Respiratory Care
Comprehensive Academic Program Review
2012-13

Associate in Science Degree:
Respiratory Care
CRT Transitional
Paramedic and EMS Transitional

Institutional Research and Effectiveness
St. Petersburg College
June 2013
Comprehensive Academic Program Review Produced by

Respiratory Care Program

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Respiratory Care
2012-13 Comprehensive Academic Program Review
Institutional Research and Effectiveness

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Executive Summary

Introduction
The program review process at St. Petersburg College (SPC) is a collaborative effort designed to continuously measure and improve the quality of educational services provided to the community.

Program Description
The Respiratory Care program demonstrates that patients who need respiratory care often cannot breathe on their own. Respiratory care therapists are vital members of medical teams and serve as life-support specialists for a broad range of patients—from infants to the elderly. Our program has an excellent reputation in the community and produces highly qualified graduates.

Degrees Offered
Associate in Science Degrees in the Respiratory Care, CRT Transitional, and Paramedic and EMS Transitional programs are offered at SPC.

Program Performance
- **Actual Course Enrollment** remained consistent, with slight increases and decreases, during the four years reported. It decreased in Fall (133) and Spring (120), but increased during Summer (47) 2011-12 from the previous year.
- While **Unduplicated Headcount** increased slightly in Fall (40), it decreased slightly in Spring (33) and Summer (28) 2011-12 from the previous year.
- **SSH Enrollment** decreased slightly in Fall (361) and Spring (297), while increasing slightly in Summer (156) 2011-12 from the previous year.
- **Student Semester Hour (SSH) Productivity** decreased during the Fall (0.9) and Spring semesters (0.8), but increased during Summer (0.9) 2011-12 from the previous year.
- **Performance Metric** remained consistent during the four years reported, with minor increases and decreases. It decreased in Fall (2.3) and Spring (2.1), but increased in Summer (0.8) 2011-12 from the previous year.
- **Course Success Rate** remained consistent during the four years reported, decreasing slightly in 2011-12 (90%) from the previous year (92%).
- The number of AS **program graduates** in the Respiratory Care program remained consistent during the past three years, reaching a four-year high (16) in 2009-10. The number of graduates increased (15) in 2011-12 from the previous year (14).
- **Fulltime Faculty** taught 84.1% of the ECHs in 2011-12 as compared to 84.9% in 2010-11, while Adjunct Faculty taught 15.9% of the ECHs in 2011-12, and 15.1% in 2010-11.
- The highest semester for Adjunct ECHs was Summer 2008-09 in which adjunct faculty taught 35.3% of the program’s course load. The three-semester average for adjuncts (15.9%) in 2011-12 is less than the College’s general 65/35 Fulltime/Adjunct Faculty Ratio guideline.
Program Profitability

- The Relative Profitability Index (RPI-T) for the Respiratory Care program remained consistent during the four years reported, increasing slightly in 2011-12 from the previous year.

Program Improvements

- There were no Capital Expenditures (Fund 10 and 16) for the Respiratory Care program (Org: 11230108) during the past three years.

Academic Outcomes

- The 2009-10 Academic Program Assessment Report indicated that the desired results were met for one of the three Program Learning Objectives (PLOs) assessed in the Respiratory Care Program.
- The 2009-10 Academic Program Assessment Follow-up Report was completed in April 2011. All of the action items were successfully completed and the results published in the 2009-10 follow-up report. The next assessment report is scheduled to be completed during the 2012-13 academic year.

Stakeholder Perceptions

- All the individual average content area scores for the Student Survey of Instruction (SSI) were above the traditional threshold (an average of 5.0) used by the College for evaluating seven-point satisfaction scales. These results suggest general overall satisfaction with the courses within the Respiratory Care program; specifically, as they relate to faculty engagement, preparation and organization, and course instruction.
- A Respiratory Care advisory committee meeting was held on March 3, 2013. The meeting consisted of a discussion pertaining to a program update, a lab equipment update, enrollment, the baccalaureate program, and clinical status.
- Fourteen Recent Alumni surveys were provided to the 2010-11 graduates of the Respiratory Care program. Twenty-nine percent of the graduates responded to the survey (4 of the 14). Not all respondents answer every survey question; therefore, the percentages listed below represent the responses to each survey question in relation to the total number of responses received for each question.

Notable results include:
- 75.0% of recent graduate survey respondents, who were employed, were employed full-time.
- 100.0% of recent graduate survey respondents had a current position related to their studies.
- 50.0% of recent graduate survey respondents indicated their main goal in completing a degree or certificate at SPC was to “Change career fields”; 25.0% “Obtain employment”; while the remaining 25.0% selected “Continue my education.”
- 75.0% of recent graduate survey respondents indicated that their SPC degree allowed them to “Obtain employment”; 50.0% “Change career fields”; 50.0% “Earn more money”; 50.0% “Continue my education”; and 25.0% “Meet
certification/training needs”. [Note: The total may exceed 100% as this question allows multiple responses]

- 25.0% of recent graduate survey respondents indicated that SPC did “Exceptionally well” in helping them meet their goal; and 75.0% “Very Well.”
- 100.0% of recent graduate survey respondents indicated that they earned between $20.00 and $24.99 per hour ($42,000 - $51,999 annually).
- 0.0% of recent graduate survey respondents indicated they are continuing their education.
- 100.0% of recent graduate survey respondents would recommend SPC’s Respiratory Care program to another.

- Employer surveys are sent out based on permissions provided by recent graduates in the 2010-11 recent alumni survey. Since permission was not received from recent graduates, there is no Employer Survey information available.

Occupation Profile

- One occupation description, Respiratory Therapists, was located in the Bureau of Labor Statistics for the Respiratory Care program.
- The 2011 median yearly income for Respiratory Therapists was $55,200 in the United States and $51,500 in Florida.
- Employment trend information for Respiratory Therapists showed an average annual increase (22% - 28%) in employment for the profession over the next 5-7 years for both the country and state.
- The major employers of SPC’s Respiratory Care graduates are All Children’s Hospital, Bayfront Medical Center, Blake Hospital, Largo Hospital, Manatee Memorial Hospital, Mease Countryside Hospital, Morton Plant Hospital, Sarasota Memorial Hospital, St. Joseph’s Hospital, Tampa General Hospital.
- Total Placement in the Respiratory Care program has remained at 100% for the past four years.

State Graduates Outcomes

- State Graduates data indicated that two hundred and twenty-eight students completed a state Respiratory Care program in 2009-10, of those one hundred and eighty-five had some matching state data and were employed. Eighty-seven percent (87%) of those state graduates were employed at least a full quarter.

Program Administrator’s Perspective: Issues, Trends, and Recent Successes

The data in this report clearly show that the St. Petersburg College’s (SPC) Respiratory Care program continues its long tradition of success. SSI scores remain significantly above the college’s average; 100% of graduates surveyed stated the program did “exceptionally well” or “very well”, and 100% of them would recommend the program. In addition, the program’s graduates continue to score significantly higher than the national average on credentialing exams, and the graduate placement rate in the field remains at 100%, which is tied for the top ranking in the state.
It is also interesting to note that the outcomes achieved in this period included no student pools selected through a selective admissions process. This is unusual, as a majority of Respiratory Care programs employ selective admissions. I look forward to monitoring the impact of the program’s gradual switch to a selective admissions process on the outcomes discussed here.

Another point of note is that 0% of graduates who responded had plans to continue their education. This may be due to the fact that during the survey period included in this report, there were very few options for graduates to continue their education in the field, as additional baccalaureate programs are sorely needed. Fortunately, SPC has responded to this need and will begin offering a baccalaureate degree in Health Services Administration in Respiratory Care in October, 2013. I look forward to monitoring the impact of this new degree offering regarding this data point.

In addition, it should be noted that the program may see future increases in the percent of courses taught by adjuncts. This increased use of adjuncts, at least in the short term, will likely be required as the program adjusts to the recent death of program director Steve Mikles, who carried a significant teaching load.

Recommendations/Action Plan

Program action plan created by the Program Administrator, and reviewed by the Advisory Board members, is located at the end of the document.
SPC Mission Statement
The mission of St. Petersburg College is to promote student success and enrich our communities through education, career development and self-discovery. St. Petersburg College fulfills its mission led by an outstanding, diverse faculty and staff and enhanced by advanced technologies, distance learning, international education opportunities, innovative teaching techniques, comprehensive library and other information resources, continuous institutional self-evaluation, a climate for student success, and an enduring commitment to excellence.

Introduction
In a holistic approach, the effectiveness of any educational institution is the aggregate value of the education it provides to the community it serves. For over eighty-five years, St. Petersburg College (SPC) has provided a wide range of educational opportunities and services to a demographically diverse student body producing tens of thousands of alumni who have been on the forefront of building this county, state, and beyond. This is due, in large part, to the College’s institutional effectiveness.

Institutional Effectiveness
Institutional Effectiveness is the integrated, systematic, explicit, and documented process of measuring performance against the SPC mission for the purposes of continuous improvement of academic programs, administrative services, and educational support services offered by the College.

Operationally, the institutional effectiveness process ensures that the stated purposes of the College are accomplished. In other words did the institution successfully execute its mission, goals, and objectives? At SPC, the Offices of Planning, Budgeting, and Research work with all departments and units to establish measurable statements of intent that are used to analyze effectiveness and to guide continuous quality improvement efforts. Each of St. Petersburg College’s units is required to participate in the institutional effectiveness process.

The bottom-line from SPC’s institutional effectiveness process is improvement. Once SPC has identified what it is going to do then it acts through the process of teaching, researching, and managing to accomplish
its desired outcomes. The level of success of SPC’s actions is then evaluated. A straightforward assessment process requires a realistic consideration of the intended outcomes that the institution has set and a frank evaluation of the evidence that the institution is achieving that intent.

There is no single right or best way to measure success, improvement, or quality. Nevertheless, objectives must be established, data related to those objectives must be collected and analyzed, and the results of those findings must be used to improve the institution in the future. The educational assessment is a critical component of St. Petersburg College’s institutional effectiveness process.

**Educational Assessment**

Educational programs use a variety of assessment methods to improve their effectiveness. Assessment and evaluation measures are used at various levels throughout the institution to provide provosts, deans, program managers, and faculty vital information on how successful our efforts have been.

While the focus of a particular educational assessment area may change, the assessment strategies remain consistent and integrated to the fullest extent possible. The focus of Associate in Arts degrees is students continuing on to four-year degree programs. The Associate in Applied Science and Associate in Science programs are targeted towards students seeking employable skills, which does not require but may include continuing on to a four-year program. The General Education based assessments focus on the general learning outcomes from all degree programs, while Program Review looks at the viability of the specific programs.

The individual reports unique by their individual nature are nevertheless written to address how the assessments and their associated action plans have improved learning in their program. The College has developed an Educational Assessment Website (https://it.spcollege.edu/edoutcomes/) to serve as repository for all SPC’s educational outcomes reports and to systematically manage our assessment efforts.
Program Review Process

The program review process at St. Petersburg College is a collaborative effort to continuously measure and improve the quality of educational services provided to the community. The procedures described below go far beyond the “periodic review of existing programs” required by the Florida College System; and exceeds the necessary guidelines within the Southern Association of Community Colleges and Schools (SACS) review procedures.

State guidelines require institutions to conduct program reviews every seven years as mandated in chapter 1001.03(13) of the Florida Statutes, the State Board of Education (formerly the Florida Board of Education) must provide for the review of all academic programs.

(13) CYCLIC REVIEW OF POSTSECONDARY ACADEMIC PROGRAMS.--The State Board of Education shall provide for the cyclic review of all academic programs in Florida College System institutions at least every 7 years. Program reviews shall document how individual academic programs are achieving stated student learning and program objectives within the context of the institution’s mission. The results of the program reviews shall inform strategic planning, program development, and budgeting decisions at the institutional level.

In addition, Rule 6A-14.060 (5) states that each community college shall:

(5) Develop a comprehensive, long-range program plan, including program and service priorities. Statements of expected outcomes shall be published, and facilities shall be used efficiently to achieve such outcomes. Periodic evaluations of programs and services shall use placement and follow-up data, shall determine whether expected outcomes are achieved, and shall be the basis for necessary improvements.

In 2007, SPC reduced the recommended program review timeline to three years to coincide with the long-standing three-year academic program assessment cycle, producing a more coherent and integrated review
process. Figure 1 represents the relationship between program assessment and program reviewing during the three-year assessment cycle.

![Three-Year Academic Program Assessment Cycle](image)

**Figure 1: Three-Year Academic Program Assessment Cycle**

**Program Description**

The Respiratory Care program demonstrates that patients who need respiratory care often cannot breathe on their own. Respiratory care therapists are vital members of medical teams and serve as life-support specialists for a broad range of patients-- from infants to the elderly. Our program has an excellent reputation in the community and produces highly qualified graduates.

**Degrees Offered**

An Associate in Science Degree in the Respiratory Care, CRT Transitional, and Paramedic and EMS Transitional programs are offered at SPC.

For a complete listing of all courses within the Respiratory Care program, please see Appendix A.
Accreditation

The Respiratory Care program is accredited by the Commission on Accreditation for Respiratory Care (CoARC). It was last accredited in 2008 and the next accreditation will take place in 2017.

Program Learning Outcomes

1. Clinical and didactic emphasis on clinical data using the NBRC content matrix.
2. Clinical and didactic emphasis on equipment using the NBRC matrix.
3. Clinical and didactic emphasis on therapeutic procedures using the NBRC matrix.
Program Performance

Actual Course Enrollment

Actual Course Enrollment is calculated using the sum of actual student enrollment for the courses within the program (Academic Organization Code). This number is a duplicated headcount of students enrolled in the program's core courses, and does not reflect the actual number of students enrolled in the A.S. program or its associated certificates (if applicable). Actual course enrollment remained consistent, with slight increases and decreases, during the four years reported. It decreased in Fall (133) and Spring (120), but increased during Summer (47) 2011-12 from the previous year, as shown in Figure 2.

![Figure 2: Actual Course Enrollment](image)

Source: PeopleSoft Student Administration System: Course Management Summary Report (S_CMSUMM)
**Unduplicated Headcount**

Unduplicated Headcount is the total number of unduplicated students with a program plan within the area of study (e.g., A.S. or certificate) that are currently enrolled in a course under that Academic Org. during the term of interest. This excludes 1) students in a different program plan or 2) students in the right program plan who are not taking courses within that Academic Org. for the term of interest. While unduplicated headcount increased slightly in Fall (40), it decreased slightly in Spring (33) and Summer (28) 2011-12 from the previous year, as shown in Figure 3.

![Unduplicated Headcount Graph](chart.png)

*Figure 3: Unduplicated Headcount*

Source: PeopleSoft Student Administration System
**SSH Enrollment**

SSH Enrollment is defined as the total number of student semester hours (i.e., Actual SSH). SSH enrollment decreased slightly in Fall (361) and Spring (297), while increasing slightly in Summer (156) 2011-12 from the previous year, as shown in Figure 4.

*Figure 4: SSH Enrollment*

Source: PeopleSoft Student Administration System: Course Management Summary Report (S_CMSUMM)
**SSH Productivity**

Student Semester Hour (SSH) Productivity is calculated by dividing actual SSH by the budgeted SSH. SSH productivity decreased during the Fall (0.9) and Spring semesters (0.8), but increased during Summer (0.9) 2011-12 from the previous year, as shown in Figure 5.

![SSH Productivity Graph](image)

*Figure 5: SSH Productivity*

Source: PeopleSoft Student Administration System: Course Management Summary Report (S_CMSUMM)

Note: SSH Productivity data are displayed using two decimal places due to the proximity of the values.
**Performance Metric**

Performance Metric is calculated by dividing actual enrollment by the Equated Credit Hour (ECH), [actual workload]. The Performance Metric remained consistent during the four years reported, with minor increases and decreases. It decreased in Fall (2.3) and Spring (2.1), but increased in Summer (0.8) 2011-12 from the previous year, as shown in Figure 6.

![Performance Metric Chart]

*Figure 6: Performance Metric*

Source: PeopleSoft Student Administration System: Course Management Summary Report (S_CMSUMM)
Grade Distributions

To provide a reference for program performance at the classroom level, grade distributions are provided. Table 1 includes the percentage of students receiving an A, B, C, D, or F in the program core courses. Some course data, such as dual credit courses generally do not end at the same time as the regular campus courses and may be omitted.

Table 1
Program Core Course Grade Distributions

<table>
<thead>
<tr>
<th>Semester</th>
<th>Grade Distributions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>A</td>
</tr>
<tr>
<td>Spring 2011</td>
<td>37.3%</td>
</tr>
<tr>
<td>Spring 2012</td>
<td>45.3%</td>
</tr>
<tr>
<td>Fall 2011</td>
<td>39.1%</td>
</tr>
<tr>
<td>Fall 2012</td>
<td>46.2%</td>
</tr>
</tbody>
</table>

Source: SPC Business Intelligence, Grade Distribution by Academic Org.
Date Extracted 04/23/2013
Figure 7 provides a visual representation of the grade distributions for those students receiving a grade of A, B, or C.

**Figure 7: ABC Grade Distributions**

Source: SPC Business Intelligence, Grade Distribution by Academic Org.

Date Extracted 04/23/2013
Course Success

The Course Success Rate is defined as the percent of students successfully completing the course with a grade of A, B, C, divided by the total number of students in the course. The course success rate remained consistent during the four years reported, decreasing slightly in 2011-12 (90%) from the previous year (92%), as shown in Figure 8.

![Course Success Chart](chart.png)

**Figure 8: Course Success**

Source: SPC Business Intelligence, Success Rate by Academic Org.

Date Extracted 07/27/2012
Program Graduates
The number of AS graduates in the Respiratory Care program remained consistent during the past three years, reaching a four-year high (16) in 2009-10. The number of graduates increased (15) in 2011-12 from the previous year (14), as shown in Figure 9.

![Program Graduates](image)

Figure 9: Program Graduates
Source: 2012-13 SPC Factbook, Table 31
**Fulltime/Adjunct Faculty Ratio**

Table 2 displays the number and percentage of Respiratory Care program equated credit hours (ECHs) taught by the individual faculty classifications. As shown, Fulltime Faculty taught 84.1% of the ECHs in 2011-12 as compared to 84.9% in 2010-11, while Adjunct Faculty taught 15.9% of the ECHs in 2011-12, and 15.1% in 2010-11.

**Table 2**

<table>
<thead>
<tr>
<th></th>
<th>Fulltime Faculty</th>
<th>Percent of Load Faculty</th>
<th>Adjunct Faculty</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number of ECHs</td>
<td>% of Classes Taught</td>
<td>Number of ECHs</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Number of ECHs</td>
</tr>
<tr>
<td>Fall 2008-2009</td>
<td>44.5</td>
<td>76.7%</td>
<td>0.0</td>
</tr>
<tr>
<td>Spring 2008-2009</td>
<td>37.0</td>
<td>67.3%</td>
<td>0.0</td>
</tr>
<tr>
<td>Summer 2008-2009</td>
<td>33.0</td>
<td>64.7%</td>
<td>0.0</td>
</tr>
<tr>
<td>2008-2009 Total</td>
<td>114.5</td>
<td>69.8%</td>
<td>0.0</td>
</tr>
<tr>
<td>Fall 2009-2010</td>
<td>44.5</td>
<td>76.7%</td>
<td>0.0</td>
</tr>
<tr>
<td>Spring 2009-2010</td>
<td>45.0</td>
<td>80.4%</td>
<td>0.0</td>
</tr>
<tr>
<td>Summer 2009-2010</td>
<td>47.0</td>
<td>83.9%</td>
<td>0.0</td>
</tr>
<tr>
<td>2009-2010 Total</td>
<td>136.5</td>
<td>80.3%</td>
<td>0.0</td>
</tr>
<tr>
<td>Fall 2010-2011</td>
<td>49.0</td>
<td>84.5%</td>
<td>0.0</td>
</tr>
<tr>
<td>Spring 2010-2011</td>
<td>47.0</td>
<td>83.9%</td>
<td>0.0</td>
</tr>
<tr>
<td>Summer 2010-2011</td>
<td>56.0</td>
<td>86.2%</td>
<td>0.0</td>
</tr>
<tr>
<td>2010-2011 Total</td>
<td>152.0</td>
<td>84.9%</td>
<td>0.0</td>
</tr>
<tr>
<td>Fall 2011-2012</td>
<td>49.0</td>
<td>84.5%</td>
<td>0.0</td>
</tr>
<tr>
<td>Spring 2011-2012</td>
<td>47.0</td>
<td>83.9%</td>
<td>0.0</td>
</tr>
<tr>
<td>Summer 2011-2012</td>
<td>47.0</td>
<td>83.9%</td>
<td>0.0</td>
</tr>
<tr>
<td>2011-2012 Total</td>
<td>143.0</td>
<td>84.1%</td>
<td>0.0</td>
</tr>
</tbody>
</table>

Source: PeopleSoft Student Administration System: Faculty/Adjunct Ratio Report (S_FACRAT)
The Fulltime/Adjunct Faculty Ratio is calculated by dividing a program’s adjunct’s ECHs by the sum of the Adjunct’s, Percent of Load’s, and Fulltime Faculty’s ECHs. Figure 10 displays the Fulltime/Adjunct Faculty Ratio information for the last four academic years. The highest semester for Adjunct ECHs was Summer 2008-09 in which adjunct faculty taught 35.3% of the program’s course load, as shown in Table 2. The three-semester average for adjuncts (15.9%) in 2011-12 is consistent with the College’s general 65/35 Fulltime/Adjunct Faculty Ratio guideline.

![Full-Time/Adjunct Faculty Ratio Graph](image)

*Figure 10: Full-time/Adjunct Faculty Ratio*

*Source: PeopleSoft Student Administration System: Faculty/Adjunct Ratio Report (S_FACRAT)*
Program Profitability

Relative Profitability Index (RPI-T)
Relative Profitability Index (RPI-T) is a measure of program profitability. It is calculated by dividing a program’s income by the sum of its personnel expenses and current expenses. Only Fund 10 financials are used in the calculation of RPI-T; specifically, program revenues (GL 400000), personnel expenses (GL 500000), and current expenses (GL 600000).

Program revenues (GL 400000) can include (1) student application fees and tuition, (2) out of state fees, and (3) gifts from alumni and charitable organizations.

Personnel expenses (GL 500000) can include (1) personnel salary expenses for program management, and instructional staff, (2) personnel salary expenses for OPS and student assistants, and (3) personnel benefits. Personnel assigned to multiple programs may have partial personnel expenses assigned to an individual program.

Current expenses (GL 600000) can include operating expenses for (1) travel, (2) goods and services, and (3) materials and supplies. Current expenses can also include scholarship and fee waivers.
The RPI-T for the Respiratory Care program remained consistent during the four years reported, increasing slightly in 2011-12 from the previous year, as shown in figure 11.

Figure 11: Fiscal Summary

Source: PeopleSoft Financial Production System: Summary of Monthly Organization Budget & Actuals Status Report (ORGBUDA1) from End of Fiscal Year

Note: RPI data are displayed using two decimal places due to the proximity of the values.
Program Improvements

Capital Expenditures

There were no Capital Expenditures (Fund 10 and 16) for the Respiratory Care program (Org: 11230108) during the past three years, as shown in Table 3.

Table 3
Respiratory Care Program Capital Expenditures

<table>
<thead>
<tr>
<th>Year</th>
<th>Capital Outlay</th>
<th>Account</th>
<th>Purchase Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009-10</td>
<td>0</td>
<td>700000</td>
<td></td>
</tr>
<tr>
<td>2010-11</td>
<td>0</td>
<td>700000</td>
<td></td>
</tr>
<tr>
<td>2011-12</td>
<td>0</td>
<td>700000</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: PeopleSoft Financial Production System: Summary of Monthly Organization Budget & Actuals Status Report (ORGBUDA1) from End of Fiscal Year
Academic Outcomes

As part of SPC quality improvement efforts, academic assessments are conducted on each AAS/AS/BS/BAS program every three years to evaluate the quality of the program’s educational outcomes. The Respiratory Care program was evaluated through an Academic Program Assessment Report (APAR) in 2009-10.

Each of the program’s three Program Learning Outcomes (PLOs) was evaluated during the 2009-10 assessment. Each of the three PLOs is listed below:

1. Clinical and didactic emphasis on clinical data using the NBRC content matrix.
2. Clinical and didactic emphasis on equipment using the NBRC matrix.
3. Clinical and didactic emphasis on therapeutic procedures using the NBRC matrix.

Means of Assessment

The purpose of the End of Program assessment is to make summative interpretations for program improvement.

The Respiratory Care (AS) program used the results of the National Board for Respiratory Care (NBRC) Entry-Level Exam to evaluate the students. The criteria for success stated that SPC candidate mean scores should be at or above 90% of new candidate national means for all content categories.

Data were collected during 2007, 2008 and 2009. The data findings for each PLO are displayed in Tables 4, 5, and 6. With the exception of several subcategories under PLOs 2 and 3, all of the means scores exceeded the national rate and met the criteria for success.
Table 4
Respiratory Care Assessment Results for PLO 1

| Source: Academic Outcomes from 2009-10 Academic Program Assessment Report (APAR) |

<table>
<thead>
<tr>
<th>New Candidate Summary for PLO 1</th>
<th>Subcategory 1A- Review existing data in patient record</th>
<th>Subcategory 1B- Collect and evaluate information</th>
<th>Subcategory 1C- Recommend Procedures to Obtain additional data</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007-08</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of students</td>
<td>14</td>
<td>14</td>
<td>N/A</td>
</tr>
<tr>
<td>Maximum score</td>
<td>6.0</td>
<td>19.0</td>
<td>N/A</td>
</tr>
<tr>
<td>Average Score</td>
<td>4.8</td>
<td>14.9</td>
<td>N/A</td>
</tr>
<tr>
<td>National Mean</td>
<td>4.3</td>
<td>13.8</td>
<td>N/A</td>
</tr>
<tr>
<td>% of National mean</td>
<td>113%</td>
<td>107%</td>
<td>N/A</td>
</tr>
<tr>
<td>2008-09</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of students</td>
<td>9</td>
<td>9</td>
<td>N/A</td>
</tr>
<tr>
<td>Maximum score</td>
<td>6.0</td>
<td>19.0</td>
<td>N/A</td>
</tr>
<tr>
<td>Average Score</td>
<td>5.4</td>
<td>13.9</td>
<td>N/A</td>
</tr>
<tr>
<td>National Mean</td>
<td>4.3</td>
<td>13.8</td>
<td>N/A</td>
</tr>
<tr>
<td>% of National mean</td>
<td>128%</td>
<td>100%</td>
<td>N/A</td>
</tr>
<tr>
<td>2009</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of students</td>
<td>16</td>
<td>16</td>
<td>16</td>
</tr>
<tr>
<td>Maximum score</td>
<td>4.0</td>
<td>18.0</td>
<td>4.0</td>
</tr>
<tr>
<td>Average Score</td>
<td>3.1</td>
<td>12.4</td>
<td>2.9</td>
</tr>
<tr>
<td>National Mean</td>
<td>2.7</td>
<td>12.0</td>
<td>2.8</td>
</tr>
<tr>
<td>% of National mean</td>
<td>114%</td>
<td>104%</td>
<td>104%</td>
</tr>
</tbody>
</table>

Source: Academic Outcomes from 2009-10 Academic Program Assessment Report (APAR)

Respiratory Care
2012-13 Comprehensive Academic Program Review
Institutional Research and Effectiveness

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### Table 5
Respiratory Care Assessment Results for PLO 2

<table>
<thead>
<tr>
<th></th>
<th>Subcategory 2A-Select, assemble, and use equipment</th>
<th>Subcategory 2B-Ensure infection control</th>
<th>Subcategory 2C-Perform equipment quality control</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2007-08</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of students</td>
<td>14</td>
<td>14</td>
<td>14</td>
</tr>
<tr>
<td>Maximum score</td>
<td>25.0</td>
<td>2.0</td>
<td>3.0</td>
</tr>
<tr>
<td>Average Score</td>
<td>16.6</td>
<td>1.6</td>
<td>1.8</td>
</tr>
<tr>
<td>National Mean</td>
<td>17.7</td>
<td>1.3</td>
<td>1.7</td>
</tr>
<tr>
<td>% of National mean</td>
<td>94%</td>
<td>126%</td>
<td>103%</td>
</tr>
<tr>
<td><strong>2008-09</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of students</td>
<td>9</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>Maximum score</td>
<td>25.0</td>
<td>2.0</td>
<td>3.0</td>
</tr>
<tr>
<td>Average Score</td>
<td>17.8</td>
<td>1.6</td>
<td>1.7</td>
</tr>
<tr>
<td>National Mean</td>
<td>17.7</td>
<td>1.3</td>
<td>1.7</td>
</tr>
<tr>
<td>% of National mean</td>
<td>100%</td>
<td>120%</td>
<td>97%</td>
</tr>
<tr>
<td><strong>2009</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of students</td>
<td>16</td>
<td>16</td>
<td>16</td>
</tr>
<tr>
<td>Maximum score</td>
<td>22.0</td>
<td>3.0</td>
<td>4.0</td>
</tr>
<tr>
<td>Average Score</td>
<td>14.6</td>
<td>2.3</td>
<td>2.4</td>
</tr>
<tr>
<td>National Mean</td>
<td>15.3</td>
<td>2.0</td>
<td>2.5</td>
</tr>
<tr>
<td>% of National mean</td>
<td>95%</td>
<td>117%</td>
<td>99%</td>
</tr>
</tbody>
</table>

Source: Academic Outcomes from 2009-10 Academic Program Assessment Report (APAR)
Table 6
Respiratory Care Assessment Results for PLO 3

<table>
<thead>
<tr>
<th>New Candidate Summary for PLO 3</th>
<th>2007-08</th>
<th>2008-09</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3A</td>
<td>3B</td>
<td>3C</td>
</tr>
<tr>
<td>Number of students</td>
<td>14</td>
<td>14</td>
<td>14</td>
</tr>
<tr>
<td>Average Score</td>
<td>5.4</td>
<td>4.2</td>
<td>1.6</td>
</tr>
<tr>
<td>National Mean</td>
<td>5.0</td>
<td>3.4</td>
<td>1.9</td>
</tr>
<tr>
<td>% of National mean</td>
<td>110%</td>
<td>122%</td>
<td>81%</td>
</tr>
<tr>
<td></td>
<td>6A</td>
<td>6B</td>
<td>6C</td>
</tr>
<tr>
<td>Number of students</td>
<td>9</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>Average Score</td>
<td>5.3</td>
<td>3.6</td>
<td>1.7</td>
</tr>
<tr>
<td>National Mean</td>
<td>5.0</td>
<td>3.4</td>
<td>1.9</td>
</tr>
<tr>
<td>% of National mean</td>
<td>108%</td>
<td>103%</td>
<td>87%</td>
</tr>
<tr>
<td></td>
<td>7A</td>
<td>7B</td>
<td>7C</td>
</tr>
<tr>
<td>Number of students</td>
<td>16</td>
<td>16</td>
<td>16</td>
</tr>
<tr>
<td>Average Score</td>
<td>3.3</td>
<td>5.0</td>
<td>2.9</td>
</tr>
<tr>
<td>National Mean</td>
<td>3.3</td>
<td>5.0</td>
<td>2.5</td>
</tr>
<tr>
<td>% of National mean</td>
<td>99%</td>
<td>99%</td>
<td>117%</td>
</tr>
</tbody>
</table>

Source: Academic Outcomes from 2009-10 Academic Program Assessment Report (APAR)
The 2009-10 follow-up report was completed in April 2011. All of the action items were successfully completed, and the results published in the 2009-10 follow-up report. The next assessment report is scheduled to be completed during the 2012-13 academic year.
Stakeholder Perceptions

**Student Survey of Instruction (SSI)**

Each semester, St. Petersburg College (SPC) administers the Student Survey of Instruction. Students are asked to provide feedback on the quality of their instruction using a 7-point scale where 7 indicates the highest rating and 1 indicates the lowest rating.

The purpose of the SSI survey is to acquire information on student perception of the quality of courses, faculty, and instruction, and to provide feedback information for improvement.

Beginning in Fall 2008, all SSI forms (except Clinical B) have been administered electronically using an online format. During 2009-10, the SSI items were reviewed and revised by a committee composed of faculty and administrators. As a result of the revision process, the lecture, non-lecture, and eCampus forms were consolidated into one form, independent of modality, which has been administered online since Spring 2010.

As part of the instrument validation process, the results from the SSI over the last few years were assessed for reliability and validity. The results of this assessment suggested three underlying factors.

The three factors are faculty engagement, preparation and organization, and course instruction. The survey questions are grouped into these categories as defined below:

- **Faculty Engagement** - focuses on how successful the instructor was in encouraging student performance, the instructor’s level of enthusiasm for the subject and respect for students, how well the instructor applied the stated grading policies including providing students appropriate information to determine their grades, and the instructor’s responsiveness to student questions outside of the classroom.

- **Preparation and Organization** - focuses on the instructor’s overall preparation for the course, the instructor’s ability to start and end class on time, the amount of time spent on course-related activities by
the instructor, and the even assignment and appropriateness of course material throughout the term.

- **Course Instruction** - focuses on the instructor’s clarity of instruction, how well the course objectives were defined by the instructor, and how well the instructor met student expectations.

**SSI Results**
The SSI survey is electronically distributed to all students enrolled in traditional classroom sections, lab courses and self-paced or directed individual study, and online courses at the College. The average scores are all well above the traditional threshold (an average of 5.0) used by the College for evaluating seven-point satisfaction scales during both semesters. The average survey results by semester and content area are shown in Figure 12. The SSI survey administration is optional during Summer semester, thus only Fall and Spring results are presented in this report.

![Figure 12: SSI Results](image)

**Source:** Student Survey of Instruction Administration Site
Summary
All the individual average content area scores were above the traditional threshold (an average of 5.0) used by the College for evaluating seven-point satisfaction scales. These results suggest general overall satisfaction with the courses within the Respiratory Care program; specifically, as they relate to faculty engagement, preparation and organization, and course instruction.
Advisory Committee

Community input and participation is an important component of the educational process at the College. The advisory committees are an example of community input. Advisory committees meet a minimum of twice annually with additional meetings as needed for good program coordination.

Advisory committee members are appointed by the College President to serve a one-year term of office and must have a demonstrated competency in the program specialty area or an understanding of the program and of the community at large. An exception to the above may be a lay person directly involved in a related program field such as counseling, public relations, or administration of a business or industry.

Specific Functions of Advisory Committees are:

1. Assessing how the program meets the current occupational needs of employers.

2. Reviewing and making recommendations on the program curriculum and equipment.

3. Providing input to help prepare students for work in their chosen field.

4. Assisting in recruiting, providing internships, and in placing qualified graduates in appropriate jobs.

5. Expanding and enhancing St. Petersburg College’s reputation in the community by fostering positive community relationships.

6. Approving all program equipment purchases in excess of $999.99.
Recent Meeting Summary
A Respiratory Care advisory committee meeting was held on March 20, 2013. The meeting consisted of a discussion pertaining to a program update, a lab equipment update, enrollment, the baccalaureate program, and clinical status.

Program Update
Ed MacManus is no longer the director at ACH and has resigned as chair of the advisory committee. Mark Pellman was elected as chair.

Lab Equipment Update
It was suggested that a Respironics V60 be purchased for use by faculty. As such, a motion to authorize the purchase was made, seconded, and carried.

Enrollment
As of August 2012, 17 out of 22 freshmen students who matriculated are still enrolled. Three were lost to academic attrition and two others for personal reasons. No CRT students matriculated in January 2012.

As for sophomores, 16 out of 24 students that matriculated in August 2010 remained in the program. Six were lost to academic attrition and two others for personal reasons. One was expected to graduate with the 2013 class.

Baccalaureate Program
Steve Hardt reported that starting in August SPC would begin offering an online baccalaureate degree in Health Services Administration with a concentration in Respiratory Care.

Since this degree will be for those who already hold the RRT credential, there will be no on campus or clinical requirements. Beginning in April 2013, the college was expected to market the program via postcard mailing, social media, attending CEU offerings, and speaking to graduating classes of local RRT programs.

Clinical Status
In Clinical Practice 5, 17 students are currently enrolled. The sophomores continue critical care and basic care rotations at Bayfront
Medical, Tampa General Hospital, and Sarasota Memorial. For Clinical Practice 2, 18 students were enrolled. The freshmen continue patient evaluation and basic care at four facilities. Other specialty rotations include neonatal and pediatric care, pulmonary rehabilitation, and sleep lab.

The complete committee minutes along with the minutes from previous meetings are located in Appendices B, C, and D.
Recent Alumni Survey Information

Fourteen Alumni Surveys were provided to the 2010-11 graduates of the Respiratory Care program. Responses were received from 4 A.S. graduates.

Twenty-nine percent of graduates surveyed responded to the survey (4 of 14). None of the respondents provided permission to contact their employers, so no employer surveys were sent out. Not all respondents answer every survey question; therefore, the percentages listed below represent the responses to each survey question in relation to the total number of responses received for each question.

Notable results include:

- 75.0% of recent graduate survey respondents, who were employed, were employed full-time.
- 100.0% of recent graduate survey respondents had a current position related to their studies.
- 50.0% of recent graduate survey respondents indicated their main goal in completing a degree or certificate at SPC was to “Change career fields”; 25.0% “Obtain employment”; while the remaining 25.0% selected “Continue my education.”
- 75.0% of recent graduate survey respondents indicated that their SPC degree allowed them to “Obtain employment”; 50.0% “Change career fields”; 50.0% “Earn more money”; 50.0% “Continue my education”; and 25.0% “Meet certification/training needs”. [Note: The total may exceed 100% as this question allows multiple responses]
- 25.0% of recent graduate survey respondents indicated that SPC did “Exceptionally well” in helping them meet their goal; and 75.0% “Very well”.
- 100.0% of recent graduate survey respondents indicated that they earned between $20.00 and $24.99 per hour ($42,000 - $51,999 annually).
- 0.0% of recent graduate survey respondents indicated they are continuing their education.
- 100.0% of recent graduate survey respondents would recommend SPC’s Respiratory Care program to another.
- An evaluation of Respiratory Care graduates’ general education outcomes is displayed in Table 7. Graduates indicated high levels of satisfaction with their college preparation in the area of general
education outcomes. Five outcomes received a mean score of 4.5. Sixteen outcomes received mean scores between 4.0 and 4.3, three received mean scores between 3.7 and 3.8, while one received a mean score of 3.3.
Table 7
College Preparation Ratings for Recent Respiratory Care Program Graduates

<table>
<thead>
<tr>
<th>General Education Outcomes</th>
<th>Item Ratings</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Five point rating scale with five being the highest)</td>
<td>N</td>
</tr>
<tr>
<td>Communicating clearly and effectively with others through:</td>
<td></td>
</tr>
<tr>
<td>Speaking</td>
<td>4</td>
</tr>
<tr>
<td>Listening</td>
<td>3</td>
</tr>
<tr>
<td>Reading</td>
<td>3</td>
</tr>
<tr>
<td>Writing</td>
<td>3</td>
</tr>
<tr>
<td>Your use of mathematical and computational skills:</td>
<td></td>
</tr>
<tr>
<td>Comfort with mathematical calculations</td>
<td>4</td>
</tr>
<tr>
<td>Using computational skills appropriately</td>
<td>3</td>
</tr>
<tr>
<td>Accurately interpreting mathematical data</td>
<td>3</td>
</tr>
<tr>
<td>Using the following forms of technology:</td>
<td></td>
</tr>
<tr>
<td>Email</td>
<td>4</td>
</tr>
<tr>
<td>Word Processing</td>
<td>4</td>
</tr>
<tr>
<td>Spreadsheets</td>
<td>4</td>
</tr>
<tr>
<td>Databases</td>
<td>4</td>
</tr>
<tr>
<td>Internet Research</td>
<td>4</td>
</tr>
<tr>
<td>Thinking logically and critically to solve problems:</td>
<td></td>
</tr>
<tr>
<td>Gathering and assessing relevant information</td>
<td>4</td>
</tr>
<tr>
<td>Inquiring about and interpreting information</td>
<td>4</td>
</tr>
<tr>
<td>Organizing and evaluating information</td>
<td>4</td>
</tr>
<tr>
<td>Analyzing and explaining information to others</td>
<td>4</td>
</tr>
<tr>
<td>Using information to solve problems</td>
<td>4</td>
</tr>
</tbody>
</table>
### Table 7, continued

**College Preparation Ratings for Recent Respiratory Care Program Graduates**

| General Education Outcomes (Five point rating scale with five being the highest) | Item Ratings |
|---|---|---|
| | N | Mean | SD |
| **Working effectively with others in a variety of settings:** | | | |
| Participating as a team player (e.g., group projects) | 4 | 4.3 | 0.5 |
| Working well with individuals from diverse backgrounds | 4 | 4.3 | 0.5 |
| Using ethical courses of action | 4 | 4.5 | 0.6 |
| Demonstrating leadership skills | 4 | 4.3 | 0.5 |
| **Appreciating the importance of lifelong learning:** | | | |
| Showing an interest in career development | 4 | 4.3 | 0.5 |
| Being open to new ideas and challenges | 4 | 4.3 | 0.5 |
| Willingness to take on new responsibilities | 4 | 4.3 | 0.5 |
| Pursuing additional educational opportunities | 4 | 4.3 | 0.5 |

**Employer Survey Information**

Employer Surveys are sent out based on the permission provided by recent graduates in the 2009-10 recent alumni survey. Since permission was not received from recent graduates, there is no Employer Survey information available.
Occupation Profile

One occupation description was located in the Bureau of Labor Statistics for the Respiratory Care program. The occupation description title was Respiratory Therapists.

Occupation Description

The occupation description for Respiratory Therapists 29-1126 used by the Bureau of Labor Statistics is shown below:

Assess, treat, and care for patients with breathing disorders. Assume primary responsibility for all respiratory care modalities, including the supervision of respiratory therapy technicians. Initiate and conduct therapeutic procedures; maintain patient records; and select, assemble, check, and operate equipment.

US, State, and Area Wage Information

The distribution of 2011 wage information for Respiratory Therapists is located in Table 8. The median yearly income for Respiratory Therapists was $55,200 in the United States and $51,500 in Florida. The wage information is divided by percentiles for hourly and yearly wages. This information is also separated by location.

Table 8
Wage Information for Respiratory Therapists

<table>
<thead>
<tr>
<th>Location</th>
<th>Pay Period</th>
<th>10%</th>
<th>25%</th>
<th>Median</th>
<th>75%</th>
<th>90%</th>
</tr>
</thead>
<tbody>
<tr>
<td>United States</td>
<td>Hourly</td>
<td>$19.55</td>
<td>$22.63</td>
<td>$26.56</td>
<td>$31.29</td>
<td>$35.77</td>
</tr>
<tr>
<td></td>
<td>Yearly</td>
<td>$40,700</td>
<td>$47,100</td>
<td>$55,200</td>
<td>$65,100</td>
<td>$74,400</td>
</tr>
<tr>
<td>Florida</td>
<td>Hourly</td>
<td>$19.52</td>
<td>$21.55</td>
<td>$24.77</td>
<td>$27.93</td>
<td>$31.47</td>
</tr>
<tr>
<td></td>
<td>Yearly</td>
<td>$40,600</td>
<td>$44,800</td>
<td>$51,500</td>
<td>$58,100</td>
<td>$65,500</td>
</tr>
</tbody>
</table>

Source: Bureau of Labor Statistics, Occupational Employment Statistics Survey; Florida Agency for Workforce Innovation
National, State, and County Trends

Employment trend information for Respiratory Therapists is included in Table 9 and divided by country and state. An average annual increase (22% - 28%) in employment for the profession over the next 5 - 7 years for the country and state is shown.

Table 9
State and National Trends

<table>
<thead>
<tr>
<th>United States</th>
<th>Employment</th>
<th>Percent Change</th>
<th>Job Openings ¹</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2010</td>
<td>2020</td>
<td></td>
</tr>
<tr>
<td>Respiratory Therapists</td>
<td>112,700</td>
<td>143,900</td>
<td>+28%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Florida</th>
<th>Employment</th>
<th>Percent Change</th>
<th>Job Openings ¹</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2008</td>
<td>2018</td>
<td></td>
</tr>
<tr>
<td>Respiratory Therapists</td>
<td>6,400</td>
<td>7,800</td>
<td>+22%</td>
</tr>
</tbody>
</table>

¹Job Openings refers to the average annual job openings due to growth and net replacement.

**Major Employers**

The major employers of SPC’s Respiratory Care graduates are All Children’s Hospital, Bayfront Medical Center, Blake Hospital, Largo Hospital, Manatee Memorial Hospital, Mease Country Side Hospital, Morton Plant Hospital, Sarasota Memorial Hospital, St. Joseph’s Hospital, Tampa General Hospital.

**Table 10**  
**Major Employers**

<table>
<thead>
<tr>
<th>Major Employers of Respiratory Care Graduates</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Children’s Hospital</td>
</tr>
<tr>
<td>Bayfront Medical Center</td>
</tr>
<tr>
<td>Blake Hospital</td>
</tr>
<tr>
<td>Largo Hospital</td>
</tr>
<tr>
<td>Manatee Memorial Hospital</td>
</tr>
<tr>
<td>Mease Country Side Hospital</td>
</tr>
<tr>
<td>Morton Plant Hospital</td>
</tr>
<tr>
<td>Sarasota Memorial Hospital</td>
</tr>
<tr>
<td>St. Joseph’s Hospital</td>
</tr>
<tr>
<td>Tampa General Hospital</td>
</tr>
</tbody>
</table>

Source: 2010-11 Alumni Survey and Program Administrator Input
**Total Placement**

Total Placement is the percentage of students who have an acceptable placement after graduation. Acceptable placement includes students who are enlisted in the military, continuing their education, and/or employed in their field within the first year of graduation. Only students with A.S. and A.A.S degrees are used in the calculation. The Total Placement in the Respiratory Care program has remained at 100% for the past four years, as shown in Figure 13.

*Figure 13: Total Placement*

Source: 2012-13 SPC Factbook, Table 38
State Graduates Outcomes

To provide reference information for the employment trend data, program graduate state outcome data are provided for all academic programs included within Respiratory Care. Respiratory Care program graduate state outcome data are provided in Table 11.

Two hundred and twenty-eight students completed a state Respiratory Care program in 2009-10, of those one hundred and eighty-five had some matching state data and were employed. Eighty-seven percent (87%) of those state graduates were employed at least a full quarter as depicted in Table 11.

Table 11
Respiratory Care Program Graduates 2009-10 Outcomes by Florida Community College

<table>
<thead>
<tr>
<th>Florida Community College</th>
<th>Total Completers</th>
<th># Found Employed</th>
<th># Employed for a Full Qtr</th>
<th>% Employed For a Full Qtr</th>
<th>FETPIP Pool</th>
<th># Training Related (Employed, Education, or Military)</th>
<th>Placement Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Edison State College</td>
<td>24</td>
<td>19</td>
<td>19</td>
<td>100%</td>
<td>19</td>
<td>17</td>
<td>89%</td>
</tr>
<tr>
<td>Florida State College at Jacksonville</td>
<td>13</td>
<td>10</td>
<td>9</td>
<td>90%</td>
<td>10</td>
<td>10</td>
<td>100%</td>
</tr>
<tr>
<td>Indian River State College</td>
<td>10</td>
<td>10</td>
<td>10</td>
<td>100%</td>
<td>10</td>
<td>9</td>
<td>90%</td>
</tr>
<tr>
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Source: Florida Education and Training Placement Information Program (FETPIP), Community College Vocational Reports (http://www.fldoe.org/fetpip/pdf/0910pdf/fcs0910asc.pdf)
Program Administrator’s Perspective: Issues, Trends, and Recent Successes

The data in this report clearly show that the St. Petersburg College’s (SPC) Respiratory Care program continues its long tradition of success. SSI scores remain significantly above the college’s average; 100% of graduates surveyed stated the program did “exceptionally well” or “very well”, and 100% of them would recommend the program. In addition, the program’s graduates continue to score significantly higher than the national average on credentialing exams, and the graduate placement rate in the field remains at 100%, which is tied for the top ranking in the state.

It is also interesting to note that the outcomes achieved in this period included no student pools selected through a selective admissions process. This is unusual, as a majority of Respiratory Care programs employ selective admissions. I look forward to monitoring the impact of the program’s gradual switch to a selective admissions process on the outcomes discussed here.

Another point of note is that none of the graduates who responded had plans to continue their education. This may be due to the fact that during the survey period included in this report, there were very few options for graduates to continue their education in the field, as additional baccalaureate programs are sorely needed. Fortunately, SPC has responded to this need and will begin offering a baccalaureate degree in Health Services Administration in Respiratory Care in October, 2013. I look forward to monitoring the impact of this new degree offering regarding this data point.

In addition, it should be noted that the program may see future increases in the percent of courses taught by adjuncts. This increased use of adjuncts, at least in the short term, will likely be required as the program adjusts to the recent death of program director Steve Mikles, who carried a significant teaching load.
Program Action Plan

Program: Respiratory Care

Date Completed: November 2012

Prepared By: Steve Mikles

I. Action Plan Items:

<table>
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<th>Action Item</th>
<th>Measure Addressed (Value)</th>
<th>Completion Date</th>
<th>Responsible Party</th>
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<td>Track the effect on retention of using a selective admission process for admission to the program.</td>
<td>Program Graduates, Retention</td>
<td>July 2014</td>
</tr>
</tbody>
</table>

| 2           | Participate in interdisciplinary activities with other programs at HEC. | Program Graduates, Retention | July 2014 | Phil Nicotera |

II. Special Resource Needed: None
III. Area(s) of Concern/Improvement:

Health programs are regulated by specialized accreditation which places limits on class size, student/faculty ratios, and enrollment. This has an impact on the relative fiscal profitability of these programs. Additional requirement are placed on attrition and graduation rates, and the health programs exceed all of these benchmarks.

[Signature]
Phil Nicotera, Provost

[Date]
8/11/13
Academic Affairs Committee Review

Summary of observations, recommendations, and decisions:
References
Retrieved October 2002, from the Division of Community Colleges

Contact Information

*Please address any questions or comments regarding this evaluation to:*

Sabrina Crawford, M.A.
Executive Director, Institutional Research and Effectiveness
St. Petersburg College, P.O. Box 13489, St. Petersburg, FL 33733
(727) 341-3118
crawford.sabrina@spcollege.edu
Appendix A: Program Overview, 2012

RESPIRATORY CARE
ASSOCIATE IN SCIENCE DEGREE
(RESC-AS)
Paramedic/EMS Transitional Program
(Transferable to a Bachelor's degree in Health Services Administration at SPC)

Program begins in August

Before entering the first term of the Respiratory Care "program courses" students must complete a minimum of 12 credits from the general education and/or support courses listed below including BSC 2085 and BSC 2086 with a grade of "C" or better. General education and support courses do not have to be completed in the order listed below. Candidates will also complete the Health Programs Application form. Please see a counselor or advisor.

**GENERAL EDUCATION COURSES (18 credits)**

**ENC 1101** Composition I or (Honors) 3

**SPC 1017** Introduction to Speech Communication OR (SPC 1017H, 1065, 1605 or 1906H) 3

**Humanities/Fine Arts Approved Course**** 3

**Mathematics** One college-level MAC, MAP, MAS, MGF, MTG or STA prefix 3

**Social & Behavioral Sciences Approved Course**** 3

**PHI 1600** Studies in Applied Ethics OR (PHI 1602H, 1631, 2635 or 2649) 3

**Computer/Information Literacy Competency Requirement**

**SUPPORT COURSES (12 credits)**

**BSC 2085** Human Anatomy & Physiology I 3

**BSC 2086** Human Anatomy & Physiology Laboratory I 1

**BSC 2088** Human Anatomy & Physiology II 3

**BSC 2089L** Human Anatomy & Physiology Laboratory II 1

**CHM 1025** Introductory Chemistry 3

**CHM 1025L** Introductory Chemistry Lab 1

**ADVANCED PLACEMENT CREDIT**

**PROGRAM COURSES**

**1st TERM (6 credits)**

**RET 1057** Respiratory Pharmacology 3

**RET 1024** Fundamentals of Respiratory Care 3

**2nd TERM (6 credits)**

**RET 1254** Principles of Mechanical Ventilation 3

**RET 1465** Cardiopulmonary Physiology 3

**3rd TERM (6 credits)**

**RET 2284** Advanced Modalities and Monitoring 2

**RET 2878L** Clinical Practice III 4

**4th TERM (11 credits)**

**RET 2414** Diagnostic Procedures and Pulmonary Rehabilitation 3

**RET 2450** Cardiopulmonary Assessment 2

**RET 2484** Pulmonary Disease 2

**RET 2877L** Clinical Practice IV 4

**5th TERM (9 credits)**

**RET 2244** Life Support 1

**RET 2714** Neonatal-Pediatric Respiratory Care 2

**RET 2878L** Clinical Practice V 4

**RET 2885** Medical-Surgical Aspects of Respiratory Care 2

**6th TERM (4 credits)**

**RET 2878L** Clinical Practice VI 4

**TOTAL PROGRAM HOURS**

76

****To provide students with an enhanced world view in light of an increasingly globalized economy, students must include at least one of the following courses as part of the general education requirements for the Associate in Science degree:

**LIT 2110** World Literature I 3

**LIT 2110H** Honors World Literature I 3

**LIT 2120** World Literature II 3

**LIT 2120H** Honors World Literature II 3

**HUM 2270** Humanities (East-West Synthesis) 4

**HUM 2270H** Honors Humanities (East-West Synthesis) 4

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Appendix B: Advisory Board Committee Minutes and Recommendations, 2012-13

ST. PETERSBURG COLLEGE
Respiratory Care Program
ADVISORY MEETING MINUTES
March 20, 2013

Present:
Mark Pellman Sarasota Memorial Hospital- Chair
Shirley Westrate ALA Public Rep.
Traci Klauka Largo Medical Center
Tim Luba Bayfront Medical
Michelle Maher Mease Countryside/ Dunedin
Dr. Anthony Ottaviani SPC Program Medical Director
Nancy Kelley SPC Associate Provost
Krista Fusari SPC Academic/ Student Affairs
Stephen Mikles SPC Program Director
Dan Craddock SPC Director of Clinical Education
Steve Hardt SPC Assistant Professor
Brent Noble Freshmen Representative
Margie Quinn Sophomore Representative

I. Introduction and Approval of Minutes

Michelle Maher called the meeting to order @ 2:40 pm. Mark Pellman motioned and was seconded by Shirley Westrate to approve the minutes of the April 4, 2012 meeting without correction. Motion carried.

II. Reports and Discussion

PROGRAM UPDATE

ELECTION OF NEW CHAIR

Ed MacManus is no longer the director at ACH and has resigned as chair of the advisory committee. Mark Pellman was elected as chair.

PROGRAM GOAL & COMPETENCIES ANNUAL REVIEW

The program goal and competencies were distributed and approved as written. A motion to approve the program goal and competencies was made by Michelle Maher and seconded by Traci Klauka. Motion carried.
Appendix B: Advisory Board Committee Minutes and Recommendations, 2012-13, cont.

LAB EQUIPMENT UPDATE

Capital Equipment

Steve Hardt reported that it may be wise to purchase a Respirronics V60. Many members of the committee indicated that they are currently using V60s in their facilities, and it may eventually replace the Vision.

A motion was made to authorize the purchase of a V60 by Michelle Maher was seconded by Tim Luba. Motion carried.

ENROLLMENT

Freshmen – 17 of 22 students who matriculated in August 2012 are still enrolled. Three were lost to academic attrition. Two were lost for personal reasons. No CRT students matriculated in January 2012.

Sophomores – 16 of 24 students that matriculated in August 2010 remain in the program. Six were lost to academic attrition. Two were lost for personal reasons. One will graduate with the 2013 class.

Applications for the August 2013 class will be accepted from March 15-May 1. There are still a few waiting list students that will start in August.

NBRC EXAMINATION RESULTS

2012 CRT Credentialed Graduates

12 of 12 (100%) of the 2012 graduates have obtained their CRT credential. All passed on their 1st attempt.

ELE Content Results - % of National Mean for New Candidates

Data 112%
Equipment 102%
Procedures 104%

2012 RRT Credentialed Graduates

12 of 12 (100%) of the 2012 graduates have obtained their RRT credential.
Appendix B: Advisory Board Committee Minutes and Recommendations, 2012-13, cont.

CoARC RCS 2012

Page 8 of the 2012 CoARC Report of Current Status was distributed and the thresholds for attrition, job placement, CRT credentialing success and overall graduate/employer satisfaction were discussed. Page 9 of the 2012 CoARC Report of Current Status was distributed and the RAM summary was discussed.

MARKET DATA – Co-ARC EMPLOYER & GRADUATE SURVEYS

State market data figures were reviewed. Employer surveys will be sent out next week. Graduate surveys were sent out earlier this year. 11 of 11 surveys were returned and all items were rated at or above the cut score of 3.

PERSONNEL RESOURCE SURVEYS

The program personnel resource assessment surveys were distributed at the meeting this year. Members not in attendance will be sent the survey electronically.

BACCALAUREATE PROGRAM – HSA Sub-plan in Respiratory Care

Baccalaureate Program

Steve Hardt reported that starting in August of SPC will begin offering an online baccalaureate degree in Health Services Administration with a concentrate in Respiratory Care. This is a sub plan of the college’s existing degree in Health Services Administration.

The Respiratory classes will include:

- Advanced Neonatal and Pediatrics
- Advanced Cardiopulmonary Medicine
- Advanced Cardiopulmonary Pathophysiology
- Evidence Based Medicine in Respiratory Care

Since this degree will be for those who already hold the RRT credential, there will be no on campus or clinical requirements. Beginning in April, 2013 the college will begin marketing the program via postcard mailings, social media, attending CEU offerings, and speaking to graduating classes of local RRT programs.
Appendix B: Advisory Board Committee Minutes and Recommendations, 2012-13, cont.

Curriculum Update

NBRC Content Matrices

Steve Hardt reported that program curriculum is reviewed on an ongoing basis, and part of that review includes a thorough review of the NBRC CRT and RRT content matrices. This review is completed to ensure that all subject areas are covered in the program’s didactic and clinical curriculum. A portion of a sample matrix was reviewed by the members of the committee.

Clinical Status

Sophomores

Clinical Practice 5 –
17 students currently enrolled. The sophomores continue critical care and basic care rotations at Bayfront Medical, Tampa General Hospital, and Sarasota Memorial.

Specialty Rotations

Neonatal and pediatric care rotations at All Children’s Hospital and Tampa General.

Pulmonary Rehabilitation Rotations at Bay Pines VA, Mease Countryside, Morton Plant Hospital and Sarasota Memorial.

Sleep Lab Rotations at Mease Countryside and Tampa General Hospital.

Freshmen

Clinical Practice 2 –
18 students enrolled. The freshmen continue patient evaluation and basic care at four facilities: Bayfront Medical Center, Morton Plant Hospital, Manatee Memorial, and St. Anthony’s.

Facility Evaluations

Please note that overall ratings are based on the number of students participating and with such small numbers the rating can be strongly influenced by a single student. Copies of the student evaluation summaries will be given to you today before you leave.

Respiratory Care
2012-13 Comprehensive Academic Program Review
Institutional Research and Effectiveness

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Appendix B: Advisory Board Committee Minutes and Recommendations, 2012-13, cont.

As always we appreciate all that the department managers and all that their staff do in providing our students with the clinical experiences that would not happen without their continued support.

**Student Report**

**Freshmen** – Brent Noble

All is going well for the freshmen class and they are especially enjoying clinical time.

**Sophomores** – Margie Quinn

The sophomore would like to be able to spend more time in clinicals. Many times after the students leave additional procedures involving their patients are performed and feel they are missing a lot of these events.

The students are excited to know that the end is near however, they are also cautious about what the future holds for them. As for now they are just working on getting through the next couple months and passing board exams, not to mention trying to find a job.

III. **New Business** – None

IV. **Old Business** – None

V. **Adjournment**

Motion at 3:25 pm by Tim Luba and seconded by Traci Klauka. Meeting was adjourned.
Appendix C: Advisory Board Committee Minutes and Recommendations, 2011-12

ST. PETERSBURG COLLEGE
Respiratory Care Program
ADVISORY MEETING MINUTES
April 4, 2012

Present:

Ed MacManus          All Children’s Hospital – Chairman
Shirley Westrate     ALA Public Rep
Sonya Mickens        Bay Pines VA Healthcare System
Traci Klauka         Largo Medical Center
Tim Luba             Bayfront Medical
Michelle Maher       Meese Countryside/ Dunedin
Mark Pellman         Sarasota Memorial Hospital
Dr. Anthony Ottaviani SPC Program Medical Director
Dr. Phillip Nicotera SPC Provost
Nancy Kelley         SPC Associate Provost
Gary Graham          SPC Academic/ Student Affairs
Dawn Janusz          Connections, HEC
Stephen Mikles       SPC Program Director
Dan Craddock         SPC Director of Clinical Education
Merle Quinn          Freshmen Representative
Kristine Hayes       Sophomore Representative

I. Introduction and Approval of Minutes

Ed MacManus called the meeting to order @ 2:33 pm. Mark Pellman motioned and was seconded by Michelle Maher to approve the minutes of the April 8, 2011 meeting without correction. Motion carried.

II. Reports and Discussion

PROGRAM UPDATE

LAB EQUIPMENT

There has been no capital equipment purchased in the last 12 months. No capital equipment approvals are needed at this meeting.

ENROLLMENT

Freshmen – 16 of 24 students who matriculated in August 2011 are still enrolled. Two were lost to academic attrition. Six were lost for
personal reasons. Four of the six had academic issues at the time of withdrawal.
No CRT or paramedic transitional students matriculated in January 2012. Paramedic transitional students will now matriculate in August due to changes in the EMS/Paramedic curriculum impacting advanced placement of such graduates.

Sophomores – 15 of 24 students that matriculated in August 2010 remain in the program. Six were lost to academic attrition. Two were lost for personal reasons. One will graduate with the 2013 class. One paramedic transitional student matriculated in January 2011 and is scheduled to graduate in July.

The new selective admissions process that was approved by the advisory committee in October 2009 will be in place for selection of some of the class starting the program in August 2012.

NBRC EXAMINATION RESULTS

2011 CRT Credentialed Graduates

13 of 15 (87%) of the 2011 graduates have obtained their CRT credential. 13 passed on their 1st attempt.

ELE Content Results - % of National Mean for New Candidates

Data 101%
Equipment 102%
Procedures 106%

2011 RRT Credentialed Graduates

11 of 15 (73%) of the 2011 graduates have obtained their RRT credential.

CoARC RCS 2011

Page 8 of the 2011 CoARC Report of Current Status was distributed and the thresholds for attrition, job placement, CRT credentialing success and overall graduate/employer satisfaction were discussed. Page 9 of the 2011 CoARC Report of Current Status was distributed and the RAM summary was discussed.
Appendix C: Advisory Board Committee Minutes and Recommendations, 2011-12, cont.

MARKET DATA - EMPLOYER SURVEYS OF GRADUATES

Gary Graham provided state market data figures. Employer surveys were be sent out this week. Delayed employment has delayed distribution of the surveys this year.

BACCALAUREATE PROGRAM – HSA Sub-plan in Respiratory Care

The college has approved the development of courses for the HSA sub-plan in Respiratory Care. This is due in large part to the strong support reflected in the survey we conducted. Thanks to all who participated.

The college has asked that the four courses be developed two at a time. We have started to develop the Advanced Cardiopulmonary Medicine and the Advanced Neonatal- Pediatric courses.

We currently have course developers working on the courses and are in the process of submitting them to the College’s Curriculum and Instruction committee. We anticipate these courses will go online in Summer, 2013.

Since students could begin the actual non respiratory courses for this degree before the respiratory courses go online, we anticipate we will begin recruiting efforts for in earnest for this program for Fall, 2012.

Clinical Status

Sophomores

Clinical Practice V – 15 students attending clinical. The sophomores continue basic care and critical care rotations at Bayfront Medical, Manatee Memorial and Tampa General Hospital.

Specialty Rotations

All Children’s – neonatal and pediatric rotation: Student clinical summaries have been very positive regarding the staff and the rotation.

Tampa General – neonatal and pediatric rotation: Student clinical summaries have been very positive regarding the staff and the rotation.

Pulmonary Rehab – students are involved in the assessment and teaching of pulmonary rehabilitation at BayPines VA, Sarasota Memorial Hospital, Mease Countryside, and Morton Plant Hospital.
Appendix C: Advisory Board Committee Minutes and Recommendations, 2011-12, cont.

Sleep Lab Rotation – students attend an evening rotation at a sleep lab to observe the evaluation of a patient at Manatee Memorial Hospital, Mease Countryside and Tampa General Hospital.

**Freshmen**

Clinical Practice II – 16 students attending. The freshmen continue patient evaluation and basic care at Bayfront Medical Center, Largo Medical Center, Morton Plant Hospital, and Sarasota Memorial.

**Facility Evaluations**

The following grid shows the overall facility ratings on a Likert scale of 0 (Unacceptable) to 4 (Excellent) from last semester*.

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<th>Facility</th>
<th>Rating</th>
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</table>

* Please note that overall ratings are based on the number of students participating and with such small numbers the rating can be strongly influenced by a single student.

As always we appreciate all that everyone does to support this program and we recognize you for your endeavors in providing us with the resources to make this program one of which we can be proud.

**Student Report**

**Freshmen** – Margie Quinn

The freshmen are having an academically challenging semester. Mechanical Ventilation covers a lot of difficult and new material in a short amount of time. It requires constant attention with reading and reviewing weekly. Paired with Cardiopulmonary Physiology, it can be overwhelming at times. However, everyone is getting through and feels they are being well prepared for finals and future classes within the program.

Clinical Practice 2 bears a lot of resemblance to Clinical Practice 1. This gives us the opportunity to become more efficient at our clinical skills, improve on patient assessment, and work in a different hospital.
Appendix C: Advisory Board Committee Minutes and Recommendations, 2011-12, cont

environment. Overall, it is going well. However, at the beginning of the semester we were given an outline of benchmarks we may be required to meet at the end of each Clinical Practice. For Clinical Practice 2, the benchmark is to manage and treat 4 general care patients. As of today, we have only 4 clinical days left and the number of patients seen varies by group. The students at Bayfront are seeing 3 – 5 patients per week while the Sarasota group is seeing 2 – 4 patients. The students at Morton Plant are seeing 2 patients per week, but do feel confident they will be up to 4. However, the Largo group is not seeing many patients alone and feels they are falling behind. They talk most about weekly problems with the computers and charting.

Lastly, the class spent the first 5 weeks in lab sessions at the Health Education Center. One of the weeks was devoted to AHEC, the in service on the risks of smoking and smoking cessation. It was suggested that this in service be moved from a clinical lab day to either during another class period or on a day the students don’t regularly meet. This would give an extra clinical day in the hospital.

Sophomores – Kristine Hayes

The sophomore would like to be able to spend more time in clinicals. Many times after the students leave additional procedures involving their patients are performed and feel they are missing a lot of these events.

The students are excited to know that the end is near however, they are also cautious about what the future holds for them. As for now they are just working on getting through the next couple months and passing board exams, not to mention trying to find a job.

III. New Business –

Clinical Benchmarks

One of the most difficult, yet most important, clinical skills to teach a student is time management. A new graduate lacking basic time and assignment management skills will be hard pressed to succeed. It is much easier to teach these skills if you work them up to it slowly throughout their clinical education rather than having them play catch up at the end of the program.

We need to provide our students a measurable standard for time management. This time standard has to be based on the input of the advisory committee.
An email was sent out to some of you about clinical performance benchmarks a few months ago and we received some excellent replies. A memorandum listing the clinical performance benchmarks was distributed. Appropriate clinical sections with treatment workloads and separate ventilator workloads were noted.

Following a lengthy discussion about benchmarks, a motion to approve the clinical performance benchmarks as written was made by Michelle Maher and seconded by Mark Pellman. Motion unanimously carried.

IV. Old Business – None

V. Adjournment

Motion at 3:50 pm by Michelle Maher and seconded by Shirley Wostrate. Meeting was adjourned.
Appendix D: Advisory Board Committee Minutes and Recommendations, 2010-11

ST. PETERSBURG COLLEGE
Respiratory Care Program
ADVISORY MEETING MINUTES
April 5, 2011

Present:

Ed MacManus                          All Children’s Hospital – Chairman
Scott Singailiano                   Bayfront Medical Center
Michelle Maher                      Mease Countryside/Dunedin
Mark Pellman                        Sarasota Memorial Hospital
Dr. Anthony Ottaviani               SPC Program Medical Director
Dr. Greg McLeod                     SPC Assistant Provost
Gary Graham                         SPC Academic/Student Affairs
Dawn Janusz                         Connections, HEC
Stephen Mikles                      SPC Program Director
Den Craddock                        SPC Director of Clinical Education
Steve Hardt                         SPC Faculty
Kristine Hayes                      Freshmen Representative
Stephanie Gauldin                   Sophomore Representative

I. Introduction and Approval of Minutes

Ed MacManus called the meeting to order @ 2:35 pm. Mark Pellman motioned was seconded by Michelle Maher to approve the minutes of the October 13, 2010 meeting without correction. Motion carried.

II. Reports and Discussion

PROGRAM UPDATE

LAB EQUIPMENT

Following discussion of the lab fee budget and upcoming changes regarding the carry-over of lab funds Michelle Maher made a motion and was seconded by Mark Pellman to approve the purchase of a Storz video-laryngoscope in the amount of approximately $7000.00. The motion unanimously carried.

Mark Pellman made a motion and was seconded by Michelle Maher to approve the purchase of a Hill Rom 1000 Bed in the amount of approximately $4000.00. The motion unanimously carried.
Appendix D: Advisory Board Committee Minutes and Recommendations, 2010-11, cont

ENROLLMENT

Freshmen – 21 of 24 students who matriculated in August are still enrolled. Two were lost to academic attrition. One was lost for personal reasons. Two paramedic transitional students matriculated in January 2011.

Sophomores – 14 of 23 students that matriculated in August 2009 remain in the program. Seven were lost to academic attrition. One was lost for personal reasons. One has stopped out. One paramedic transitional student matriculated in January 2010 and is scheduled to graduate in July.

The new selective admissions process that was approved by the advisory committee in October 2009 will be in place for selection of some of the class starting the program in August 2011.

MARKET DATA - EMPLOYER SURVEYS OF GRADUATES

The reporting window for state and county workforce demand for the field is still 2008-2018 as reviewed at the March 2010 meeting. Thus there is no new data to report this year.

There were 14 graduates in the July 2010 graduating class. 1 CRT transitional student graduated in May 2010 and passed his WRE & CSE exams on his first attempt and is now working as a department manager.

10/10 of the employer surveys sent out have been returned and all cognitive, psychomotor and affective domain query items on all returned surveys were rated above the cut rating, acceptable, for all graduates evaluated.

3 graduates started working late and will have their employer survey sent out in a few weeks. One July graduate has not passed the NBRC ELE exam and thus cannot obtain their state license to gain employment. The remaining July graduate will attempt her NBRC exams this month.

PROGRAM PERSONNEL RESOURCE SURVEYS

The program personnel resource assessment survey was sent electronically and thus far 8 have been returned with all ratings above the CoARC cut score for all resources.
Appendix D: Advisory Board Committee Minutes and Recommendations, 2010-11, cont

Baccalaureate Program

The dean of the College of Health Sciences has inform us that funds are very limited for program course development and new program course development is on hold until the budget for 2011-2012 is approved.

Clinical Status

Sophomores

Clinical Practice 5 – 15 students currently enrolled. The sophomores continue critical care and basic care rotations at Bayfront Medical, Tampa General Hospital, and Sarasota Memorial.

Current Specialty Rotations

Neonatal and pediatric care rotations
At All Children’s Hospital and Tampa General Hospital

Pulmonary Rehabilitation Rotations
At Bay Pines VA, Mease Countryside, Morton Plant Hospital and Sarasota Memorial

Sleep Lab Rotations
At Mease Countryside and Tampa General Hospital

Home Care Rotation – at BayCare HomeCare

Students are required to submit a summary of their day in these rotations and these reports have been most favorable. The program wishes to thank all who have supported this program and our presence at their facility.

Freshmen

Clinical Practice 2 – 20 students enrolled. The freshmen continue patient evaluation and basic care at four facilities: Bayfront Medical Center, Largo Medical Center, Morton Plant Hospital, and Manatee Memorial.
Appendix D: Advisory Board Committee Minutes and Recommendations, 2010-11, cont

**Facility Evaluations**

The following grid shows the overall facility ratings on a Likert scale of 0 (Unacceptable) to 4 (Excellent) from last semester.

<table>
<thead>
<tr>
<th>CP 4 2010</th>
<th>BFMC – 3.9</th>
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<td>TGH – 3.8</td>
<td>LMC – 3.7</td>
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<td>SMM – 3.7</td>
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<td>MPH – 4.0</td>
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Again the college and this faculty thank all of the managers from our affiliates who support this program. We could not do it without you.

**Student Report**

**Freshmen** – Kristine Hayes

Freshmen are completing Spring Semester and working hard in RET 1204, Mechanical Ventilation.

The only business from the Freshman Class was a request to do an intubation rotation since HCC was doing a rotation at Moffitt. The general feel of the board was the risk was too high to include a full rotation. However, Dr. Ottaviani offered the possibility of doing an OR rotation to observe intubation in the sophomore year.

**Sophomores** – Stephanie Gauldin

Sophomores are enjoying their various specialty rotations. Clinical rotations and classes are going well.

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**III. New Business** –

Long discussion about proprietary programs and the local as well as national implications.

**IV. Old Business** – None

**V. Adjournment**

Motion at 3:25 pm by Mark Pellman and seconded by Michelle Maher. Meeting was adjourned.