

# San Joaquin Valley College

## Purchase Proposal



<b>Approved:</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<b>Date:</b>	July 20, 2018
<b>PR Number:</b>	NA

**STANDARD:** New supply and/or equipment purchases must be in alignment with SJVC’s Mission Statement and Strategic Plan. They must support the Institutional Learning Outcomes (ILOs), Program Learning Outcomes (PLOs), and show a positive correlation to career placement.

**POLICY:** Program Improvement Proposals are to be completed in full and submitted with support documentation to [CurriculumImprovements@sjvc.edu](mailto:CurriculumImprovements@sjvc.edu) between 60 - 90 days prior to the department’s Program Review for peer review and institutional determination.

**PROCESS:** Complete and submit the Program Improvement Proposal to [CurriculumImprovements@sjvc.edu](mailto:CurriculumImprovements@sjvc.edu). Attendees at Program Review will vote on adoption of the proposal. A corporate curriculum team member will coordinate implementation of approved proposals. If approved, the proposal is forwarded to Senior Management for their review.

**TIMELINE:** Changes may take a minimum of 120 days to implement. Please plan accordingly. Allow at least 90 DAYS for purchase and installation after approval.

### Purchase Proposal Overview

	Curriculum Purchases	Instructional Purchases
<b>Policy:</b>	Curriculum purchases are defined as NEW items requested by faculty specific to student achievement of course and program outcomes and job placement.	Instructional purchases are defined as NEW items requested by faculty to support classroom instructional techniques. Instructional purchases are not specific to any one program.
<b>Process:</b>	The Purchase Proposal is to be completed in full and submitted with supporting documentation to the Curriculum Specialist. If the proposal involves a program on multiple campuses, stakeholders from those campuses will be asked to review the Proposal prior to final approval.	The Purchase Proposal is to be completed in full and submitted with supporting documentation to the Curriculum Specialist.
<b>Examples:</b>	Patient simulators, virtual labs, durable medical equipment, HVAC training equipment.	Laptops and laptop carts, Interactive whiteboards, Clicker response systems.

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Person Requesting:	<i>Michele Perez, RVT</i>		
Supervisor:	<i>Cindy Hale-Lorenzetti, RVT</i>		
Date:	<i>December 22, 2017</i>		
Campus(es):	<i>Fresno and Bakersfield</i>		
Program:	<i>Veterinary Technology</i>		
Item:	<i>Anesthesia Machine - SKU #057903; Vaporizer - SKU #014311; Module Upgrade/Capnostat Mainstream - SKU #021613, and Monitor - SKU #039285</i>		
Total Cost (for all campuses included):	<i>Anesthesia Machine - \$2,526.43; Vaporizer - \$1,650.00; Module Upgrade - \$2,294.73; and Monitor - \$5,152.57 = \$11,623.73/campus. <b>TOTAL = \$23,247.46</b></i>		
Software Required:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	IS Notified:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

### Section 1: Measurement

- What metrics will be used to evaluate the effectiveness of the proposed changes? (placement, licensure, certification, CLO/PLO achievement, course completion, etc.)
- What is the current status and what is the expected target?

Metric	Current	Target	By When
<i>VRT 340 CLO 4 Demonstrate procedures for dental prophylaxis and extractions on anesthetized patients.</i>	<i>Unable to perform this currently. We are using cadaver heads for mastery sign off.  The new regulations from the AVMA requires that we use live animals. Our cumulative</i>	<i>70%</i>	<i>12/31/2018</i>
<i>VRT 330 CLO 7 Monitor patient during procedure and recovery.</i>	<i>Currently we are able to perform this but each student does not perform this enough times/practices to obtain proficiency.</i>	<i>70%</i>	<i>12/31/2018</i>
<i>PLO 2 Perform the various duties of a veterinary assistant, such as venipuncture, administering of injections, placing of IV catheters, and intubation.</i>	<i>Currently we are able to perform this but each student does not perform this enough times/practices to obtain proficiency. We have been using cadaver heads to assess mastery, but this will no longer be sufficient per AVMA regulations.</i>	<i>70%</i>	<i>12/31/2018</i>
<i>Licensure</i>	<i>The last VTNE test results was a pass rate of 12%</i>	<i>50%</i>	<i>6/1/2019</i>

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### Section 3: Summary of Benefits

Explain the benefits of the proposed supply/equipment to the course and program or instructional techniques.

*Currently we are unable to meet two CLOs in VRT 340. We are also unable to meet PLO 3 without this equipment:*

*3. Perform dental prophylaxis, with capability to instruct and demonstrate in-home dental care, providing detailed explanation for future recommendations (A dental prophylaxis is teeth cleaning)*

*The reason we are unable to meet this CLO moving forward, even though we have previously met this CLO, is that the AVMA now specifies that we must master the students on LIVE animals only. We have been having the students perform both practices and mastery on cadaver heads.*

*Due to the increase in class sizes, it is necessary to have three anesthesia machines. We currently have 2. Both are in working order at this time, however the second machine is at least 8 years old, and has been repaired several times. It is impossible to work around a broken anesthesia machine when we have only 2, and need 3. We can temporarily work with 2 machines even though it is not ideal, but we cannot function in the surgery class with only 1 machine.*

*We require a third anesthesia machine so that we may perform surgery at the same time as a dental procedure.*

*Per AVMA standards, (Section 4: Anesthesia, Subheading Tasks) we have to have multi-parameter monitors including ET/CO<sub>2</sub> for each stage of the anesthetic event for each patient. (In other words, each animal that is under anesthesia must be monitored both in the induction area and in the OR (operating room) for the surgical or dental procedure).*

### Section 3: Supporting Documentation

Attach at least two forms of documentation from outside sources that support the need for the purchase. Support documentation includes but is not limited to: Advisory Board minutes or statements from members; statements from Career Services department, extern sites or employers; documentation of programmatic regulations from accreditation associations or new laws and/or legislation; research on current industry trends; course/program comparison with other institutions.

Support Documentation	Explain how the documents listed support the proposed changes
<p><i>Accreditation Skills list*: Section 3: Nursing</i></p> <p><i>Tasks: Dentistry</i></p> <ul style="list-style-type: none"> <li>• <i>Perform routine dental prophylaxis (manual and machine)</i></li> <li>• <i>Understand client education regarding home care</i></li> <li>• <i>Float teeth</i></li> <li>• <i>Clip teeth</i></li> <li>• <i>Decision-making abilities: Given the characteristics of the patient, the veterinary technician will recognize a patient's dental health status and perform techniques, as prescribed</i></li> </ul>	<p><i>We have to have an anesthesia machine in order to perform dental prophylaxis. We need two machines for surgery, and a third for dentistry.</i></p> <p><i>Previously we did not perform both surgery and dentals at the same time.</i></p> <p><i>We need to perform both in order to meet the CLOs for each student. In smaller class sizes, we had enough time to complete all of the procedures if we didn't perform them at the same time because of the smaller class size.</i></p>

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<i>by a veterinarian, appropriate to the species and its condition in order to promote and maintain dental health.</i>	<i>With larger classes, it is necessary to have two procedures going at the same time.</i>
<p><i>AVMA CVTEA Accreditation Standards - Appendix 1:</i>  <i>Section 4. ANESTHESIA</i></p> <ul style="list-style-type: none"> <li>• <i>Patient management</i></li> <li>• <i>Skill: Safely and effectively, manage and maintain patients in all phases of anesthesia.</i></li> </ul> <p><b>Tasks:</b></p> <ul style="list-style-type: none"> <li>• <i>Calculate dosages of appropriate anesthetic-related drugs*</i></li> <li>• <i>Administer anesthetic-related drugs (injection, endotracheal tube, mask)</i></li> <li>• <i>Utilize clinical signs and appropriate equipment to monitor patient status during anesthetic procedures (e.g., esophageal stethoscope, blood pressure monitor, capnometer, electrocardiogram, pulse oximeter)</i></li> <li>• <i>Recognize and respond appropriately to patients in compromised states</i></li> </ul>	<p><i>These are the accreditation standards for anesthetic events in the educational setting. The specific parameter monitoring listed requires the proposed monitoring equipment.</i></p>

### Section 4: Improvement of Student Achievement

<p>4a. Explain how the proposed supply/equipment will increase student achievement.</p>	<p><i>Currently we are unable to teach or perform dental cleanings at the same time as surgical procedures.</i></p> <p><i>This proposal will increase the number of procedures able to be performed and thus allow each student ample opportunity to complete 3 practices and 2 proficiency of the associated skills prior to the end of the course.</i></p>
<p>4b. Summarize how this purchase will assist student placement. Have students been denied placement because of the College's lack of this supply/equipment?</p>	<p><i>This is an essential skill, not only for accreditation and licensure, but also for employment. It is a skill that must be performed daily in a veterinary clinic setting.</i></p>

### Section 5: Alignment with Outcomes – Curriculum Purchases

<p>5a. Explain <b>HOW</b> the proposed supply/equipment aligns with and support the CLOs and/or PLOs. Please identify and list the specific SLOs.</p>	<p><i>VRT 340 - CLO 2:</i>  <i>Identify and categorize the skills and instrumentation necessary for assisting in dental procedures</i></p>
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	<p><i>VRT 340 - CLO 4:</i>  <i>Demonstrate procedures for dental prophylaxis and extractions on anesthetized patients</i></p> <p><i>VT PLO 3:</i>  <i>Perform dental prophylaxis, with capability to instruct and demonstrate in-home dental care, providing detailed explanation for future recommendations</i></p> <p><i>In order to perform surgery, a patient must be on an anesthesia machine. The anesthesia machine delivers gas anesthesia and oxygen on a patient. Patients must be prepped for surgery in a place other than the surgery suite, ideally on a wet table, but an exam table is adequate. Dentals must be performed in a place other than the surgery suite, ideally on a wet table. There is an anesthesia machine in the surgery suite, and currently just one machine in the mail class area. Patients are induced and prepped for surgery on the wet table. As soon as the patient is moved to the surgery suite, another patient is anesthetized on the wet table. If the patient is a dental, we cannot anesthetize additional surgery patients until the dental is completed. Surgery procedures take approximately 15 minutes, dental procedures take approximately 1-2 hours.</i></p> <p><i>Previously we would complete all the surgery procedures first and then anesthetize the dental after the surgeries were completed.</i></p> <p><i>Due to larger class sizes this is no longer adequate. We need to perform at least 2 dental procedures each class period in order to have enough procedures that each student can perform a dental for mastery. WE simply cannot do that with only 2 anesthesia machines, particularly since one of the machines is so unreliable. Ideally we need 2 more machines so that we can have 3 reliable machines. The older, less reliable machine will be repaired this month.</i></p>
5b. How are the CLOs and/or PLOs currently being assessed without this purchase?	<p><i>The skills completion rubric ensures that all skills assigned in a class are completed in order to pass the class. We have been allowing that the skills be completed on cadaver heads for proficiency. The rubric assesses if the skills are complete in the class, and they are. The AVMA has updated its standards that any italicized skills listed must be preformed on live animals. This means that it is no longer acceptable or adequate to skill off mastery on cadaver heads. Practices may still be performed on cadaver heads, but not mastery.</i></p>

### Section 6: Alignment with Outcomes – Instructional Purchases

6a. Explain <b>HOW</b> the proposed supply/equipment aligns with and supports current instructional techniques.	<p><i>We are unable to teach the hands on portion of performing dentals until this machine is purchased.</i></p>
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6b. Explain how the <b>current</b> supplies/equipment affect instructional techniques.	<i>It is impossible to perform the number of procedures needed for students to master the skills without more equipment. We have to utilize videos and didactic teaching strategies, which is inadequate. We have also been completing mastery sign offs on cadaver heads, which is no longer considered adequate by the AVMA.</i>
<b>Section 7: Implementation</b>	
7a. What maintenance or upkeep is required for this supply/equipment (Batteries, Belts, etc.)?	<i>General yearly maintenance as provided by current service contract.</i>
7b. Will this supply/equipment become outdated and need to be replaced? If so, approximately how long until it is outdated?	<i>10-12 years. Each part on the machine can be individually replaced once the machine as a whole is purchased. The shortest warranty period is 3 years. The longest warranty is 7 years. With regular maintenance according to the HS rep the machine should last 10-12 years.</i>
7c. Will faculty need to be trained on how to use this supply/equipment? If so, describe the training plan and skills assessment plan.	<i>No. The program instructors are well versed with this equipment in general.</i>

### Section 8: Ordering Information

Attach all of the following documentation: detailed equipment/supply specifications, list of possible vendors, and ordering information.

Provide any additional information or comments below:

*Henry Schein Animal Health*

[MATRX VIP 3000 VAPORIZER, KEY FILL, ISOFLURANE](#)

*Midmark (91305418)*

[M1200 ANESTHESIA MACHINE, BASIC, SAFETY POP-OFF VALVE](#)

*Supera Anesthesia Innovations (M1200)*

[LIFEWINDOW 8V LITE MONITOR: NIBP/ SPO2/ 3-LEAD ECG/ TEMP \(OPTIONAL ETCO2 RESP\)](#)

*Digicare Biomedical (LW8 ESN1T)*

[LIFEWINDOW ETCO2 MODULE UPGRADE, CAPNOSTAT MAINSTREAM](#)

*Digicare Biomedical (M)*

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### Section 9: Internal Research (completed by AA staff)

- How many students are enrolled in this program on all campuses?
- Is this item in use on another campus? If so, which campus(s)?
- How will we measure return on investment?

- *Student Census:*
  - ✓ *Fresno Campus = 110*
  - ✓ *Bakersfield Campus = 58*
  - ✓ *Total Number of Students = 168*
- *This item is currently being used on the Fresno Campus:*
  - ✓ *Currently there are two machines on the Fresno campus, one of which is in poor condition and unreliable. If this unit is unable to be repaired, replacement may be necessary.*
- *We will measure the ROI via the following metrics:*
  - ✓ *Student skill proficiency and learning outcome achievement in VRT 330 - CLO 7; VRT 340 - CLO 4; and PLO 2.*
  - ✓ *An increase in VINE examination pass rate from 12% to a minimum of 50%,*

### Section 10: Academic Leadership Input

A statement from the Academic Dean (Campus President if submitted by the Academic Dean) documenting their knowledge and support of the proposed improvement is necessary to process the proposal (separate attachments or emails to the Curriculum Specialist are acceptable).

*I am aware of the deficiency in the VT program related to these CLOs and PLO, and I support this purchase request. The program cannot deliver promised and required outcomes without said unit. The current program matrices require the unit to be in place, functioning, and faculty/PD to be trained prior to use in the February 26, 2018 module.*

*Jerry Franksen, Campus President*

*Unless this piece of the curriculum/ skill is different because of the accreditation status of Fresno I would move to standardize...meaning that Bakersfield would also need to purchase the equipment.*

*Bakersfield has not done surgery on site, thus they do not have a machine. They tried to borrow ours (Fresno) at one point last fall and ours was broken so they could not do their surgeries.*

*We have had three separate problems with our machine (Fresno) and that delayed us from getting enough surgeries done in time for classes. It is an essential machine.*

*Sumer Avila, Vice Provost  
(Former Fresno Campus President)*

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### Section 11: Approval Process

A statement from the Director of Curriculum and Assessment documenting the approval process is necessary to process the proposal. (with consideration from the budget committee and senior management as necessary for changes that warrant increased expense)

<b>Review Date:</b>	3/5/2018	<b>Approved:</b> <input checked="" type="checkbox"/> <b>Disapproved:</b> <input type="checkbox"/>
<b>Comments:</b>	<p>The current machines have been repaired on several occasions in Fresno. Bakersfield doesn't have a machine at all. I support this purchase request.</p> <p style="text-align: right;">Annette Austerman, Director of Curriculum and Assessment</p>	

### Section 12: Senior Management Review

Proposal must be reviewed by Senior Management or authorized representative.

<b>Review Date:</b>	July 18, 2018	<b>Approved:</b> <input checked="" type="checkbox"/> <b>Disapproved:</b> <input type="checkbox"/>
<b>Comments:</b>	<p><i>The machines were approved in January of 2018 and the monitors were not. The monitors were then requested again in March of 2018, which I held due to AVMA and FRE purchases.</i></p> <p style="text-align: right;"><i>Sumer Avila, Provost</i></p>	



CVTEA Accreditation Policies and Procedures - Appendix I.pdf