**Unit Goal Revisions**

**2020-2021**

**Plans for the unit for the second year of the two year plan (19-21)**

**Name of Program/Department: Medical Laboratory Technology**

**PERSONNEL REQUESTS:** Below please list any NEW personnel requests. All full-time requests should be listed first followed by any part-time requests. *\*This does not include replacements for current personnel who may leave during the year, because their salary is already included in your budget. \** If you have no personnel requests, you may skip this section.

**Brief Description of Request:**

**Proposed Job Title:**

**Salary Schedule:**

**Annual Salary and Benefits (This information can be obtained from HR):**

**Justification to support personnel request including data:**

*\*Please copy and paste the headings above for each personnel request if you have more than one.*

**EQUIPMENT REQUESTS:** Below please list *ANY* equipment requests, including replacing old equipment. If you don’t have any equipment requests, you may skip this section. Please number your requests for easier tracking and reference.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | **# requested** | **Equipment Location****(Campus, Bldg, and Room #)** | **Unit Cost**  | **Total Cost** |
| 1. 50x oil immersion lenses for Leica microscopes | 12 | Jefferson CampusGeorge Layton Building room 230 | Approximately 295.00 each  | $3600.00 |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |
| 5.  |  |  |  |  |
| *\*If you need additional rows please right click in the row above and select “insert row below”* | **GRAND TOTAL:** | **$3600.00** |

**Justification and data (if applicable) to support equipment request:**

The 50X microscope lens is the optimal magnification for differential counting in Hematology. It is the magnification that students will be expected to use to count and identify cells in the clinical setting and as an employee. Currently we use 100X magnification and while this lens gives us a higher magnification for identification it results in slower counts. Results from 2018-19 employer and clinical surveys indicated a need for additional cell counting and identification. We feel the purchase and use of this particular lens will best prepare students for clinical rotations and the workforce by making them more adaptable to the use of this magnification in the workplace and make them more efficient in their job responsibilities.

**ALL OTHER REQUESTS:** Below please list any additional requests that were not included above. This may include items such as; professional memberships, monetary budget requests for department or program activities, accreditation fees, etc… If you don’t have any of these requests, you may skip this section.

|  |  |
| --- | --- |
| **Description Of Need** | **Cost** |
| 1. Continue with yearly program fees for accreditation, program assessment and student instructionA. ASCP BOC testing report Cost: $150.00 per year. B. Medtraining training subscription Cost: $1,390.00 yearlyC. NAACLS Accreditation yearly fees $2325.00D. Orchard Software license S2964.00 per yearE. Printing  | **$6,829.00** |
| 2. Maintain Expendable supply budget | **$22,000.00** |
| 3. Routine bi-yearly cleaning and servicing for 27 microscopes  | **$1,500.00** |
| 4a. Carpet removal room GLB 220. Replace tile in room 220 and 222 adjoining office spaceestimated cost $1600.004b. Paint office GLB 220 and 222 $500.00 | **$2,100.00** |
| 5. Program Coordinator and Clinical Coordinator to attend professional development opportunity. Site to be determined. | **$3,400.00** |
| 6. Funding for fall and spring advisory meeting | **$450.00** |
| 7. Faculty travel expenses  | **$1,500.00** |
| *\*If you need additional rows please right click in the row above and select “insert row below”* | **TOTAL:** | **$37,779.00** |

**Justification and data (if applicable) to support request:**

NAACLS Accreditation compliance for Standards is the justification for items 1a-d, 2 and 5

Items 4, 6 and 7 fulfill the Colleges’ Action Priorities

**PRIORITY PAGE:** Please consider all budget items described above including personnel, equipment, and other then list them below in priority order. The most important and needed request should be listed first, the second most important second, etc… A full description is not needed, just the title and/or name of the item is sufficient.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Section (Personnel, Equipment, Other)** | **Title** | **Total Cost** |
| **Priority #1** | Other | Maintain Expendable supply budget | **$22,000.00** |
| **Priority #2** | Other | Continue with yearly program fees for accreditation, program assessment and student instruction | **$6,829.00** |
| **Priority #3** | Equipment | 50x oil immersion lenses for Leica microscopes | **$3600.00** |
| **Priority #4** | Other | Routine bi-yearly cleaning and servicing for 27 microscopes  | **$1,500.00** |
| **Priority #5** | Other | Funding for fall and spring advisory meeting | **$450.00** |
| **Priority #6** | Other | Faculty travel expenses | **$1,500.00** |
| **Priority #7** | Other | Program Coordinator and Clinical Coordinator to attend professional development opportunity. Site to be determined. | **$3,400.00** |
| **Priority #8** | Other | 4a. Carpet removal room GLB 220. Replace tile in room 220 and 222 adjoining office spaceestimated cost $1600.004b. Paint office GLB 220 and 222 $500.00 | **$2,100.00** |

*\*If you need additional rows, please right click in the row above and select “insert row below”*