and hone affective and critical thinking skills required to demonstrate professional competency. Candidates must successfully complete coursework addressing the topics listed in the <u>ARRT Content Specifications</u> for the Radiation Therapy examination. These topics would typically be covered in a nationally-recognized curriculum such as the ASRT Radiation Therapy Curriculum. Educational programs accredited by a mechanism acceptable to ARRT generally offer education and experience beyond the minimum requirements specified in the content specifications and clinical competency documents.

## 4. Clinical Competency Requirements

The purpose of the clinical competency requirements is to verify that individuals certified by the ARRT have demonstrated competence performing the clinical activities fundamental to a particular discipline. Competent performance of these fundamental activities, in conjunction with mastery of the cognitive knowledge and skills covered by the certification examination, provides the basis for the acquisition of the full range of procedures typically required in a variety of settings. Demonstration of clinical competence means that the candidate has performed the procedure independently, consistently, and effectively during the course of his or her formal education. The following pages identify the specific procedures for the clinical competency requirements. Candidates may wish to use these pages, or their equivalent, to record completion of the requirements. The pages do NOT need to be sent to the ARRT.







#### 4.1 General Performance Considerations

#### 4.1.1 Patient Diversity

Demonstration of competence should include variations in patient characteristics such as age, gender, and medical condition.

#### 4.1.2 Simulated Performance

ARRT defines simulation of a clinical procedure routinely performed on a patient as the candidate completing all possible hands-on tasks of the procedure on a live human being using the same level of cognitive, psychomotor, and affective skills required for performing the procedure on a patient.

ARRT requires that competencies performed as a simulation must meet the same criteria as competencies demonstrated on patients. For example, the competency must be performed under the direct observation of the program director or program director's designee and be performed independently, consistently, and effectively.

Simulated performance must meet the following criteria:

- Simulation of procedures requires the use of proper equipment without activating the x-ray beam.
- A total of three radiation treatment procedures may be simulated.
- If applicable, the candidate must evaluate related images

Examples of acceptable simulated performance include setting up another person for a treatment without activating the beam and evaluating a related portal image from a teaching file.

#### 4.1.3 Elements of Competence

Demonstration of clinical competence requires that the program director or the program director's designee has observed the candidate performing the procedure independently, consistently, and effectively during the candidate's formal educational program. The exception is for procedures categorized as "participatory" as explained in 4.2.6.

#### 4.1.4 Scope of Competence Assessment

The following is intended to offer a general guide to competence assessment in each of the three domains. It is recognized that most activities fall into more than one domain.

- Cognitive Domain: As part of providing treatment, candidates should demonstrate their understanding of concepts related to anatomy, physiology, pathology, and dose to critical structures. Candidates should also recognize complications and side-effects commonly associated with each treatment procedure. If facilities have a limited number of treatment options, candidates should also describe alternative treatment procedures (e.g., IMRT, IGRT, stereotactic) and explain how those procedures might apply to a given case.
- Psychomotor Domain: Candidates should demonstrate competence performing activities such as verifying treatment parameters, setting-up the treatment unit, positioning the patient, monitoring the patient during treatment delivery, and documenting treatment delivery.
- Interpersonal Domain: Candidates should demonstrate ongoing sensitivity to and compassion for each patient's physical and emotional well-being, interact with members of the radiation therapy treatment team in a positive and productive manner, and maintain high ethical standards.



RADIATION THERAPY DIDACTIC AND CLINICAL COMPETENCY REQUIREMENTS

The duration of clinical training may not allow students to follow patients over the entire course of treatment. However, some provision should be made to permit candidates to interact with at least one patient and monitor the patient's progress over the continuum of their treatment planning and delivery.

#### 4.2 Radiation Therapy Specific Requirements

#### 4.2.1 General Patient Care

Candidates must be CPR certified and demonstrate competence in the remaining six patient care activities. The activities should be performed on patients whenever possible, but procedures may be demonstrated in a clinical lab environment if state or institutional regulations prohibit candidates from performing the procedures on patients.

#### 4.2.2 Quality Control Procedures

Candidates must demonstrate competence in five quality control activities.

#### 4.2.3 Treatment Simulation Procedures

Candidates must demonstrate competence in six treatment simulation procedures. It is expected that the candidate will participate with appropriate personnel at the following levels of responsibility\*: perform, discuss, and review. All simulation procedures must be demonstrated on patients and reviewed with appropriate personnel.

Demonstration of competence includes considerations related to radiation safety, equipment operation, patient and equipment monitoring, patient positioning and marking, treatment volume localization, imaging procedures, record keeping, and patient management and education.

\* level of participation may depend on state or institutional requirements.

#### 4.2.4 Dosimetry

Candidates must demonstrate competence calculating doses for six treatment plans. Calculations should be performed for actual patients; however, calculations may be completed in a clinical lab exercise if demonstration on actual patients is not feasible.

#### 4.2.5 Treatment Accessory Devices

Candidates must demonstrate competence in fabricating three devices.

#### 4.2.6 Participatory Procedures

Candidates must participate in four treatment procedures, one special treatment simulation procedure, and one treatment accessory device process that may be infrequent yet critical. Participation means that the candidate takes an active role in the procedure and understands the critical concepts vital to the success of the procedure. Participation may be performed in a clinical lab exercise if necessary.

#### 4.2.7 Radiation Treatment Procedures

Candidates must demonstrate competence in 16 radiation treatment procedures. Thirteen procedures must be demonstrated on patients. Three procedures may be demonstrated in a clinical lab environment. Demonstration of competence does not require actual delivery of treatment dose. Demonstration of competence includes considerations related to radiation safety, equipment operation, patient and equipment monitoring, patient positioning, treatment volume localization, dose to critical structures, image acquisition and registration (e.g., MV, kV, CBCT), dose verification, record keeping, and patient management and education.



General Patient Care Procedures	Date Completed	Competence Verified By
CPR Certified		-
Vital Signs – Blood Pressure		
Vital Signs – Pulse		
Vital Signs – Respiration		
Vital Signs – Temperature		
O <sub>2</sub> Administration		
Patient Transfer		
Quality Control Procedures		
Linear Accelerator		
Laser Alignment		
Imaging Systems		
Beam Output and Symmetry		
Simulator		
Laser Alignment		
QC Water Phantom (e.g., CT Number)		
Simulation Procedures		
Brain		
Head and Neck		
Thorax		
Breast		
Pelvis		
Skeletal		
Dosimetry		
Single Field		
Parallel Opposed Fields		
Weighted Fields		
Wedged Fields		
Computer Generated Isodose Plan		
Electron Field		
Treatment Accessory Devices		
Custom Bolus		
Custom Immobilization Devices (e.g., Foaming Agents, Vacuum Bags)		
Thermoplastic Mold		
Participatory Procedures		
Total Body Irradiation (TBI) Treatment		
Craniospinal Treatment		
Brachytherapy Treatment		
SBRT/SRS Treatment		
Special Treatment Simulation Procedure (e.g., 4D CT, SBRT, Gating,		
or Brachytherapy)		
Custom Block Process (Photon or Electron)* *may or may not include actual block fabrication (e.g., third party		
outsourcing)		



Radiation Treatment Procedures	Date Completed	Patient or Simulated	Competence Verified By
Brain			
Primary			
Metastatic			
Head and Neck			
Multi-field			
Thorax			
Multi-field (non-IMRT)			
IMRT and/or Volumetric arc therapy			
Breast			
Tangents Only			
Tangents with Supraclavicular			
Tangents with Supraclavicular and Posterior Axilla Boost			
Special Set-up (e.g., Photon or Electron Boost, Prone, IMRT, Gating)			
Abdomen			
Multi-field			
Pelvis			
Multi-field Supine			
Multi-field Prone			
Skeletal			
Multi-field Spine			
Extremity			
Electron Fields			
Single			
Photon or Electron			
Abutting Fields			

Multi-field includes two or more fields, and may include 3D conformal, IMRT and/or volumetric arc therapy (unless specified otherwise).