1. **Program Name**: Show how the program would appear on the Coordinating Board’s program inventory.

   Master of Science in Respiratory Care (MSRC) major in Respiratory Care

2. **Proposed CIP Code**: 51.0908.00

3. **Brief Program Description**: Describe the program and the educational objectives.

   This advanced online post-professional master’s degree program will offer practicing registered respiratory therapists (RRT) the opportunity to pursue current and emerging knowledge in the evolving respiratory care discipline within specific concentration areas. The program will prepare respiratory therapists seeking career advancement opportunities through graduate education for advanced respiratory care leadership roles, for healthcare-based clinical educators’ positions, and for academic educators’ positions in the discipline of respiratory care. The program will be administered through the Department of Respiratory Care at Texas State University (Texas State). The 36-credit hour proposed program consists of a required 24-credit hour core of Respiratory Care (RC) courses plus 12 credit hours in one of two concentrations, Leadership or Polysomnography, as chosen by the student. The core and concentration curriculum for the proposed MSRC degree provides a research component with a pulmonary physiology foundation required for mid- to high-level clinical specialists, managers, and educators and will prepare individuals to work side-by-side with physicians to provide advanced practice skills. The outlined curriculum and specific courses will afford advanced knowledge needed to prepare individuals as discipline-specific leaders in acute care, specialty clinics, pulmonary rehabilitation, home care, and academic settings. Direct benefits include improved patient care as an outcome of progressive knowledge of cardiopulmonary compromised patients managed through innovative patient services and advanced clinical practice and specialization. The current post-baccalaureate certificate in Polysomnographic Technology will no longer be needed and will be eliminated as of the approval of the MSRC.

   The core curriculum (24 credit hours) provides a focus on advanced concepts of cardiopulmonary physiology, clinical practice guidelines and protocols, respiratory care research methods and designs, cardiopulmonary disease patient education, respiratory care applied research, academic leadership in respiratory care, and advanced cardiopulmonary diagnostics and therapeutics. The research component is designed to develop investigative skills in the respiratory care discipline including: hypothesis testing, research methods, innovative project design, pragmatic implementation, and preparation of research results for appropriate peer-reviewed
publication and professional presentation. Students will also interpret clinical trial findings, analyze published data, and evaluate current epidemiology trends.

The Polysomnography Concentration (12 credit hours) provides an advanced, comprehensive understanding of the pathophysiology of a broad range of sleep disorders. The curriculum includes a multifaceted evaluation of all related physiological parameters currently utilized to evaluate sleep physiological bio-signals required for a quantifiable diagnostic “sleep study.” Graduates will perform polysomnography (PSG), or sleep study, diagnostics and therapeutics essential in documenting sleep disorders. This field of study is critically necessary in providing physicians with the diagnostics results needed to identify sleep issues and in implementing appropriate treatment options. As a nationally accredited sleep disorder program, completion of the Polysomnography Concentration will qualify the graduate to sit for national board examinations in two distinct professional organizations. Graduates will be eligible to sit for the Registered Polysomnographic Technologist (RPSGT) national board exam administered by the Board for Registered Polysomnographic Technologists and the Sleep Disorder Specialist national board exam administered by the National Board for Respiratory Care (NBRC). In addition, graduates will be eligible to sit for the Certification in Clinical Sleep Health national credential exam. This new credential allows practitioners to coordinate and manage patient care, improve outcomes, and educate patients and the community while advocating for the importance of sleep quality. Eligibility to add this impressive list of national credentials, along with the MSRC degree, offers significant additional professional expertise, national recognition, and marketability.

Courses for the Polysomnography Concentration are already in the graduate course inventory and will not require new course approval. The current graduate-level PSG courses comprise the post-baccalaureate (post-bac) graduate certificate in Polysomnographic Technology. This program has been fully accredited since 2006 through the Commission on Accreditation for Respiratory Care. It remains the only graduate-level polysomnography program in the country and is accredited through 2025.

The Leadership Concentration (12 credit hours) is designed to establish and develop a conceptual foundation in leadership germane to respiratory care. The curriculum promotes the development of specific leadership skills required for success in contemporary healthcare industry roles in respiratory care and in academia. Leadership courses address healthcare financial theory, healthcare law, healthcare organizational behavior/theory, and financial management. Graduates of the Leadership Concentration will be qualified for advanced professional career opportunities in supervision/management within the respiratory care discipline. Career opportunities will include a wide variety of respiratory care industry venues as department managers and supervisors. Graduates may serve as program directors, directors of clinical education, or educators in community college or university respiratory care programs. The overriding goal for this concentration is to provide the practicing respiratory care practitioner with post-professional graduate education within the respiratory care discipline in order to advance leadership roles.
in meeting both management industry standards as well as academic, terminal degree requirements.

4. **Administrative Unit:** Identify where the program would fit within the organizational structure of the university.

   Department of Respiratory Care in the College of Health Professions

5. **Proposed Implementation Date:** Report the first semester and year that students would enter the program.

   Fall 2017

6. **Contact Person:** Provide contact information for the person who can answer specific questions about the program.

   - **Name:** Gregg Marshall, PhD, RRT, RPSGT
   - **Title:** Professor and Chair
   - **E-mail:** sm10@txstate.edu
   - **Phone:** 512-245-3514

7. **Academic Program Coordinator:**

   - **Name:** Christopher Russian, PhD, RRT-NPS, RPSGT
   - **Title:** Professor and Director of Clinical Education
   - **E-mail:** cr23@txstate.edu
   - **Phone:** 512-245-3794
   - **Qualifications:** Dr. Russian began teaching in the Department of Respiratory Care in 1999 as a clinical instructor/lecturer and accepted a tenure-track Assistant Professor appointment in 2002. In 2008, Dr. Russian was tenured and promoted to Associate Professor and promoted to Professor in 2016. With a Ph.D. in Adult, Professional and Community Education, Dr. Russian is uniquely qualified to teach respiratory care graduate courses in leadership along with polysomnography graduate courses. He has served as Director of Clinical Education for the Department of Respiratory Care for the last twelve years and is nationally credentialed in respiratory care, polysomnography technology, and as a neonatal pediatric specialist. His specific research focus is evidence-based practice in the clinical setting and includes sleep disorders, ventilator mechanics, anatomic flow dynamics of the upper airways, and respiratory muscle training to increase ventilation. Dr. Russian has published high quality, peer-reviewed journal articles, textbook chapters, abstracts, and serves as a reviewer for several peer-reviewed national journals. He regularly provides peer-reviewed presentations at state, national, and international conferences.
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Executive Summary

Eligibility for leadership positions in Respiratory Care (RC), like most health professions, often depends on post-professional or graduate degree completion. These positions include hospital respiratory care department managers, hospital-based clinical educators, medical industry leaders, academic faculty positions, industry clinical research, and advanced practice positions. For over a decade, the Department of Respiratory Care faculty at Texas State have recognized the need for an advanced practice graduate program in respiratory care to address the need for highly skilled practitioners in the healthcare sector to improve patient outcomes. The Respiratory Care faculty and the College of Health Professions have ranked the Master of Science in Respiratory Care (MSRC) degree as a high priority need within the departmental and college strategic plans. Industry leaders have also provided support and input on the development of this new graduate program, which is documented throughout this proposal. Dr. Thomas Barnes, President of the Coalition for Baccalaureate and Graduate Respiratory Therapy Education (CoBGRTE), Dr. Lynda Goodfellow, Professor and Associate Dean for Academic Affairs at Georgia State University, and Dr. Christy Kane, Chair and Program Director of Respiratory Care at Bellarmine University testify in the support letters as national leaders to the immediate need of this new graduate program. And also, Dr. Jon Nilsestuen, Professor Emeritus and previous Chair at the University of Texas Medical Branch in Galveston states,

In order to meet the growing need for therapists with advanced levels of training, the educational community will have to support the development of graduate education to train educators to fill faculty positions; to train researchers in each of the specialty areas; and to train managers for supervising inpatient and outpatient respiratory care services, homecare and rehabilitation services.

Industry Support

National respiratory care organizations strongly support and encourage graduate education for professional leadership development. On January 27, 2016, the American Association for Respiratory Care (AARC) Board of Directors released an unprecedented position statement on respiratory therapy education calling for advanced degrees beyond the baccalaureate level to meet future demands stating “Respiratory therapists seeking to practice in advanced clinical settings, leadership roles, research, and in professional educator roles should seek higher education at the masters and doctoral levels.” In response to the AARC statement, the profession's accreditation agency, the Commission on Accreditation for Respiratory Care (CoARC), Board of Commissioners released the following statement on January 28, 2016:

The CoARC acknowledges that respiratory therapists with baccalaureate and graduate education are needed in larger numbers to serve as educators, researchers, managers, clinical specialists, and other roles through the healthcare delivery system…To support the increasing extent and complexity
of the skills required of graduates of Respiratory Care programs and the associated movement of the profession toward baccalaureate and graduate degrees, the CoARC Board of Commissioners, in collaboration with the AARC, is proposing the following change in Standard 1.01 in the Accreditation Standards for Entry into Respiratory Care Professional Practice, to be effective January 1, 2018:

...An educational sponsor must be a post-secondary academic institution accredited by a regional or national accrediting agency that is recognized by the U.S. Department of Education (USDE) and must award graduates of the program a baccalaureate or graduate degree upon completion of the program.

A white paper on the Development of Baccalaureate and Graduate Degrees in Respiratory Care by the American Association for Respiratory Care was published in 2003 (Barnes, 2003) and already at that time called for advanced degree therapists in the profession to meet healthcare needs. The white paper stated,

There is a need to increase the number of respiratory therapists with advanced levels of training and education to meet the demands of providing services requiring complex cognitive abilities and patient management skills. Therefore, the AARC strongly encourages the continuing development of baccalaureate and graduate education in respiratory care, to include...promotion of Master of Science in Respiratory Care degree programs for the development of leadership in the areas of management, education, research, and clinical specialization (Barnes, 2003, p. 36).

In 2013, the AARC published the next set of white papers encouraging all institutions of higher education to offer masters and doctoral programs for those practitioners seeking employment in advanced clinical settings, leadership roles, and professional educator roles (AARC, 2013). A national study by Becker (2003) reported that RC hospital department managers prefer to hire therapists with bachelor and/or master degrees.

Respondents indicated that a graduate degree for the following positions would be desirable (n in parentheses): manager (356), coordinator/specialist (236), educator (162), supervisor/chief RT/team leader (108), administrator (64), researcher/statistician (65), case manager (34), business (34), assistant or associate director (24), RT position (21), regulatory agency (4), and respiratory related role (19) (p. 848).

Managerial respondents rated course content as the most important element for a graduate program. “More than 50% of respondents gave high ratings to the topics of disease management, administrative issues, evaluating patient programs, advanced physiology, patient education, designing patient programs, and computer skills.” (Becker, 2003, p. 847)
Healthcare Needs

Advanced graduate studies are critical for addressing the profession’s expansive need for patient and cardiopulmonary disease identification through assessment, advanced analysis, in-depth study, critical thinking, and leadership of healthcare teams. The growing body of medical knowledge, advancing technologies, increasing life spans, and surge in the numbers of patients with lung disease is creating a dynamic environment for MSRC degreed respiratory therapists to make critical contributions toward improving patient care as leaders. The MSRC core courses are designed to prepare the graduate to provide an advanced level of care in cardiopulmonary disease management and education, clinical practice guideline development and implementation, advanced comprehension of available scientific and evidence-based medical clinical solutions, investigation and discussion of current problems facing respiratory therapists and the cardiopulmonary patient, and advanced understanding of cardiopulmonary diagnostic tools available for the most favorable patient outcomes.

Recurrent themes of evidenced-based study of real-world healthcare problems facing respiratory therapists will be visited in each course exploring solutions that can be translated into the present healthcare environment. Coursework will utilize case studies and literature reviews to identify and cultivate requisite leadership skills needed in critical thinking and problem-solving. Graduates will gain an in-depth knowledge of the pathophysiology of the cardiopulmonary system supporting an advanced understanding of the cardiopulmonary illnesses and long-term disease management.

Graduates of the proposed MSRC program will be prepared to discuss an array of cardiopulmonary diagnostic and therapeutic options available to the patient and make informed decisions on the best course of action. Inter-professional interaction with physicians, nurses, healthcare team members, the patient, and the patient’s family will be emphasized. The proposed MSRC program is a post-professional degree program and will be of great interest to both recent baccalaureate graduates and graduates with years of work experience seeking a discipline-specific graduate degree with a leadership and clinical subspecialty foundation. Within Texas, there is only one other post-professional MSRC available, and outside Texas only three exist.

Curriculum and Marketable Skills

The MSRC Polysomnography Concentration provides advanced study in polysomnography thus preparing the graduate for a leadership role in the rapidly evolving world of sleep medicine. As demonstrated by labor market information, polysomnography is one of the fastest growing medical professions, yet access to sleep services is limited due to the small number of credentialed sleep professionals. The MSRC Polysomnography Concentration graduate will be prepared to provide leadership in hospitals, free-standing sleep labs/centers, and doctors’ offices through a number of in-house services. The graduate will be nationally credentialed to provide and supervise direct patient care whether conducting daytime or nighttime sleep diagnostic studies. Working directly with physicians, the graduate will provide advanced disease education
to patients and family on maintaining quality sleep, proper use of sleep technology, and various other aspects of sleep hygiene solutions directed toward resolving the sleep-related issues of the patient.

The proposed MSRC Leadership Concentration courses have a direct translational value toward improving patient care, interacting with healthcare providers and team members while preparing the respiratory therapist for leadership roles within healthcare systems both large and small. Understanding of healthcare finance, organizational behavior, and the legal complexities of the healthcare environment will provide the graduate with a robust preparation to lead respiratory care departments and therapists.

Accreditation and institutional-specific course requirements for entry-level baccalaureate respiratory care programs effectively limit the number of elective credit hours for those seeking to add advanced leadership, management, clinical specialization, or healthcare finance coursework. Without a graduate degree, advanced healthcare career opportunities in management and supervision are difficult, if not beyond reach. When opportunities for leadership do occur, practicing therapists may find themselves unexpectedly thrust into roles without previous leadership education. On numerous occasions, new graduates from the undergraduate Bachelor of Science in Respiratory Care (BSRC) program at Texas State have called to speak with the faculty in a panic because they were suddenly and unexpectedly offered the opportunity to become department directors or managers of a respiratory care department. Hospital administrators recognized they possessed both the BSRC degree and the Registered Respiratory Therapist (RRT) credential, thus outranking other therapists in the department. Hospital administrators appear to recognize the benefit of having a respiratory therapist to assume the role of director/manager of a respiratory therapy department. Since leadership and management courses are limited by the robust curricular requirements in the BSRC degree, these graduates felt unprepared at the undergraduate level to accept a new leadership or management role so soon after graduation. A graduate degree in respiratory care would provide additional training that the BSRC graduate is seeking and the hospital administrator recognizes.

This proposal seeks to address the fundamental and professional need to develop respiratory care leaders. The proposed curriculum is constructed to advance the discipline-specific leadership skills necessary for practitioners to assume leadership roles in the acute care and long-term care industry, academic settings, and to serve as physician-extenders in specialty clinics, patient education programs, sleep medicine, and in proprietary healthcare businesses. Leadership also includes advanced clinical subspecialty credentials and knowledge, such as offered in the Polysomnography Concentration. The curriculum, including core courses and the concentrations, will prepare individuals with the knowledge and marketable skills sought by healthcare employers and supported by industry reports.

Finally, beyond offering a foundation in management, research and education, the proposed program is designed to specifically qualify individuals seeking career opportunities in respiratory care academia, such as community college and university
faculty positions, by providing the requisite number of graduate hours within the respiratory care discipline as set by university institutional accreditation agencies, such as the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC). Table 2 lists a sampling of positions available within the State of Texas and Attachment J provides details of the job postings.
Program Information

I. Need

A. Job Market Need – Provide short- and long-term evidence of the need for graduates in the job market. Common sources for workforce need and workforce projections include the Bureau of Labor Statistics, the Texas Workforce Commission, and professional associations. If the program is designed to address particular regional or state needs other than workforce demands, please identify those needs. Other types of data that can be used are: 1) documented vacancies in existing positions; 2) documented need for new positions; and 3) evidence of emerging markets. These data can come from: a) survey of advertisements for job openings; b) employer surveys; and c) related governmental agencies.

Short-Term Evidence and Trends: Respiratory Therapists (RTs), as cardiopulmonary specialists, serve as vital members of the healthcare team and act as physician-extenders in assessing cardiopulmonary disorders, such as Chronic Obstructive Pulmonary Disease (COPD). According to the Centers for Disease Control and Prevention (CDC), chronic obstructive lung disease ranks as the third leading cause of death following heart disease and cancer among the ten leading causes of death in the United States (Centers for Disease Control and Prevention, 2014). More than 11 million people have been diagnosed with COPD but an estimated additional 24 million may have undetected, undiagnosed COPD. A 2014 report from the CDC projects a rise in medical costs associated with COPD from $32.1 billion in 2010 to over $49 billion by 2020. RTs perform essential patient assessment and diagnostic tests to determine the most effective therapy for the cardiopulmonary patient. In consultation with physicians, RTs recommend diagnostic testing and appropriate first-line therapeutic treatment, including both short-term and long-term disease management.

The Occupational Handbook, provided by the U.S. Bureau of Labor Statistics, and the Texas Workforce Commission, lists the following as examples of locations, organizations, and environments employing RTs.

- General Medical and Surgical Hospitals
- Specialty Hospitals
- Nursing Care Facilities (e.g. Skilled Nursing Facilities)
- Physician Offices
- Home Care
- Outpatient Care Centers
- Colleges, Universities and Professional Schools
- Management of Health-related Companies and Enterprises

National Job Market: According to the U.S. Bureau of Labor Statistics published in September 2014, employment growth for respiratory therapists is projected to be “19 percent from 2012 to 2022, faster than the average for all occupations” (U.S. Bureau
of Labor Statistics, 2014-15) creating an additional 22,700 jobs for entry-level respiratory therapists. However, this number does not include the leadership needs to manage a growing respiratory care workforce or the number of educators needed to train this workforce. While the healthcare industry continues to demand respiratory clinicians be present at the bedside, the market is showing increasing demands for the number of managers, academics, and leaders with graduate degrees to supervise and educate the fast-growing workforce. It is clear that there will be a continuing need for well-trained individuals with the knowledge and skills to care for patients with cardiopulmonary problems and the graduates of this proposed program will have excellent employment opportunities within the state and nationwide.

**Texas Job Market:** Based on the data obtained from the U.S. Bureau of Labor Statistics and the Texas Workforce Commission, there is an increasing need in Texas for entry-level respiratory therapists (See Table 1 below). Like nursing, entry-level respiratory practitioners may complete an associate's, baccalaureate, or master's degree entry-level program. Similar to nursing, with the need for increasing numbers of Respiratory Therapists (RTs) in Texas, there will be a resulting increased need for RT-specific healthcare industry managers, supervisors, academic educators, and clinical educators. As detailed in a latter section, AARC, the national association for respiratory care, recently issued a position statement that calls for respiratory therapists to seek higher education at the master's or doctoral level. The AARC position statement also encourages universities to provide the graduate school opportunities required to meet educational needs.

**Table 1. Respiratory Therapy Employment Projections for 2012-2022 in Texas**

<table>
<thead>
<tr>
<th>Annual Average Employment 2012</th>
<th>Annual Average Employment 2022</th>
<th>Number change 2012-22</th>
<th>Percent growth 2012-22</th>
<th>Annual Job openings due to growth</th>
<th>Annual job openings due to retirement</th>
<th>Total annual job openings</th>
</tr>
</thead>
<tbody>
<tr>
<td>10,010</td>
<td>12,940</td>
<td>2,930</td>
<td>29.3%</td>
<td>295</td>
<td>145</td>
<td>440</td>
</tr>
</tbody>
</table>

With nearly 450 annual job openings in Texas projected each year from 2012 through 2022, the need for increased leadership and clinical specializations will have a positive impact on the RT workforce. MSRC graduates will enjoy a wide array of employment opportunities equipped with the requisite advanced problem solving skills required for the increasing numbers of complex cardiopulmonary patients in the future. Specifically, MSRC graduates will be excellent candidates for managing critical care and acute care departments in hospitals, as well as other clinical leadership positions in pulmonary rehabilitation, chronic disease management, research, and education both in Texas and nationwide. Table 2 lists a sampling of positions available within the State of Texas and Attachment J provides details of these job postings. Table 2 illustrates the diversity of posted open positions in Texas and throughout the U.S. that include both industry and academic positions.
requiring/prefering a master’s degree. These positions require knowledge and skills consistent with new MSRC graduate curriculum domains to satisfy regional institutional accreditation requirements. Of the thirty position announcements included in Table 2, fourteen (14) indicate a Master’s degree is preferred and sixteen (16) indicate a Master’s degree is required to apply for the position.

As the RT profession continues to expand and diversify, there is an increasing need for graduate education to qualify individuals for job opportunities beyond those of entry-level into respiratory care practice. Many healthcare facility respiratory care manager positions are now specifying graduate education as a required or preferred element for successful applicants throughout the country and in Texas. See Attachment J for more details about those positions.

**Table 2: Sampling of Job Openings May - August 2016**

<table>
<thead>
<tr>
<th>Location</th>
<th>Focus of Job</th>
<th>Organization</th>
<th>Job Title</th>
<th>Qualifications/Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Galveston, TX</td>
<td>Tenure-Track Faculty</td>
<td>University of Texas Medical Branch at Galveston</td>
<td>Assistant Professor</td>
<td>Master’s required</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Doctoral preferred</td>
</tr>
<tr>
<td>Houston, TX</td>
<td>Account Executive in Respiratory Care</td>
<td>Hill-Rom Respiratory Care</td>
<td>Medical equipment sales and clinical specialist</td>
<td>Master’s preferred</td>
</tr>
<tr>
<td>San Antonio, TX</td>
<td>Tenure or Non-Tenure Track</td>
<td>University of Texas Health Science Center at San Antonio</td>
<td>Fulltime Faculty Position</td>
<td>Master’s required, Doctoral preferred</td>
</tr>
<tr>
<td>San Antonio, TX</td>
<td>Department Director of Respiratory Therapy Services</td>
<td>Thornton Group Recruiter</td>
<td>Respiratory Therapy, Non-Invasive Cath Lab, and Sleep Lab Services</td>
<td>Master’s preferred</td>
</tr>
<tr>
<td>Atlantis, FL</td>
<td>Director of Cardiopulmonary Services</td>
<td>JFK Medical Center-Palm Beach</td>
<td>Director of Cardiopulmonary, Pulmonary Rehab, and Neurodiagnostic services</td>
<td>Master’s preferred</td>
</tr>
<tr>
<td>Birmingham, AL</td>
<td>Tenure-Track Faculty</td>
<td>Samford University</td>
<td>Director of Clinical Education</td>
<td>Master’s required</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Doctoral preferred</td>
</tr>
<tr>
<td>Boise, ID</td>
<td>Clinical-Track Faculty</td>
<td>Boise State University</td>
<td>Clinical Assistant Professor</td>
<td>Master’s required, Doctoral preferred</td>
</tr>
<tr>
<td>Buffalo, NY</td>
<td>Graduate degree distance education faculty</td>
<td>Canisius College</td>
<td>Adjunct Professor</td>
<td>Master’s required</td>
</tr>
<tr>
<td>Charlotte, NC</td>
<td>Undergrad degree distance education program</td>
<td>The University of North Carolina at Charlotte</td>
<td>Clinical Assistant Professor</td>
<td>Master’s required</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Doctoral preferred</td>
</tr>
<tr>
<td>CHRISTUS Health</td>
<td>Program Director of Clinical Services</td>
<td>CHRISTUS Health</td>
<td>Director of Clinical Services</td>
<td>Master’s preferred</td>
</tr>
<tr>
<td>Location</td>
<td>Position/Title</td>
<td>Institution/Company</td>
<td>Required Degree/Position</td>
<td></td>
</tr>
<tr>
<td>---------------------------</td>
<td>-------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Cincinnati, OH</td>
<td>Patient Services Strategic Plan</td>
<td>Cincinnati Children's Hospital</td>
<td>Master’s required</td>
<td></td>
</tr>
<tr>
<td>Cincinnati, OH</td>
<td>Tenure-Track Faculty</td>
<td>Northern Kentucky University</td>
<td>Assistant Professor Master’s required</td>
<td></td>
</tr>
<tr>
<td>Des Moines, WA</td>
<td>Tenure-Track Faculty</td>
<td>Highline College</td>
<td>Instructor Master’s preferred</td>
<td></td>
</tr>
<tr>
<td>Durham, NC</td>
<td>Manager of Clinical Trials</td>
<td>Duke University Medical Center</td>
<td>Clinical operations, strategic planning, new business development Master’s preferred</td>
<td></td>
</tr>
<tr>
<td>Ft. Lauderdale, FL</td>
<td>Tenure-Track Faculty</td>
<td>Keiser University</td>
<td>Director of Clinical Education Master’s required</td>
<td></td>
</tr>
<tr>
<td>Ft. Myers, FL</td>
<td>Director of Respiratory Therapy</td>
<td>Lee Memorial Health System</td>
<td>Director of Respiratory Care and Pulmonary Rehab Services Master’s preferred</td>
<td></td>
</tr>
<tr>
<td>Kalamazoo, MI</td>
<td>Tenure-Track Faculty</td>
<td>Kalamazoo Valley Community College</td>
<td>Director of Clinical Education Master’s required</td>
<td></td>
</tr>
<tr>
<td>Inverness, FL</td>
<td>Department Director of Respiratory Care</td>
<td>Citrus Memorial Hospital</td>
<td>Director of Respiratory Services, Sleep Lab, and Pulmonary Rehab Master’s preferred</td>
<td></td>
</tr>
<tr>
<td>Little Rock, AR</td>
<td>Department Director of Respiratory Care</td>
<td>Arkansas Children's Hospital</td>
<td>Director Master’s preferred</td>
<td></td>
</tr>
<tr>
<td>Menomonee Falls, WI</td>
<td>Respiratory Care Services Education Coordinator</td>
<td>Community Memorial Hospitals</td>
<td>Respiratory Care Department Clinical Educator Master’s preferred</td>
<td></td>
</tr>
<tr>
<td>Ogden, UT</td>
<td>Non-Tenure Track Faculty</td>
<td>Weber State University</td>
<td>Assistant Professor/Instructor Master’s required Doctoral preferred</td>
<td></td>
</tr>
<tr>
<td>Palm Beach Gardens, FL</td>
<td>Tenure-Track Faculty</td>
<td>Nova Southeastern University</td>
<td>Assistant Professor Master’s required</td>
<td></td>
</tr>
<tr>
<td>Rocky Mountain Territory - USA</td>
<td>Clinical Consultant for Medical Equip Company</td>
<td>Alere, Inc for Medical Equip Company</td>
<td>Clinical Consultant for Rocky Mountain Territory (OK, NE, MO CO) Master’s preferred</td>
<td></td>
</tr>
<tr>
<td>San Jose, CA</td>
<td>Department Director of Respiratory Care</td>
<td>Good Samaritan Hospital</td>
<td>Pulmonary, EEG, and Vascular Services Director Master’s preferred</td>
<td></td>
</tr>
<tr>
<td>San Mateo, CA</td>
<td>Tenure-Track Faculty</td>
<td>Skyline College</td>
<td>Fulltime Faculty Position Master’s preferred</td>
<td></td>
</tr>
<tr>
<td>St. Paul, MN</td>
<td>Tenure-Track Faculty</td>
<td>St. Catherine University</td>
<td>Director of Clinical Education Master’s required Doctoral preferred</td>
<td></td>
</tr>
<tr>
<td>Toledo, OH</td>
<td>Tenure-Track Faculty</td>
<td>The University of Toledo</td>
<td>Assistant Professor Master’s required ABD or Doctoral preferred</td>
<td></td>
</tr>
<tr>
<td>West Chester, PA</td>
<td>Department Director of Respiratory Care</td>
<td>Penn Medicine - Chester County Hospital</td>
<td>Director of Respiratory Care and Pulmonary Master’s preferred</td>
<td></td>
</tr>
</tbody>
</table>
Central and South Texas Regional Job Market: Affirming Texas State University’s and the College of Health Professions’ mission and vision to serve the Central and South Texas regions, the MSRC degree program will make a significant contribution to the regions by training graduates in respiratory care leadership and polysomnography who are highly skilled and marketable in management, education and research. Entry-level respiratory therapists, whether graduates of associate’s, bachelor’s, or master's degree entry-level programs, are identified in Texas as a high demand occupation for regional workforce systems in this area, including Workforce Solutions Capital Area (Austin) and Workforce Solutions Alamo (San Antonio). With an increase in the respiratory care workforce comes an increased need for manager and supervisor positions at the department level in healthcare facilities. Entry-level respiratory therapists lack the clinical experience, leadership and supervisory training that is required for a respiratory care director position. There is also an increased need for faculty teaching in community colleges and universities to be properly qualified with at least 18 hours of graduate coursework in the discipline in which they are teaching. Additionally, as enrollments increase there is an instructional need for advanced specialty credentials to qualify faculty to teach those advanced specializations.

Other Central and South Texas regional partners that contribute to the healthcare mission of the state with future employment opportunities for MSRC graduates where a graduate degree is preferred or required include:

- Seton Healthcare System in Austin is a large award winning network of over 35 acute care hospitals and specialized centers poised to meet the needs of all patients under the care of expert specialty healthcare providers.
- St. David’s Healthcare System (SDHS) provides comprehensive acute care and specialty care to the Austin area as one of the largest hospital systems in Texas in partnership with the Hospital Corporation of America. The SDHS operates six hospitals, six ambulatory surgery centers, four freestanding emergency departments, four urgent care clinics, and rehabilitation facilities with more than 8,000 employees.
- Baylor Scott & White Hospital – Round Rock is one of the newest acute care hospitals to the Austin area and represents the Baylor Scott & White Health system, which provides care to central Texans in a 29,000 square-mile service area. The system employs more than 14,000 employees and manages 12 acute care hospital sites.
- University Hospital in San Antonio is one of the leading tertiary care hospitals in the area with growing adult, pediatric, and neonatal critical care services,
as well as chronic disease management programs for asthma, chronic obstructive lung disease, and amyotrophic lateral sclerosis.

- San Antonio Military Medical Center (SAMMC) is home to the largest military healthcare and healthcare education operation in the U.S. providing collaborative and employment opportunities unique to the nation.
- Methodist Healthcare System of San Antonio is one of the major healthcare providers in South and Central Texas with 27 facilities including nine acute care hospitals.
- Baptist Health System includes five acute care hospitals in San Antonio as well as one facility in New Braunfels.
- HealthSouth Rehabilitation Institute of San Antonio (RIOSA) provides rehabilitative services specifically focused on patients with cardiopulmonary disease with stroke, brain injury, spinal cord injury, and neuromuscular diseases.
- Christus Santa Rosa Health System has provided award-winning healthcare to South Texas for 150 years with four acute care hospitals, a comprehensive children's hospital, three emergency centers, and two ambulatory surgery centers in the region.

Focusing only on the Central and South Texas regional job market, the above healthcare systems employ an estimated 1,000 RTs with over 40 serving as directors, managers, supervisors, clinical educators, and special staff. Additionally, durable medical equipment (DME) companies that provide medical equipment prescribed by physicians to the homes of patients with cardiopulmonary disorders have employment opportunities available to MSRC graduates.

With the excellent outlook for employment growth for RTs and the types of services offered by healthcare facilities expands, the need to increase the pool of master’s degree prepared leaders is compelling. Potential employers of MSRC graduates include healthcare facilities, medical equipment and homecare businesses, academic settings at the associate degree, baccalaureate degree and master’s degree levels, and in clinical research.

**Long-Term Evidence and National Trends:** The need for master's prepared RTs is directly proportional to the future growth of the profession as a whole. The long-term job market need for entry-level practice RTs is excellent. The 2014 U.S. Bureau of Labor Statistics job outlook report indicates that employment growth for respiratory therapists is expected to be “19 percent from 2012 to 2022, faster than the average for all occupations.” This sizeable workforce requires a substantial number of well-educated managers, leaders, and specialists, especially in light of population growth and longevity. By extension, the growth in the number of RTs will require additional managers and supervisors to provide key roles and skills in healthcare organizations, including human resource management, regulatory compliance, financial management, and expansion of new services as medical technology advances. The growth in the number of RTs also requires advanced-level RTs to oversee clinical training, oversight of direct care and diagnostics, and evaluation of
patient outcomes. The number of supervisor, manager, clinical educator, and utilization review positions will grow with the therapist workforce, with many positions seeking master's prepared leaders.

According to the Centers for Disease Control (2013),

The growth in the number and proportion of older adults is unprecedented in the history of the United States. Two factors—longer life spans and aging baby boomers—will combine to double the population of Americans aged 65 years or older during the next 25 years to about 72 million. By 2030, older adults will account for roughly 20% of the U.S. population. (p. ii).

As the geriatric population increases over the next two decades, RTs will see an increase in the pulmonary patient load. This population will create an unprecedented number of aging and smoking-related pulmonary issues. For example, COPD, which includes emphysema, chronic bronchitis, and bronchiectasis, cases will generate increasing numbers of patients seeking treatment for the pulmonary component of their disease. An estimated 15 million Americans were diagnosed with COPD in 2011 (Centers for Disease Control, 2012). Inpatient and outpatient cases are expected to continue to dramatically increase over the next 20 – 25 years.

More than one in three cancer deaths in the U. S. are tobacco related, making tobacco cessation a high public health priority (Puckett et al., 2015). Puckett et al. (2015) studied more than 5,000 smokers and found that access to and use of telephone and web-based cessation services may improve tobacco cessation success. While physicians traditionally serve as the initial counselor to those patients who seek to quit smoking, respiratory therapists are poised to accept the role of physician-extender to create and administer behavior modification and smoking cessation programs (Hudmon, Mark, Livin, Corelli, & Schroeder, 2014).

Of 244 RC programs surveyed (Hudmon et al., 2014), program directors reported the following undergraduate curriculum time devoted to tobacco topics:

- aids for cessation (median, 20 minutes)
- assisting patients with quitting (median, 15 minutes)
- nicotine pharmacology and principles of addiction (median, 15 minutes)

The association between smoking and COPD is well documented. “Tobacco use is a leading preventable cause of mortality from lung cancer, cardiovascular disease, and other diseases” (Puckett, et al., 2015, p. 1221). The current classroom time spent educating therapists to assist patients with this public health concern is less than one hour. Respiratory care program managers report the lack of available curriculum time and lack of faculty expertise as explanations for this important shortage in healthcare education (Puckett, et al., 2015).

While undergraduate programs struggle to meet the curricular challenge of this important public health issue, the graduate program is the ideal medium to advance the study of tobacco-related topics. The proposed master's program also includes
nicotine pharmacology, principles of addiction, and behavior modification as part of two courses within the core curriculum within the patient education and therapeutic intervention courses.

Graduate Education and Industry Workforce: Master’s degree programs also provide the opportunity for a specific focus on leadership skills and advanced research that are not possible in undergraduate education. Baker and Lewis (2007) report master’s graduates are more successful in publishing, presenting, teaching awards, promotion, and externally funded grants than undergraduates. The AARC, in its position statement of April 2013, clearly supports the advancement of the profession via higher education (AARC, 2013). The AARC asserts,

…the respiratory therapists seeking to practice in advanced clinical settings, in leadership roles, and in professional educator roles be strongly encouraged to seek higher education at the masters or doctoral levels, demonstrating the value of advanced learning in their own organization. (para. 5)

The AARC position statement also encourages universities to provide the graduate school opportunities required to meet educational needs. “Academic institutions which conduct respiratory therapy education should develop bachelor’s, master’s, and doctoral programs at this time to support the need for such higher education within the field of respiratory care” (AARC, 2013, para. 6).

In January 2016, the AARC released an unprecedented position statement on the future of respiratory therapy education in the nation. The background for this statement is the belief by the AARC that the knowledge base for the RC field is continually expanding and RTs should complete academic preparation equivalent to an advanced practice role. An excerpt from the AARC position statement follows.

Training and education for entry-to-practice as a respiratory therapist should be provided within programs awarding a bachelor’s or master’s degree in respiratory care (or equivalent degree titles) and all newly accredited respiratory care educational programs must award, as a minimum, the bachelor’s degree in respiratory care (or equivalent degree title)…Respiratory therapists seeking to practice in advanced clinical settings, leadership roles, research, and in professional educator roles should seek higher education at the masters or doctoral levels. (AARC Position Statement on Respiratory Therapy Education, January 27, 2016).

The impact of this statement resulted in a major accreditation policy change as released by CoARC, the accreditation agency for all respiratory therapy education programs.

The CoARC acknowledges that respiratory therapists with baccalaureate and graduate education are needed in larger numbers to serve as educators, researchers, managers, clinical specialists, and other roles throughout the healthcare delivery system…To support the increasing extent and complexity
of the skills required of graduates of Respiratory Care programs and the associated movement of the profession toward baccalaureate and graduate degrees, the CoARC Board of Commissioners, in collaboration with the AARC, is proposing the following change to Standard 1.01 in the Accreditation Standards for Entry into Respiratory Care Professional Practice, to be effective January 1, 2018:

Except as provided in the following sentence, an educational sponsor must be a post-secondary academic institution accredited by a regional or national accrediting agency that is recognized by the U.S. Department of Education (USDE) and must be authorized under applicable law or other acceptable authority to award graduates of the program a baccalaureate or graduate degree upon at the completion of the program. (CoARC Response to AARC Position Statement on Respiratory Therapy Education, January 28, 2016.)

In accordance with the AARC statement and the CoARC statement, the proposed master’s degree program will increase the administrative workforce needed to fill leadership roles as respiratory care department managers, supervisors, and clinical educators, while also providing a discipline-specific master’s degree for those pursuing an academic career path in higher education. The specialized curriculum will provide skills necessary for effective healthcare leaders in the healthcare industry workplace, in clinical research, and in higher education as academicians.

In Texas and the nation, the need for masters prepared RTs is increasing with the growing number of hospital services demanded by healthcare needs of the population. The growing healthcare population, and the needs of this population, requires an increasing workforce, especially RTs. Available RT positions are diverse and consistent with the proposed MSRC degree curriculum. In the attached letters of support found in Attachment B from various leaders in the respiratory profession, the critical need for graduate programs within the respiratory care profession cannot be overemphasized. Dr. Jon Nilsestuen, Professor Emeritus and previous Chair at the University of Texas Medical Branch in Galveston states,

In order to meet the growing need for therapists with advanced levels of training, the educational community will have to support the development of graduate education to train educators to fill faculty positions; to train researchers in each of the specialty areas; and to train managers for supervising inpatient and outpatient respiratory care services, homecare and rehabilitation services.

Dr. Thomas Barnes, President of CoBGRTE, states,

The development of master's programs for graduates of baccalaureate RT programs is essentially important as the field moves to a professional workforce with a BSRC or a master's degree as the entry-level. This will require doubling the number of baccalaureate programs and larger graduating
classes. Both of these critical changes will require more RRTs with graduate
degrees to serve as faculty.

Dr. Lynda Goodfellow, Professor and Associate Dean for Academic Affairs at
Georgia State University states,

Just as in any health professions specialty, there is a severe shortage of
qualified candidates for faculty positions, whether they are doctoral or
masters-prepared in respiratory care. This proposed MSRC will serve to
prepare future faculty members. Along with future faculty preparation, a
graduate post-professional masters will prepare tomorrow’s leaders in
healthcare management, a new generation of clinical educators in our health
facilities and medical industry trailblazers…I believe respiratory therapy
students at research-intensive universities are the leaders of our profession.
Your proposed MSRC degree can provide the expertise needed for those
students to become leaders and reach their full potential.

Dr. Christy Kane, Chair and Program Director of Respiratory Care at Beliarminne
University states,

In the Louisville area alone, more than half of the hospital-based managers
plan to retire in the next five years. Hospital-based educators as well as
therapists involved in quality improvement are also nearing retirement age.
The Texas State proposed program will meet this need and produce our
profession’s future leaders.

**Graduate Education and Academic Workforce:** Equally important in the timing of
the proposed MSRC degree is the imminent turnover expected in the academic
workforce. Dr. Christy Kane’s statement above and in her letter of support reinforces
this reality. In 2014, the AARC published the Human Resource Survey of Education
Programs (HRSEP) to disseminate information on program size, faculty and student
characteristics, compensation, and programmatic content, trends, and challenges.
The 2014 HRSEP reported over 49% of current academic institution respiratory care
program directors will retire from higher education in the next decade and nearly
75% will retire within fifteen years. Likewise, within academic respiratory therapy
departments in higher education institutions, nearly 30% of Director of Clinical
Education key personnel will retire from higher education in the next decade and
50% will retire in fifteen years. The survey reports additional faculty needs in RC
academic departments for program faculty positions with retirement rate
percentages similarly alarming. The survey also addresses the current inability to fill
academic positions with the present academic workforce. When reporting the
difficulties of recruiting new faculty for higher education positions, the HRSEP
reports that over 32% of responses indicate applicants did not meet academic
preparation requirements for the position and over 27% of the responses indicate
applicants lacked teaching experience (AARC, 2014).
Regional accreditation agencies for higher education, such as SACSCOC, require faculty to have a minimum of 18 upper-division graduate hours in the specific discipline in which he/she teaches to meet qualification thresholds. Because there are currently no doctoral programs in RC, most undergraduate RC programs hire faculty with a master's degree as the terminal degree for both tenure track and non-tenure-line faculty positions. At Texas State, the terminal degree required for faculty hiring in the Department of Respiratory Care is the master's degree due to the lack of a doctoral degree in the RC discipline. Individuals prepared by the proposed MSRC degree program would be qualified, according to SACSCOC standards, to meet the rising academic RC faculty crisis in community colleges and universities in the State of Texas.

Respiratory therapists holding the MSRC degree will be academically qualified for teaching positions within associate, baccalaureate, and some graduate degree programs. This important professional need and the implementation of the proposed degree will increase the applicant pool of eligible applicants for higher education academic positions and address the critical faculty and key personnel turnover expected within the next decade and beyond.

A gap currently exists in both industry and academia for positions requiring/preferring a master's degree. Currently, thirty-two accredited Texas programs offer an undergraduate RC degree in the state. Twenty-seven programs confer the associate degree, while five programs award the bachelor's degree (CoARC, 2014). The University of Texas Health Science Center at San Antonio was approved in 2015 to confer the MSRC degree as an entry-level to professional-practice program and as a post-professional degree.

All associate degree granting accredited RC programs in Texas require a master's degree for the Program Director position and prefer a master's degree for the Director of Clinical Education position. All baccalaureate RC programs in Texas require the doctorate degree for the Program Director and at least a master's degree for the Director of Clinical Education. Faculty positions in baccalaureate programs require at least a master's degree. There are approximately 135 full-time faculty teaching in the thirty-two RC programs in community colleges and universities in the State of Texas, the majority of whom possess a master's degree or higher as required to meet SACSCOC accreditation standards. The current average age of RC program faculty nation-wide is approximately fifty-five years of age. During the next 5-10 years, a significant movement toward the retirement of “baby-boomer” educators currently teaching in programs in Texas and throughout the nation is expected. The AARC has voiced considerable concern over the aging RC educator age mean and the insufficient pool of academically qualified respiratory practitioners with masters and doctoral degrees to meet this looming need.
As shown in the above tables, there are only six *post-professional* respiratory therapy-related master’s degree programs currently in the nation. All post-professional programs accept students with a bachelor’s degree from a regionally-accredited university accompanied by the RRT national credential. Several of the programs give preference to applicants with a bachelor of science in a health profession. Four programs specifically award the MSRC degree. Two of the six graduate programs offer a master’s degree other than the MSRC degree. Three post-professional programs are located in non-health science centers and three post-professional programs are located in health science centers. Comparable data related to the six programs granting post-professional degrees outside Texas and within Texas are located in Table 3 and Table 4 below. The cohort size reported represents the total number of seats available for each annually admitted cohort and not the current enrollment.
With a total annual national cohort of 57 potential graduates and a total state cohort of 15 graduates, clearly there is a significant need for additional graduate-level therapists to meet the increasing demands in the healthcare industry and academia within Texas and the nation. Concerning faculty qualifications for higher education, the proposed MSRC program would also meet the SACSCOC requirement for 18 upper-division graduate hours in the specific discipline in which the faculty member is teaching. In summary, the MSRC degree would prepare individuals at the graduate level to meet the escalating RC faculty crisis facing the RC academic needs in the State of Texas. The proposed MSRC concentrations in Leadership and in Polysomnography will prepare future leaders in the state to meet the needs in the healthcare industry as well.

B. Student Demand – Provide short- and long-term evidence of demand for the program.

An online needs assessment survey was developed and administered to determine the extent of demand and interest in a proposed MSRC post-professional degree at Texas State. Approximately 572 surveys were sent nationwide to therapists and directors/chairs in academic settings. Surveyed communities of interest within the state included past graduates, hospital managers of Respiratory Care, respiratory care clinicians, adjunct faculty teaching clinical courses, Respiratory Care Department at Texas State Advisory Board members, and current juniors/seniors enrolled in the Texas State BSRC Program. Of the 149 respondents (26% return), 135 (91%) indicated Texas residency, while 14 (9%) resided outside the state. Respondents included representation from current students, graduates, clinicians, educators, and managers. The highest degree completed among the respondents was the master’s degree (10%) while the baccalaureate degree was the most common degree held (54%). Sixty percent of the respondents reported they are not currently attending college.

Analysis of Survey Results:

- 106 respondents (71%) reported that they would be better served professionally with an MSRC degree program than the pathways currently available.
- 80 respondents (54%) reported if there had been a Texas State master's degree in respiratory care when choosing a graduate degree, they would have enrolled in the MSRC program.
- 75 respondents (50%) reported consideration of enrolling in a master's degree program in respiratory care.
- 60 respondents (40%) reported an MSRC would offer greater opportunities for promotion in his/her current employment, while 37 respondents (25%) reported they were not sure.
- 90 respondents (64%) would prefer to attend an “online only” program, while an additional 45 respondents (30%) would prefer a hybrid program with some courses taught face-to-face on campus.
Most importantly, 124 respondents (83%) indicated they would enroll or consider enrolling in the proposed MSRC program projected to begin fall 2017.

From the survey respondents, the preferred choice of course offerings was leadership/management, human resource management, supervision, and healthcare economics. The second preferred choice was clinical sub-specialty in polysomnography, neonatal pediatrics, adult critical care, asthma educator, and pulmonary function diagnostics. These clinical sub-specialties result in eligibility to sit for additional national credentialing exams, qualifying therapists for advancement. The associated national credentials in interest to the respondents included Sleep Disorders Specialist (SDS), Registered Polysomnographic Technologist (RPSGT), Registered Sleep Technologists (RST), Neonatal Pediatric Specialist (NPS), Adult Critical Care Specialist (ACCS), Certified Asthma Educator (AE-C), and Registered Pulmonary Function Technologist (RPFT).

The survey results of a wide variety of communities of interest inside and outside of Texas overwhelmingly support a strong interest in the online MSRC degree program, e.g. 83% indicated they would enroll of consider enrolling in the proposed online MSRC. The surveyed RC practitioners were enthusiastically interested in pursuing a RC graduate degree in order to meet current career goals, e.g. 71% reported they would be better served professionally with an MSRC than the current pathways available. As employed, practicing clinicians, the respondents preferred an online format for the proposed degree because it will meet the needs of full-time or part-time employed RTs in the clinical setting. The proposed MSRC curriculum was developed in direct response to the strong interest for a Leadership concentration of courses and a Polysomnography concentration of courses.

C. Enrollment Projections – Use this table to show the estimated number of new students, cumulative headcount, full-time student equivalent enrollment, attrition, and graduates for the first five years of the program. The enrollment projections will reflect student demand estimates to ensure financial self-sufficiency of the program by the end of the program’s fifth year. In calculating yearly FTSE, the Coordinating Board defines 24 SCH to be equal to 1 FTSE for master’s programs. Provide an explanation of the assumptions used in projecting student enrollments.
<table>
<thead>
<tr>
<th>YEAR</th>
<th>FY 2018</th>
<th>2 FY 2019</th>
<th>3 FY 2020</th>
<th>4 FY 2021</th>
<th>5 FY 2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Students</td>
<td>20 full-time 5 part-time</td>
<td>20 full-time 5 part-time</td>
<td>20 full-time 5 part-time</td>
<td>20 full-time 5 part-time</td>
<td>20 full-time 5 part-time</td>
</tr>
<tr>
<td>Cumulative Headcount</td>
<td>25</td>
<td>48</td>
<td>53</td>
<td>53</td>
<td>53</td>
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<tr>
<td>SCH</td>
<td>600</td>
<td>822</td>
<td>882</td>
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<tr>
<td>FTSE</td>
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<td>36.75</td>
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<tr>
<td>Attrition</td>
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<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Graduation</td>
<td>0</td>
<td>18</td>
<td>23</td>
<td>23</td>
<td>23</td>
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</table>

- FTSE are estimated at 80% of total enrollments enrolled full-time with 20% enrolled part-time. FTSE estimates utilize the 24 SCH/year definition from THECB. MSRC full-time students will enroll in 27 hours in their first year and 9 hours in their second year.
- Full-time (20) students are sequenced for 4 semesters taking 9 SCH each semester for the 36 hour program.
- Full-time cohorts begin with Fall admission.
- Attrition is estimated from the full-time cohorts only.
- Part-time (5) students are sequenced for 9 semesters taking 3-6 SCH per semester for the 36 hour program.

II. Quality

A. Degree Requirements – Use this table to show the degree requirements of the program. (Modify the table as needed; if necessary, replicate the table for more than one option.)

The degree requirements for each concentration are shown in the tables below. Each concentration targets a specific student audience and is designed to advance career and professional opportunities in that concentration. The concentrations share 24 credit hours of core courses that emphasize advanced cardiopulmonary physiology, evidenced-based medicine, patient education, healthcare ethics, program needs assessment and evaluation, management and finance for mid-level managers, behavior modification, and research. Additionally, students will complete a final research project presentation that will serve as a comprehensive exam to determine the degree to which students have learned, integrated, and are able to apply required information and skills in the specialty concentration.

The Leadership Concentration contains curricular offerings for students whose career interests include leadership, research, and education within the healthcare industry and academia. A student in this concentration may fill job roles as respiratory care department manager within a healthcare facility, patient/clinical
educator, clinical research assistant, patient advocate, or academic professor. Students with healthcare industry leadership experience may also pursue this concentration to expand current leadership skill sets at the graduate-level to become more competitive in qualifying for advancing employment opportunities. The enrollment projections for the Leadership concentration are estimated at 12 new full-time students each year and 5 new part-time students. This estimate is based upon survey results.

The Polysomnography Concentration is designed for students whose professional goals include a cutting-edge approach to the diagnosis and treatment of sleep apnea. A student in this concentration is interested in managing or providing leadership in a sleep center or sleep lab located in a healthcare facility or as a stand-alone business. Clinical research in sleep is expanding and this concentration would provide both the foundational understanding for research and qualify the student to sit for national board examinations to earn specialty credentials in polysomnography. The gained expertise in sleep disorders, diagnostics, and treatment, the preparation toward an additional specialty national credential, and participation in graduate-level research will provide a premier, one-of-a-kind educational experience in this concentration. The enrollment projections for the Polysomnography concentration are estimated at 8 new full-time students each year. This estimate is based upon survey results.

Both concentrations include an intensive research focus designed to gain experience with advanced research techniques, clinical trial reports, and hands-on bench research experience.

<table>
<thead>
<tr>
<th>Leadership Concentration</th>
<th>SCH</th>
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<tr>
<td>Required Courses (24 core + 12 specialty concentration)</td>
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<tr>
<td>Prescribed Electives</td>
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</tr>
<tr>
<td>Free Electives</td>
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</tr>
<tr>
<td>Other (Specify, e.g., internships, clinical work)</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL</td>
<td>36</td>
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<table>
<thead>
<tr>
<th>Polysomnography Concentration</th>
<th>SCH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Required Courses (24 core + 10 specialty concentration)</td>
<td>34</td>
</tr>
<tr>
<td>Prescribed Electives</td>
<td>0</td>
</tr>
<tr>
<td>Free Electives</td>
<td>0</td>
</tr>
<tr>
<td>Other (clinical work)</td>
<td>2</td>
</tr>
<tr>
<td>TOTAL</td>
<td>36</td>
</tr>
</tbody>
</table>

B. Curriculum
1. Discuss and highlight the importance of the proposed educational objectives of the program.

The proposed educational objectives of the program are:

1) To provide a degree program that will prepare students for the emerging roles and functions within the respiratory care domains of leadership and clinical specializations.

2) To provide graduate level education that will prepare students to advance problem-solving skills with the ability to analyze and evaluate systems, technology, regulations, data needs to assist in creating new programs and systems, and policy development.

3) To provide a broad-based program of coursework that supports the varied aspects of RC practice focusing on management, supervision, education, evidence-based medicine, and healthcare research.

4) To provide coursework to prepare graduates to better serve as leaders and physician-extenders in clinical, managerial, and extended care settings.

The above educational objectives are obtained in the following core curriculum courses that provide students with a broad level of educational materials and activities which will prepare them for emerging healthcare provider roles, such as physician-extender, disease educator, and advanced practice therapist.

- **RC 5301 Advanced Cardiopulmonary Physiology** will provide a core in-depth study of the cardiopulmonary system beginning with normal function and extending to selected disease-specific pathological and physiological changes while providing opportunities to analyze and evaluate systems from an evidence-based medical perspective.

- **RC 5302 Clinical Practice Guidelines and Respiratory Care Protocols** examines the role and development of CPGs and protocols for improving the quality of patient care through point-of-care assessment and treatment modification by respiratory therapists as physician-extenders. An emphasis on patient care problem-solving associated with protocol construction will be analyzed within the guidelines of evidence-based medicine.

- **RC 5303 Respiratory Care Research Methods and Designs and RC 5305 Respiratory Care Applied Research** will allow students to participate in research project design, test statistic selection, research ethics, project implementation, data collection and interpretation, and professional communication of research findings. Required study will include research theory and data analysis, innovative and best practices in healthcare, public healthcare policy, initiatives concerning nicotine addiction, and cardiopulmonary disease management issues affecting the aging population. Students will develop and present research papers of publication quality from an evidence-based medical perspective.
• RC 5304 Cardiopulmonary Disease Patient Education highlights the essential role of patient education in successful self-management of disease exacerbation and quality of life. Educational program development for creating and analyzing selected cardiopulmonary disorders will include behavior modification for unhealthy lifestyle issues, such as nicotine addiction in patients with lung disease.

• RC 5306 Academic Leadership in Respiratory Care provides an introduction to the complexities of leadership roles in academia required for successful operation of a respiratory care or polysomnography first-profession, entry-level program in higher education. The required leadership roles of program director, director of clinical education, medical director, and key personnel faculty are delineated with all associated requirements of external professional accreditation agencies, including professional accreditation annual reports and self-studies, and aspects of annual and day-to-day operation of a department of RC in a university or community college setting. Special consideration is given to fiscal planning, curriculum development, and outcomes assessment for respiratory therapy programs as related to academic leadership of an educational respiratory therapy program.

• RC 5307 Advanced Respiratory Care Seminar will serve as a capstone and summative experience examining the current trends and issues facing the profession and patient care outcomes through advanced problem-solving analysis and evaluation. The development of new patient services to meet the changing needs of cardiopulmonary patients in the spirit of entrepreneurship will be explored.

• RC 5308 Advanced Cardiopulmonary Diagnostics and Therapeutics explores cutting edge technology and procedures for specific cardiopulmonary disorders relative to diagnosis and treatment. Advances in both diagnostics and management of cardiopulmonary diseases linked to the World Health Organization and international standards will be emphasized. The emerging venues and roles of the respiratory therapist as a physician-extender will be explored.

Additionally, the educational objectives are obtained in the following Leadership Concentration courses that provide applied respiratory care-specific leadership course content, including healthcare economics and financial theory, healthcare law, healthcare organizational behavior and theory, and financial management. The Leadership Concentration will prepare graduates present and future roles as healthcare facility respiratory care department managers, patient/clinical educators, research assistants, patient advocates, or academic professors. All courses for the Leadership Concentration will be provided as support courses by the graduate faculty of the School of Health Administration (SOHA) at Texas State and are currently taught in SOHA's degree programs. A letter of support for the online delivery of the Leadership Concentration support courses for the MSRC program is provided by the SOHA Director, Dr. Matthew Brooks, in Attachment B.
• HA 5304 Healthcare Economics and Financial Theory will provide a focused study on economic theories and their impact on the healthcare industry and the emerging leadership roles of the healthcare unit manager.
• HA 5321 Healthcare Law will require an in-depth analysis of healthcare law and its effect on patient, family, third-party provider, and provider relationships as leaders in diverse healthcare delivery systems.
• HA 5362 Healthcare Organizational Behavior/Theory provides a strong emphasis on behavior and the social sciences with a focus on building leadership and ethics including problem-solving relating to organizational operations.
• LTCA 5335 Financial Management in Long Term Care will examine the fiscal performance of selected facilities, comparing Medicaid cost reports with revenue enhancement and census development. Reimbursement issues as part of strategic planning will be contrasted by examining various systems of reimbursement typical of departmental/unit healthcare facilities.

The educational objectives are obtained in the following Polysomnography Concentration provide students with specialized courses in sleep disorder pathophysiology, theory, and management.

• RC 5211 Polysomnography Instrumentation provides students with various multi-biometric diagnostic procedures and discrete physiologic measurements within the domains of this clinical specialization required to provide the physician with specific diagnostic test results needed to secure a patient diagnosis.
• RC 5214 Sleep Staging and Diagnostics provides specific therapeutic treatment options that are applied to the patient to determine the exact treatments needed to resolve the specific sleep disorder.
• RC 5215 Clinical Polysom-Sleep Staging prepares students to enhance patient care outcomes through analyzing, problem-solving, and evaluation based on patient diagnostic results.
• RC 5310 Fundamental of Polysomnography provides students with an overall survey of the theory of sleep diagnostics, intervention, and the pathophysiology associated with sleep breathing disorders according to evidence-based outcome medical standards.
• RC 5313 Polysom Therapeutic Intervention provides advanced sleep disorder-specific knowledge of patient disease management and the patient education through developing intervention systems and providing advanced clinical support for physician-extender patient management.

2. Use these tables to identify the required courses and prescribed electives of the program. Note with an asterisk (*) new courses that would be added if the program were approved. Active courses that will be used in this program should be reviewed to determine if changes are needed to those courses because of the new program, e.g., contact hours, co-requisites,
descriptions, prerequisites, restrictions, titles, etc. (not to include prefix or numbers.)

<table>
<thead>
<tr>
<th>Prefix and Number</th>
<th>Core Curriculum Required Courses</th>
<th>SCH</th>
</tr>
</thead>
<tbody>
<tr>
<td>RC 5301*</td>
<td>Advanced Cardiopulmonary Physiology</td>
<td>3</td>
</tr>
<tr>
<td>RC 5302*</td>
<td>Clinical Practice Guidelines and Respiratory Care Protocols</td>
<td>3</td>
</tr>
<tr>
<td>RC 5303*</td>
<td>Respiratory Care Research Methods and Designs</td>
<td>3</td>
</tr>
<tr>
<td>RC 5304*</td>
<td>Cardiopulmonary Disease Patient Education</td>
<td>3</td>
</tr>
<tr>
<td>RC 5305*</td>
<td>Respiratory Care Applied Research</td>
<td>3</td>
</tr>
<tr>
<td>RC 5306*</td>
<td>Academic Leadership in Respiratory Care</td>
<td>3</td>
</tr>
<tr>
<td>RC 5307*</td>
<td>Advanced Respiratory Care Seminar</td>
<td>3</td>
</tr>
<tr>
<td>RC 5308*</td>
<td>Advanced Cardiopulmonary Diagnostics and Therapeutics</td>
<td>3</td>
</tr>
<tr>
<td>SUB-TOTAL</td>
<td></td>
<td>24</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Prefix and Number</th>
<th>Leadership Concentration Required Courses</th>
<th>SCH</th>
</tr>
</thead>
<tbody>
<tr>
<td>HA 5304</td>
<td>Healthcare Economics and Financial Theory</td>
<td>3</td>
</tr>
<tr>
<td>HA 5321</td>
<td>Healthcare Law</td>
<td>3</td>
</tr>
<tr>
<td>HA 5362</td>
<td>Healthcare Organizational Behavior/Theory</td>
<td>3</td>
</tr>
<tr>
<td>LTCA 5335</td>
<td>Financial Management in Long Term Care</td>
<td>3</td>
</tr>
<tr>
<td>SUB-TOTAL</td>
<td></td>
<td>12</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Prefix and Number</th>
<th>Polysomnography Concentration Required Courses</th>
<th>SCH</th>
</tr>
</thead>
<tbody>
<tr>
<td>RC 5211</td>
<td>Polysomnography Instrumentation</td>
<td>2</td>
</tr>
<tr>
<td>RC 5214</td>
<td>Sleep Staging and Diagnostics</td>
<td>2</td>
</tr>
<tr>
<td>RC 5215</td>
<td>Clinical Polysom-Sleep Staging</td>
<td>2</td>
</tr>
<tr>
<td>RC 5310</td>
<td>Fundamentals of Polysomnography</td>
<td>3</td>
</tr>
<tr>
<td>RC 5313</td>
<td>Polysom Therapeutic Intervention</td>
<td>3</td>
</tr>
<tr>
<td>SUB-TOTAL</td>
<td></td>
<td>12</td>
</tr>
</tbody>
</table>

More details about the above listed courses can be found in Attachment A. Upon approval of the MSRC degree, the graduate certificate program in Polysomnographic Technology will be deleted as a certificate program, but the polysomnography courses will be retained to be included with the MSRC Polysomnography Concentration.

3. Using the courses listed above, complete the following table to show how each of the proposed educational objectives of the program are addressed in the coursework. Each of the above courses must be included in the following objective chart.
<table>
<thead>
<tr>
<th>Program Objectives</th>
<th>Courses in which objectives are specifically addressed</th>
</tr>
</thead>
</table>
| Program Objective 1: To provide a degree program that will prepare students for the emerging roles and functions within the respiratory care domains of leadership and clinical specializations. | RC 5301 Advanced Cardiopulmonary Physiology  
RC 5302 Clinical Practice Guidelines and Respiratory Care Protocols  
RC 5303 Respiratory Care Research Methods and Designs  
RC 5304 Cardiopulmonary Disease Patient Education  
RC 5305 Respiratory Care Applied Research  
RC 5306 Academic Leadership in Respiratory Care  
RC 5307 Advanced Respiratory Care Seminar  
RC 5308 Advanced Cardiopulmonary Diagnostics and Therapeutics  
RC 5310 Fundamentals of Polysomnography  
RC 5211 Polysomnography Instrumentation  
RC 5313 Polysom Therapeutic Intervention  
RC 5214 Sleep Staging and Diagnostics  
RC 5215 Clinical Polysom-Sleep Staging  
HA 5304 Healthcare Economics and Financial Theory  
HA 5321 Healthcare Law  
LTCA 5335 Financial Management in Long Term Care |
| Program Objective 2: To provide graduate level education that will prepare students to develop problem-solving skills with the ability to analyze and evaluate systems, technology, regulations, data needs to assist in creating new methods, and in policy development. | RC 5302 Clinical Practice Guidelines and Respiratory Care Protocols  
RC 5303 Respiratory Care Research Methods and Designs  
RC 5304 Cardiopulmonary Disease Patient Education  
RC 5305 Respiratory Care Applied Research  
RC 5306 Academic Leadership in Respiratory Care  
RC 5308 Advanced Cardiopulmonary Diagnostics and Therapeutics  
RC 5310 Fundamentals of Polysomnography  
RC 5211 Polysomnography Instrumentation  
RC 5313 Polysom Therapeutic Intervention  
RC 5214 Sleep Staging and Diagnostics  
RC 5215 Clinical Polysom-Sleep Staging  
HA 5304 Healthcare Economics and Financial Theory  
HA 5321 Healthcare Law |
<table>
<thead>
<tr>
<th>Program Objectives</th>
<th>Courses in which objectives are specifically addressed</th>
</tr>
</thead>
</table>
| Program Objective 3: To provide a broad-based program of coursework that supports the varied aspects of RC practice focusing on management, supervision, education, evidence-based medicine, and healthcare research. | HA 5362 Healthcare Organizational Behavior/Theory  
LTCA 5335 Financial Management in Long Term Care |
| Program Objective 4: To provide coursework to prepare graduates to better serve as leaders and physician-extenders in clinical, managerial, and extended care settings. | RC 5302 Clinical Practice Guidelines and Respiratory Care Protocols  
RC 5304 Cardiopulmonary Disease Patient Education  
RC 5307 Advanced Respiratory Care Seminar  
RC 5308 Advanced Cardiopulmonary Diagnostics and Therapeutics  
RC 5310 Fundamentals of Polysomnography  
RC 5211 Polysomnography Instrumentation  
RC 5313 Polysom Therapeutic Intervention  
RC 5214 Sleep Staging and Diagnostics  
RC 5215 Clinical Polysom-Sleep Staging  
RC 5315 Academic Leadership in Respiratory Care  
HA 5304 Healthcare Economics and Financial Theory  
HA 5321 Healthcare Law  
HA 5362 Healthcare Organizational Behavior/Theory |
C. Faculty – Faculty resources must be adequate to provide high program quality. There should be sufficient numbers of qualified faculty dedicated to a new program. Use these tables to provide information about Core and Support faculty. Add an asterisk (*) before the name of the individual who will have direct administrative responsibilities for the program. Each of the courses listed above in the Curriculum Section must be included in the following table under Courses Assigned in Program. A minimum number of faculty shall be devoted specifically to the proposed master’s program. Three FTE or two FTE if comprised of four individual faculty members. At least 50 percent of the faculty FTE supporting a master’s program must be core faculty.

<table>
<thead>
<tr>
<th>Name of Core Faculty and Faculty Rank</th>
<th>Highest Degree and Awarding Institution</th>
<th>Courses Assigned in Program</th>
<th>% Time Assigned To Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>*Russian, Christopher Professor and Graduate Program Director</td>
<td>Ph.D., Texas State University</td>
<td>RC 5308, RC 5310, RC 5313, RC 5214</td>
<td>100%</td>
</tr>
<tr>
<td>Harkins, Lynda Clinical Associate Professor</td>
<td>Ph.D., The University of Texas at Austin</td>
<td>RC 5303, RC 5304, RC 5305</td>
<td>50%</td>
</tr>
<tr>
<td>Marshall, S. Gregory Professor and Chair</td>
<td>Ph.D., The University of Texas at Austin</td>
<td>RC 5211, RC 5215, RC 5307</td>
<td>50%</td>
</tr>
<tr>
<td>New Associate/Assistant Professor in Year One</td>
<td>TBN</td>
<td>RC 5301, RC 5302, RC 5304, RC 5306, RC 5308</td>
<td>75%</td>
</tr>
<tr>
<td>New Associate/Assistant Professor in Year One</td>
<td>TBN</td>
<td>RC 5211, RC 5214, RC 5301, RC 5302, RC 5310, RC 5313</td>
<td>75%</td>
</tr>
<tr>
<td>New Assistant Professor in Year Two</td>
<td>TBN</td>
<td>RC 5211, RC 5214, RC 5301, RC 5302, RC 5310, RC 5313</td>
<td>75%</td>
</tr>
</tbody>
</table>

Dr. Christopher Russian, Professor, joined the Department of Respiratory Care in 1999 as a clinical instructor and then full-time as a lecturer in 2000. Dr. Russian was tenured in 2008 and promoted to Professor in 2016. He holds a Bachelor of Science in Kinesiology from Sam Houston State University and a Bachelor of Science in Respiratory Care from Texas State University. He completed a Master in Education in Physical Education and a Ph.D. in Adult, Professional, and Community Education from Texas State, as well. Dr. Russian is nationally credentialed as a RRT, a registered polysomnographic technologist (RPSGT), a registered sleep technologist (RST), and a Neonatal Pediatric Specialist (RRT-NPS) with state
licensure as a Respiratory Care Practitioner (RCP) in the State of Texas. He is currently serving as Director of Clinical Education for the respiratory care and polysomnography programs. Upon approval of the MSRC proposal, Dr. Russian will step down from serving as the Director of Clinical Education to fill the MSRC Graduate Program Director role. His research focus of evidence-based practice in the clinical setting includes topics of ventilatory mechanics, anatomic flow dynamics of the upper airways, respiratory resistance training for athletes and paraplegic individuals, sleep disorders, leadership, and student learning styles. Dr. Russian has published book chapters, peer-reviewed journal articles of high quality at the national level, peer-reviewed abstracts, and provided peer-reviewed presentations at local, state, national, and international conferences. He serves as a reviewer for one national and one international peer-reviewed journal. Dr. Russian has five years of experience in online course development and instruction.

Dr. Lynda Harkins, Clinical Associate Professor, joined the Department of Respiratory Care in 1984 as an Assistant Professor with a Bachelor of Science in Respiratory Therapy from Medical College of Georgia, a Master of Science in Allied Health Education from Texas State University, and a Ph.D. in Education from The University of Texas at Austin. She holds a national credential as an RRT with a license in the State of Texas as an RCP. Dr. Harkins was tenured and promoted to Associate Professor in 1994 before transitioning to Clinical Associate Professor in 2009 and has continued to teach in the Department of Respiratory Care. Her primary teaching expertise includes statistics, research design and methodology, pharmacology, cardiopulmonary renal anatomy and physiology, and distance education. Dr. Harkins’ research interest and accomplishments include ten peer-reviewed publications on distance education, inter-rater reliability, stress management and role ambiguity, and predictors of student success with funded grants over $1.7 million. Dr. Harkins has over fifteen years of experience in online course development and instruction.

Dr. S. Gregory Marshall, Professor, joined the Department of Respiratory Care in 1980. He received a Bachelor of Science in Biology from Baylor University, a Master of Science in Health Professions with a double major in Healthcare Administration and Allied Health Education from Texas State University, and a Ph.D. in Education from The University of Texas at Austin. Dr. Marshall was tenured in 1986. He holds national credentials as an RRT and an RPSGT, and a registered sleep technologist (RST). He is licensed in the State of Texas as an RCP. He served as Director of Clinical Education for the Respiratory Care Department for 23 years at Texas State and has served as Chair and Program Director for the Respiratory Care and the Polysomnographic Technology programs since 2003. His research interests include sleep disorders, ventilatory mechanics, anatomic flow dynamics of the upper airways, leadership and learning styles, and healthcare management. Dr. Marshall has published high quality, peer-reviewed journal articles, textbook chapters, abstracts, and provided peer-reviewed presentations at state, national, and international conferences. He serves as a
reviewer for one national and one international peer-reviewed journal. Dr. Marshall has over six years of experience in online course development and instruction.

Per the Department of Respiratory Care Strategic Plan, three 100% FTE new faculty hires will be needed to support the proposed program. Two tenure-track associate/assistant professors will be needed during the first year and one tenure-track assistant professor prior to the second year. Doctoral prepared faculty are required for the core and support courses, graduate faculty teaching the MSRC program will share teaching responsibilities at both the undergraduate and at the graduate levels. Graduate faculty from the SOHA will provide faculty for the support courses in the Leadership Concentration.

The prospects of hiring doctoral-level faculty with appropriate professional credentials in respiratory care to teach directly in the graduate program will be challenging given the current number of respiratory care faculty in the nation with the appropriate qualifications. Faculty holding a doctoral degree will be contacted directly during recruitment periods and doctoral programs in the health sciences discipline will be contacted regarding new and imminent doctoral graduates seeking employment opportunities. The scarcity of doctoral prepared Respiratory Care educators is a national concern. The AARC Human Resource Study in 2014 reported the total population of respiratory therapists in the U.S. holding NBRC credentials is 142,158. The population of RRT credentialed respiratory therapists holding a Ph.D. as educators was 26, representing 0.018% of the national population of therapists. Although the number of Ph.D. educators in respiratory care has increased to date, recruitment strategies for filling the three new faculty positions with doctoral prepared, respiratory care credentialed educators include direct contact with qualified faculty across the nation holding doctoral degrees, contacting doctoral programs seeking candidates who are ABD or recent graduates, and personal contact with retired doctoral prepared respiratory care educators interested in relocation.

Although the master’s degree is the terminal degree for hiring tenure-track faculty teaching at the undergraduate degree level in the Department of Respiratory Care, doctoral prepared faculty are required to teach at the graduate level. Presently, the Department of Respiratory Care at Texas State has three qualified doctoral prepared faculty with Graduate College appointments with two tenured associate professors with master’s degrees in the Department currently completing doctoral degrees. The current doctoral prepared faculty in the Department of Respiratory Care teach both at the graduate level in the polysomnographic technology graduate certificate post-baccalaureate program and in the BSRC program. Future doctoral prepared faculty will teach core and support courses in the MSRC program and teach in the BSRC program to effectively deliver the curriculum.
### Support Faculty and Faculty Rank

<table>
<thead>
<tr>
<th>Name of Support Faculty and Faculty Rank</th>
<th>Highest Degree and Awarding Institution</th>
<th>Courses Assigned in Program</th>
<th>% Time Assigned To Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adepoju, Lola Assistant Professor</td>
<td>Ph.D., Texas A&amp;M Health Science Center</td>
<td>HA 5304</td>
<td>12.5%</td>
</tr>
<tr>
<td>Renick, Oren Professor</td>
<td>J.D., Mississippi College</td>
<td>HA 5321</td>
<td>12.5%</td>
</tr>
<tr>
<td>Morrison, Eileen Professor</td>
<td>Ed.D., Vanderbilt University</td>
<td>HA 5362</td>
<td>12.5%</td>
</tr>
<tr>
<td>Mackenzie, Todd Clinical Assistant Professor</td>
<td>M.S., University of North Texas</td>
<td>LTCA 5335</td>
<td>12.5%</td>
</tr>
</tbody>
</table>

### Students – Describe general recruitment efforts and admission requirements.

In accordance with the institution’s Uniform Recruitment and Retention Strategy, describe plans to recruit, retain, and graduate students from underrepresented groups for the program.

Prior to the program start date, the RC Chair and faculty members will work with the Office of University Marketing and The Graduate College to develop marketing approaches (printed brochures, social media, mail-outs, and web page ads) that will introduce the new program to potential students. Appropriate advertisements will be placed in media associated with national and state associations related to the RC discipline and delivery of healthcare announcing the new program. In addition, the RC faculty has already been in contact with alumni and colleagues working in healthcare organizations throughout Texas and adjacent states to discuss the new program. In addition to these recruiting efforts, the RC faculty will attend regional and state RC association meetings to give brief presentations and showcase the new program. Senior students in the BSRC program at Texas State will also be recruited for migration into the new master’s program upon completion of their bachelor’s degree.

The BSRC program with a cohort of 40 students will be a primary feeder program for the MSRC. Seniors in the last semester of the BSRC will be taking the remaining 12 hours to complete the baccalaureate degree. These students will qualify for special permission from the Dean of The Graduate College to take one or two graduate courses concurrently with senior level BSRC courses. This provision will allow seniors to begin graduate studies and complete the MSRC degree online following baccalaureate graduation while they are working fulltime as a respiratory therapist. This feeder program will likely serve as the largest recruitment opportunity for current students to move toward a graduate degree education.

Graduates of the BSRC program are an excellent source for recruiting underrepresented groups and these individuals have already expressed strong support for the MSRC and enrollment interest. In May 2015, the Department of Respiratory Care Outcomes Report for SACSCOC accreditation showed 43.8% of
the students were Hispanic, 9.9% African-American, and 9.9% were of other minority. During this reporting period, all the above ethnic group percentages in the Respiratory Care programs had greater representation when compared to the State of Texas population ethnic percentages.

Additionally, since 2006 many respiratory care students have enrolled in the polysomnographic technology certificate program and completed graduate hours in PSG. This group of graduates would be an ideal pool for recruitment having previously completed PSG courses with the potential to satisfy the Polysomnography Concentration requirement of the MSRC degree.

Admission criteria for the MSRC include a bachelor’s degree from a regionally accredited institution and the RRT credential granted through the NBRC. Applicants must meet The Graduate College’s minimum GPA requirements of 2.75 for the last 60 hours of letter-grade coursework leading to the bachelor’s degree as well as for any graduate or professional coursework completed. To apply to the MSRC degree program, each applicant must submit the following to The Graduate College at Texas State:

- An official Texas State Graduate College application form through Apply Texas;
- A non-refundable application fee of $40.00;
- One official transcript from each senior level, post-secondary institution attended. These transcripts must be mailed directly from the institutions to The Graduate College;
- Three letters of reference from professionals or academics competent to assess the applicant’s interest in pursuing a career or advancing in the field of study;
- An up-to-date resume;
- An applicant’s written statement of purpose indicating ability and interest in completing the degree program; and
- Proof of the RRT national credential administered through the NBRC.

International students must adhere to the requirements stipulated by The Graduate College (http://www.gradcollege.txstate.edu/Prospect_Students/Intl_Info.html).

E. Library – Provide the library’s director’s assessment of library resources necessary for the program. Describe plans to build the library holdings to support the program.

The library is well prepared to provide the full-range of library services (on-site and virtually), to support the proposed program. See Attachment E for the library director’s assessment.

F. Facilities and Equipment – Describe the availability and adequacy of facilities and equipment to support the program. Describe plans for facility and equipment improvements/additions.
Current classroom, laboratory space, and available faculty offices are not adequate in the Health Professions Building on the San Marcos campus. However, the Health Professions Building 1 (HPB1) located on the Round Rock campus will provide excellent classroom, laboratory, and research space, and equipment needed for the proposed program. Although the proposed MSRC program is an online program meeting the Texas State definition of at least 85% of the curriculum being delivered online, there are some face-to-face components required. For those portions of the online program that require face-to-face interaction and evaluation of clinical skills, the new facility in Round Rock will provide a state-of-the-art learning experience for graduate students. Additionally, the HPB1 faculty office spaces provided will allow graduate faculty to meet with graduate students as needed and provide outstanding research facilities for graduate students and faculty. Additionally, the much needed space for staff accommodations and will also be adequately met in the new HPB1 on the Round Rock campus. Occupancy is anticipated for late spring 2018.

G. **Accreditation** – If the discipline has a national accrediting body, describe plans to obtain accreditation or provide a rationale for not pursuing accreditation.

The graduate certificate program with courses in polysomnographic technology is currently fully accredited in good-standing and has been accredited through CoARC since 2006. A recent 2015 CoARC self-study and site visit resulted in a 10-year continuing accreditation award (with no citations) to the PSG program through 2025. These courses will be placed in the MSRC curriculum sequence and will support the entire Polysomnography Concentration. CoARC accreditation standards for the polysomnography program will continue to be maintained in order to permit students completing the Polysomnography Concentration to sit for national board examinations with eligibility for two recognized national credentials as a sleep disorders specialist.

At this time, no external accreditation requirements exist for the accreditation of the Leadership Concentration of the proposed MSRC. Course topics and development for the Leadership Concentration resulted in part from interviews with current healthcare facility leaders and managers. Inquiries were made regarding specific course topics that would be most beneficial in preparing individuals for providing leadership and management of a Respiratory Care and Sleep Department in a healthcare facility.

Additionally, the Respiratory Care and Polysomnography Advisory Board was actively involved in the development and review of course content and sequence.

H. **Evaluation** – Describe the evaluation process that will be used to assess the quality and effectiveness of the new degree program.

1. Compile assessments of student learning outcomes each academic year. The
composite data from these assessments and associated actions will be posted to the University’s Student Learning Outcomes website. The student’s final research project presentation will serve as a comprehensive exam that determines the degree to which students have learned, integrated, and are able to apply required information and skills in the specialty concentration.

2. Annually survey past graduates to assess the knowledge base (cognitive domain), clinical proficiency (psychomotor domain), and behaviors skills (affective domain). The Polysomnography Concentration will require annual graduate surveys as part of the accreditation process required by CoARC. The survey will also be utilized to assess the Leadership Concentration MSRC graduates. The faculty will review the graduate survey results for both the Leadership Concentration and the Polysomnography Concentration and recommend course content modifications, as needed.

3. Conduct the Texas State’s Academic Program Review (APR) every five years as scheduled according to the university calendar. The APR involves three elements: a) a self-review culminating in an academic unit self-review report, b) a site visit by a program review team culminating in a program review team report, and c) a follow-up action plan from the academic unit in consultation with the college Dean, the Graduate Dean, the Provost and Vice President for Academic Affairs, and other administrators.

4. Every semester, obtain student evaluations of faculty for each graduate course. The chair and program coordinator will analyze comparative data and student comments in order to discuss issues related to teaching with those faculty members whose course means are significantly lower than those of other graduate faculty members.

5. The current Advisory Board for polysomnography courses is required to evaluate the program, faculty, and students according to CoARC accreditation standards.

I. Student Learning Outcomes – Describe the measurable outcomes for the proposed program.

The following student learning outcomes will guide core and concentration objectives:
<table>
<thead>
<tr>
<th>Student Learning Outcomes</th>
<th>Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students will be able to apply advanced knowledge of sleep diagnostics, treatment, and management to improve sleep disorder patient care outcomes.</td>
<td>Students must pass the American Association for Sleep Medicine Inter-Scorer Reliability (ISR) sleep studies. These studies require students to correctly recognize sleep stages and sleep disorders. Students must pass a mock polysomnography national credentialing exam. Students must pass clinical assessment of sleep disorder treatment/management.</td>
</tr>
<tr>
<td>Students will be able to propose and explain novel research projects using problem-solving skills, analyzing and evaluating technology, regulations, and data.</td>
<td>Students must defend their proposed research topic based on a project rubric. The rubric measures the student's ability search available literature, develop a sound project and methodology, complete IRB procedures, gather and analyze data, report findings. Students will present their research topics to program faculty and at local research venues.</td>
</tr>
<tr>
<td>Students will be able to develop a cardiopulmonary clinical practice guideline and disease management and education policy based on knowledge of human physiology, clinical research, and diagnostics/therapeutics.</td>
<td>Students must defend the proposed clinical practice guideline and disease management and education policy to the class and program faculty. The grade for the guideline and disease management and education policy will be based on a project rubric. The rubric measures the type of literature reviewed, the structure of the guideline/policy, the content included and the uniqueness to the field. Students will use the guideline and policy in a simulation exercises to mimic physician-extender and leadership roles.</td>
</tr>
<tr>
<td>Students will be able to identify the organizational and accreditation standards required of departmental leaders in hospital and academic programs.</td>
<td>Students will complete a mock self-study to satisfy national accreditation standards for RC academic programs. Students will pass exams related to financial management of hospital and academic departments.</td>
</tr>
</tbody>
</table>
II. Costs and Funding

Five-Year Costs and Funding Sources - Use this table to show five-year costs and sources of funding for the program.

<table>
<thead>
<tr>
<th>Five-Year Costs</th>
<th>Five-Year Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel(^1) $1,526,427</td>
<td>Reallocated Funds $0</td>
</tr>
<tr>
<td>Facilities and Equipment $10,000</td>
<td>Anticipated New Formula Funding(^2) $420,499</td>
</tr>
<tr>
<td>Library, Supplies, and Materials $50,000</td>
<td>Special Item Funding $0</td>
</tr>
<tr>
<td>Other $0</td>
<td>Other(^3) $1,300,051</td>
</tr>
<tr>
<td>Total Costs $1,586,427</td>
<td>Total Funding $1,720,550</td>
</tr>
</tbody>
</table>

\(^1\) Faculty (3), GIA (3), Staff (1)  
\(^2\) Formula Funding for years 3-5  
\(^3\) Designated Tuition, Graduate Tuition, Electronic Fees for years 1-5

A. Report costs for new faculty hires, graduate assistants, and technical support personnel. For new faculty, prorate individual salaries as a percentage of the time assigned to the program. If existing faculty will contribute to program, include costs necessary to maintain existing programs (e.g., cost of adjunct to cover courses previously taught by faculty who would teach in new program).

Personnel costs include new faculty hires, graduate instructional assistants, and an administrative assistant.

The budget includes projected faculty salaries for the two tenure-track Associate/Assistant Professor positions in the first year using the 2017 CUPA median of \$80,055 and \$66,300 for the one Assistant Professor position in the second year. A cost-of-living allowance of 3% has been applied annually to each salary.

Two graduate instructional assistantship (GIA) positions are requested the first year with a third GIA requested for the second year to provide instructional assistance to faculty teaching undergraduate courses. The budget includes salaries for the three GIA positions for \$1,350.22 monthly for 12 months at 50% employment.

The addition of one Administrative Assistant II (AA II) is requested in the first year to support the increases in administrative burden associated with the expansion of the Department to include the graduate program and additional faculty/staff/student interactions. The department strategic plan and program budget request includes this additional staff position with the capability to support data-intensive issues related to student recruitment, online data capture, and enrollment/retention tracking,
in addition to the increase in conventional clerical tasks. Other administrative tasks include the extensive on-going accreditation activity for the Polysomnography Concentration and telephone follow-ups needed to respond to the increasing number of requests for information about the Leadership and Polysomnography Concentrations for the MSRC program. The AA II will also be needed to support the comprehensive application process for graduate RC students, assisting with registration activities and orientation, and assisting with establishing affiliation agreements for students enrolled in the Polysomnography Concentration for the required clinical placement. The budget includes the 100% employment salary for an Administrative Assistant II position using a medium monthly salary of $2,703. A cost-of-living allowance of 3% is applied annually.

New equipment such as computers, printers, and associated hardware are needed to support the new faculty and staff.

An instructional designer and a developer from the IT Center at Texas State will be utilized for development of the new online MSRC courses. The considerable experience of an instructional designer and developer will assist building well-structured online courses that utilize best practices in design, optimal use of TRACS tools, appropriate course content sequencing, and employ strategies for promoting effective communication and active learning needed to build "community" within the cohort.

B. **Specify other costs here (e.g., administrative costs, travel).**

C. **Indicate formula funding for students new to the institution because of the program; formula funding should be included only for years three through five of the program and should reflect enrollment projections for years three through five.**

Formula funding is estimated for years 3-5 at a rate of $55.39 per SCH and a Health Services master’s weight of 2.79.

D. **Report other sources of funding here. In-hand grants, “likely” future grants, and designated tuition and fees can be included.**

Designated tuition is estimated for years 1-5 at a rate of $219.58 per SCH. Board-authorized graduate tuition is estimated for years 1-5 at a rate of $50 per SCH. Electronic course fees are estimated for years 1-5 at a rate of $50 per SCH.

E. **Report other sources of funding here. In-hand grants, “likely” future grants, and designated tuition and fees can be included.**
Texas State University  
Master of Science Major in Respiratory Care  

Signature Page

1. **Adequacy of Funding and Notification of Other Institutions** – The chief executive officer shall sign the following statements:

   *I certify that the institution has adequate funds to cover the costs of the new program. Furthermore, the new program will not reduce the effectiveness or quality of existing programs at the institution.*

   *I certify that my institution has notified all public institutions within 50 miles of the teaching site of our intention to offer the program at least 30 days prior to submitting this request. I also certify that if any objections were received, those objections were resolved prior to the submission of this request.*

   
   

   Chief Executive Officer ___________________________ Date ________________

2. **Board of Regents or Designee Approval** – A member of the Board of Regents or designee shall sign the following statement:

   *On behalf of the Board of Regents, I approve the program.*

   
   

   Board of Regents (Designee) ___________________________ Date of Approval ________________
Attachment A
Summary of Coursework
*New courses are designated with an asterisk. Existing courses are in parentheses.

RC 5211 Polysomnography Instrumentation (3-0) Designed to teach the function, operation and design of electro-neurodiagnostic equipment. Monitoring devices, electrode application and patient connection will be covered in detail. A research project and presentation will be assigned by the faculty. (Currently in graduate course inventory)

RC 5214 Sleep Staging and Diagnostics (2-0) Advanced study of waveform characteristics and montage development, filters and PSG electronics. Signal pathways, reference electrodes, impedance checking and filter settings in calibration waves will be covered. A research project and presentation will be assigned by the faculty. (Currently in graduate course inventory)

RC 5215 Clinical Polysom-Sleep Staging (0-10) Advanced clinical education in sleep staging rules, light, delta and REM sleep scoring and analysis. EEG, EMG, ECG and respiratory events will be discussed in depth are components of the polysomnogram report. A research project and presentation will be assigned by the faculty. (Currently in graduate course inventory)

*RC 5301 Advanced Cardiopulmonary Physiology (3-0) This course provides an in-depth study of cardiovascular and respiratory physiology. This course investigates pathologic and physiological changes, adaptive mechanisms, and interrelationships of the cardiopulmonary systems. Students will apply advanced cardiopulmonary physiology to the management of patients requiring respiratory care services.

*RC 5302 Clinical Practice Guidelines and Respiratory Care Protocols (3-0) This course provides an examination of the roles of clinical practice guidelines and protocols related to patient care. Analysis of the development, modification, initiation, and evaluation of patient outcomes will be covered. Barriers to protocol practice, strategies for implementation, and evidence-based outcomes will be explored.

*RC 5303 Respiratory Care Research Methods and Designs (3-0) This course provides an in-depth study of medical research, including evaluation of published studies, research ethics, sampling and research design, test statistics, conclusions, and practical verses statistical significance. Students will examine research articles and evaluate evidence-based research findings. Students will explore research protocol development, research proposals, and project management.

*RC 5304 Cardiopulmonary Disease Patient Education (3-0) This course provides a comprehensive study of patient education and self-management of cardiopulmonary disease exacerbations including disease information, prevention and treatment. Programs for patient self-assessment, treatment efficiency, adjustment of drug regimen, behavior modification, and nicotine addiction will be examined. Methods for documenting outcomes and patient behavior modification will be covered.
*RC 5305 Respiratory Care Applied Research (3-0) This course provides an opportunity to apply research methods and design concepts to an approved research idea. Students will design and submit a research proposal to the Texas State University’s Institutional Review Board for approval. Prerequisite: RC 5303.

*RC 5306 Academic Leadership in Respiratory Care (3-0) The course provides an introduction to the foundations of academic administration, fiscal planning, curriculum development, and outcomes assessment for respiratory care programs. Topics include preparation of annual accreditation reports, organization of clinical practice rotations, the role of advisory committees, and integration of didactic, laboratory, and clinical experiences.

*RC 5307 Advanced Respiratory Care Seminar (3-0) This course provides an in-depth discussion of topics related to current issues and trends in the respiratory care profession and the impact on patient care services. Students will participate in journal review, group discussion, project development, and online presentation.

*RC 5308 Advanced Cardiopulmonary Diagnostics and Therapeutics (3-0) This course provides an overview of advanced cardiopulmonary diagnostic and therapeutic procedures addressing selected disorders, including asthma, chronic obstructive lung diseases, restrictive lung diseases, pulmonary edema, congestive heart failure, and cardiac disorders. International disease standards and classifications established by the World Health Organization with appropriate treatment protocols will be discussed.

RC 5310 Fundamentals of Polysomnography (3-0) Introduction to the physiology of sleep including sleep neurology, sleep architecture, classification of sleep disorders. Review of basic cardiac physiology and ECG arrhythmia recognition. Sleep pathologies will be discussed according to etiology, pathophysiology, symptoms, diagnosis, treatment and prognosis. A research project and presentation will be assigned by the faculty. (Currently in graduate course inventory)

RC 5313 Polysom Therapeutic Intervention (3-0) In-depth study of the treatments available for sleep apnea including CPAP, BiPAP, oxygen therapy, patient adjunctive fitting, surgical intervention and the role of the sleep tech in titration. Special attention will be given titration algorithms, nocturnal seizure disorder studies, REM behavior disorder studies, MSLT’s and MWT’s. A research project and presentation will be assigned by the faculty. (Currently in graduate course inventory)

HA 5304 Healthcare Economics and Financial Theory (3-0) A study of economic theories that have an impact on the healthcare industry. Special emphasis will be placed on emerging economic research and its impact on potential policy ramifications. (Currently in graduate course inventory)

HA 5321 Healthcare Law (3-0) An in-depth analysis of healthcare law and its effect on the relationships between the patient, the patient’s family, the provider, and other
interested third parties. Analysis of cases is the primary method of study. (Currently in graduate course inventory)

HA 5362 Healthcare Organizational Behavior/Theory (3-0) This course is a study of theory and concepts drawn from the behavioral and social sciences. These concepts are applied as a foundation and conceptual framework for the analysis, diagnosis, prediction and guidance of human behavior in healthcare organizations. (Currently in graduate course inventory)

LTCA 5335 Financial Management in Long Term Care (3-0) Students will examine the fiscal performance of selected facilities utilizing data from annual Medicaid cost reports with a focus on revenue enhancement and census development. Students will contrast various systems for determination of reimbursement and use reimbursement issues in a strategic planning sense. (Currently in graduate course inventory)
May 12, 2016

Gregg Marshall, PhD
Chair & Professor
Department of Respiratory Care & Texas State Sleep Center
Texas State University
San Marcos, TX 78666-4684

Dear Dr. Marshall:

Please consider this a letter of support for the Master of Science in Respiratory Care (MSRC) program proposal. Since 2006, the Department of Occupational, Workforce, and Leadership Studies has been pleased to offered our Master of Science in Interdisciplinary Studies (MSIS) degree program as an option for graduate degree completion for your students completing the Polysomnographic Technology post-bacc graduate certificate program. In the absence of a graduate degree in your own discipline, the MSIS has provided an excellent opportunity for applying completed polysomnography graduate hours toward the MSIS degree at Texas State.

We understand the proposed 36-hour MSRC program will afford your Respiratory Care majors with the opportunity to complete a graduate degree in their own discipline and will include a track for polysomnography students. We have enjoyed working with your students through the years and we wish you every success for the implementation of the MSRC program that includes the Polysomnography Track as a degree option.

I look forward to learning of your MSRC Program proposal approval.

Sincerely,

Mary Jo Garcia Biggs, Ph.D., LCSW
Interim Chair, Department of Occupational, Workforce, & Leadership Studies (OWLS), Pedernales #106
Professor, School of Social Work, Health Professions #150
Texas State University, 601 University Drive
San Marcos, Texas 78666-4616
512.245.2586 (fax 512.245.8097)
mb56@txstate.edu
http://www.owlsls.txstate.edu/
http://www.socialwork.txstate.edu/
May 5, 2016

Gregg Marshall, PhD  
Chair & Professor  
Department of Respiratory Care & Texas State Sleep Center  
College of Health Professions  
Texas State University  
San Marcos, TX 78666-4684

Dear Dr. Marshall,

Please consider this a letter of support for the Master’s in RC proposal. The School of Health Administration offers the courses that will support your proposed Leadership Track as well as faculty interested in supporting the degree option and assisting you in meeting teaching needs identified. These 4 courses are in the process of being converted to an online format, and will be available effective fall 2017. We can support additional enrollment in the proposed track courses.

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<thead>
<tr>
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<th>Required Courses</th>
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<td></td>
<td>HA 5321 Healthcare Law</td>
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<td></td>
<td>HA 5362 Healthcare Organizational Behavior/Theory</td>
<td>3</td>
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<td>LTCA 5335 Financial Management in Long Term Care</td>
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<tr>
<td><strong>SUB-TOTAL</strong></td>
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<td><strong>12</strong></td>
</tr>
</tbody>
</table>

Please let me know if you need additional information in support of your proposal.

Sincerely,

Matthew S. Brooks, PhD, FACHE, CPH  
Director & Associate Professor  
School of Health Administration

SCHOOL OF HEALTH ADMINISTRATION  
601 University Drive | San Marcos, Texas 78666-4684 | phone: 512.245.3556 | fax: 512.245.8712 | www.health.txstate.edu/ha
Dear Dr. Marshall,

It is my pleasure to write a letter in support of your proposal for a Master of Science degree for post-professional practice for respiratory therapists at Texas State University, San Marcos. Advanced opportunities are important and are advocated by professional educators and professional societies as the scope of practice and professional competencies increase for respiratory therapists.

The findings of the three American Association for Respiratory Care (AARC) "2015 and Beyond" conferences held between 2008-2010 show clearly a need for RRTs with graduate degrees who can practice post-professionally in specialty areas.1-3 Surveys of accredited respiratory therapy program directors and directors of respiratory care departments in acute care hospitals conducted by the 2015 and Beyond Research Group prior to the third conference showed that education beyond the baccalaureate level is needed for post-professional practice in the specialty areas.4, 5 Additionally, graduate experiences are important to create opportunities for future leaders in healthcare management, as clinical educators, and medical industry leaders in the field. Graduate education also provides critical thinking for research that must be conducted by registered respiratory therapists to demonstrate that new procedures and techniques used by RRTs can improve survival from complications that occur in acute care hospital such as in cardiac arrest victims.6

The need for graduate education for respiratory therapists has been identified by the AARC and by the Coalition for Baccalaureate and Graduate Respiratory Therapy Education (CoBGRTE) in a 2003 position statement.7 More recently, an AARC position paper on respiratory therapist education revised November 2015 proposed that professionals "seeking to practice in advanced clinical settings, leadership roles, research, and in professional educator roles should seek higher education at the masters or doctoral levels."8

In conclusion, the need for new Master's prepared respiratory therapist programs has been well documented by the three 2015 conferences, the AARC white paper, position statements and research conducted by leading graduate educators based with CoBGRTE. I have reviewed your proposal for a post-professional masters degree program and find it covers what is needed for professionals of the future. Thanks for your foresight and dedication to professional education.

Very Sincerely,

Paul G. Eberle, Ph.D, RRT
Professor and Chair / Department of Respiratory Therapy
Weber State University
3875 Stadium Way, Dept. 3904
Ogden, Utah 84408
peberle@weber.edu
801.626.6840
References

May 2, 2016

Gregg Marshall, PhD, RRT, RPSGT
Chair and Professor
Department of Respiratory Care & Texas State Sleep Center
College of Health Professions
Texas State University
San Marcos, TX 78666-4684

Dear Dr. Marshall,

I am pleased to provide this letter of support to you and your faculty in the Department of Respiratory Therapy in regards to your proposal for a new master of respiratory care (MSRC) at Texas State University. At my institution, Georgia State University, we have a similar degree offering and I know first-hand the process and challenges of starting a new degree program; and also know the rewards that come from this effort. An on-line 36-hour master’s curriculum that includes a leadership or polysomnography track will be a unique offering to practicing registered respiratory therapists. Therefore, I fully support you and the faculty in your endeavors.

Just as in any health professions specialty, there is a severe shortage of qualified candidates for faculty positions, whether they are doctoral or masters-prepared in respiratory care. This proposed MSRC will serve to prepare future faculty members. Along, with future faculty preparation, a graduate post-professional masters will prepare tomorrow’s leaders in healthcare management, a new generation of clinical educators in our health facilities and medical industry trailblazers. This list is not exhaustive as I believe that many current graduate students are preparing themselves for jobs that do not even exist today. So, the possibilities are very exciting.

I am familiar with the scholarship and service of the respiratory therapy faculty at Texas State University. I have used Donald Griffin’s textbook on Hospitals: What They Are and How They Work for over 15 years. Your chapter on the Respiratory Care Department is very-well written. As you know, the earlier editions of this text did not have a chapter on respiratory therapy and I am pleased to know that you have introduced the respiratory care profession to many students who have been assigned this reading. I believe respiratory therapy students at research-intensive universities are the leaders of our profession. Your proposed MSRC degree can provide the expertise needed for these students to become leaders and reach their full potential.

It can be a challenging, but rewarding time to be a faculty member in the respiratory care profession today. From my experience with masters education for respiratory therapy students, I credit our
master's program with energizing our students, but more importantly, with boosting the level of teaching and scholarship of our faculty to a new level; and a level that would not have been possible without committing to enhance and grow our graduate program. I imagine that the same will happen at Texas State University. I am happy to commit my time in assistance, if asked, to make the Texas State master's program a success too through consultation and support to you and the faculty.

I fully support your graduate proposal at Texas State University and look forward to seeing the successes in the future. Please do not hesitate to contact me for additional support or information.

Most sincerely,

Lynda T. Goodfellow
Ed.D, RRT, FAARC, AE-C
Professor and Associate Dean for Academic Affairs
May 5, 2016

Dr. Ruth B. Welborn, Dean
College of Health Professions
Texas State University
San Marcos, Texas

Dear Dean Welborn,

The leadership of CoBGRTE, supports the development of master’s degree respiratory care programs. Producing new therapists with the knowledge and skills needed for the 21st century has become increasingly difficult within the confines of a two-year program. In addition, without a baccalaureate or higher degree, respiratory therapists are often not recognized as professionals by government agencies, third party payers, the uniformed services, labor unions, and others. While the curricular needs to produce a competent therapist continue to grow, some state governments have limited associate degree credit hours in community colleges to as little as 60 semester hours. There is a need to increase the number of respiratory therapists with advanced levels of training and education to meet the demands of providing services requiring complex cognitive abilities and patient management skills. Therefore, the CoBGRTE strongly encourages the continuing development of baccalaureate and graduate education programs. The development of master’s programs for graduates of baccalaureate RT programs is especially important as the field moves to a professional workforce with a BSRC or a master’s degree as the entry level. This will require doubling the current number of baccalaureate program and larger graduating classes. Both of these critical changes will require more RRTs with graduate degrees to serve as faculty. The AARC 2014 Human Resource Study addressed the anticipated shortage of RT faculty members by reporting the planned retirement of 50% of program directors by 2024. Remarkable is that 35% of RT educators responding to the Survey of Education Programs in 2014 reported a problem recruiting faculty.1

In 2009, the American Association for Respiratory Care (AARC) published the first of three reports on the AARC 2015 and Beyond conferences on the future direction of the profession. The first report addressed the following areas:2

- What will the future health care system look like?
- What will be the roles and responsibilities of RTs in the future system?

The AARC Board of Directors (BOD) accepted the direction for the future of health care and RTs roles and responsibilities as recommended in this report in April of 2012. The second report was published in 2010 addressed the competencies needed by respiratory therapists.3 The AARC BOD accepted the competencies as recommended in July of 2012. The third report,4 published in 2011, addressed the mechanisms by which the respiratory care workforce would acquire these needed competencies. Among other steps, this report recommended that entry level respiratory care education be (at a minimum) the baccalaureate level and the RRT credential be the entry level credential by the year 2020. So far 2016 has proven to be historic for respiratory care, on January 5, 2016 the AARC published its long awaited position paper on Respiratory Therapist Education.5 In publishing this paper, the AARC has taken a crucial step in advancing Respiratory Care as a true profession in the eyes of the medical community and governmental agencies. The AARC is an order that the education needed to enter professional practice as a respiratory therapist must be at the baccalaureate level.
“Training and education for entry-to-practice as a respiratory therapist should be provided within programs awarding a bachelor’s or master’s degree in respiratory care (or equivalent degree titles) and all newly accredited respiratory care educational programs must award, as a minimum, the bachelor’s degree in respiratory care (or equivalent degree title).”

The AARC position statement correctly explains that educational preparation for entry into practice requires a program of study longer than the two-years that can be offered by associate degree programs, especially when state governments restrict many of these programs in the number of credit hours they can offer.

Also very important is the very supportive CoARC Response on January 25, 2016 to the AARC Position Paper on Respiratory Therapist Education (see excerpt below).6

“The CoARC acknowledges that respiratory therapists with baccalaureate and graduate education are needed in larger numbers to serve as educators, researchers, managers, clinical specialists, and other roles throughout the healthcare delivery system. Likewise the CoARC recognizes the prominent role played by associate degree respiratory therapy programs. To support the increasing extent and complexity of the skills required of graduates of Respiratory Care programs and the associated movement of the profession toward baccalaureate and graduate degrees, the CoARC Board of Commissioners, in collaboration with the AARC, is proposing the following change to Standard 1.01 in the Accreditation Standards for Entry into Respiratory Care Professional Practice, to be effective January 1, 2018:

Except as provided in the following sentence, an educational sponsor must be a post-secondary academic institution accredited by a regional or national accrediting agency that is recognized by the U.S. Department of Education (USDE) and must be authorized under applicable law or other acceptable authority to award graduates of the program a baccalaureate or graduate degree upon completion of the program.

I hope my letter demonstrates the level of support for new graduate programs to produce RT faculty for the new baccalaureate level Respiratory Care Programs that will be developed over the next 10 years. It will be important, during this historic year, for Texas State University – San Marcos, one of the strongest BSRT programs in the USA to show leadership by starting a master’s degree RT program to meet the need for more faculty.

Please let me know if CoBGRTE leadership can help Texas State University launch a graduate program for respiratory therapists.

Sincerely,

Thomas A. Barnes, EdD, RRT, FAARC
President, CoBGRTE

www.cobgrte.org
617-351-3529
“Dedicated to Improving Respiratory Therapy Education”
REFERENCES

To: Dr. Gregg Marshall  
Chair & Professor  
Department of Respiratory Care & Texas State Sleep Center  
College of Health Professions  
Texas State University  
San Marcos, TX 78666-4684

From: Michael W. Jones, MHS, RRT, RCP

Subject: Letter of Support for MSRC Program

I would like to offer my support for the Masters of Science in Respiratory Care offered by Texas State University College of Health Professions. Having worked in the field of Respiratory Care for over 20 years, I have witnessed the evolution from technician to therapist. As the field continues to evolve, advanced degrees in the field of Respiratory Therapy and management are the next logical step to move the profession forward.

Earning a Master’s Degree is Respiratory Therapy will help prepare those therapists striving to move into advanced practice specialties and management positions. I feel the program at Texas State University will be able to provide such a program. With the direction that the American Association for Respiratory Care is headed with respect to education and credentialing, this program would be an invaluable resource for many therapists.

Michael W. Jones, MHS, RRT, RCP  
Executive Director, Respiratory Care  
University Health System, San Antonio TX
June 03, 2016

This letter is written in support of the establishment of the post-baccalaureate masters degree program at Texas State University. The profession of Respiratory care has grown exponentially over the last twenty years. This is the result of many factors, but includes the following: 1) an increase in the population of patients that have chronic lung disease, COPD, asthma and other respiratory disorders, 2) technical advancements in therapeutic equipment (e.g. new devices such as high flow nasal cannula for Neonates-pediatrics & adults; Meta-Neb-a device that combines the properties of inflation assistance, aerosol medication delivery, and high frequency pulsations to support both lung inflation and secretion clearance; High frequency oscillation ventilation; new modes of ventilation including highly sophisticated ventilator graphic displays that allow adjustment of the ventilator to more appropriately match the patient’s breathing pattern); 3) an increase in the number of drugs that can be delivered as aerosols, including new more effective aerosol delivery devices; 4) an increase in the demand for skilled respiratory therapists that can manage life support systems and provide evidenced based care.

This has driven a need for therapists trained at higher skill levels, and who possess the ability to treat, and manage patients with acute and chronic lung disease, as well as advise physicians, PAS and nurses about best care practices for their patients; who are equipped with education skills for teaching patients and families; who can conduct research; and are capable of high levels of critical thinking.

In order to meet the growing need for therapists with advanced levels of training the educational community will have to support the development of graduate education to train educators for fill faculty positions; to train researchers in each of the specialty areas; and to train managers for supervising inpatient and outpatient respiratory care services, home care and rehabilitation services. At the time of this writing there are only eight graduate level respiratory therapy programs in the US (ref cobgrte.org). This means there is a scarcity of graduate level respiratory therapists and a large growing need for graduate respiratory therapy programs.

Sincerely,

[Signature]

Jon O. Nilsen, PhD, RRT, FAARC
Professor and Previous Chair Dept. of Respiratory Care
UTMB Galveston
April 26, 2016

Dr. Gregg Marshall, Chair & Professor  
Department of Respiratory Care & Texas State Sleep Center  
College of Health Professions  
Texas State University  
San Marcos, TX 78666-4684

Dear Dr. Marshall,

Thank you for this opportunity to express my strong support of your proposed MSRC at Texas State University. Your curriculum design is excellent and will meet the needs of the profession at both the state and national level. Your leadership and vision for Respiratory Care (RC) Education is commendable.

In their Respiratory Therapist Education Position Statement, the American Association for Respiratory Care (AARC) calls for a minimum requirement of a baccalaureate degree (or higher) for all newly accredited RT programs. The Commission on Accreditation for Respiratory Care (CoARC) followed suit by proposing a change to Standard 1.01 which will require all new programs to be at the baccalaureate level (or higher). While the need for MSRC level graduates is now high, the implementation of this standard will greatly increase the demand for therapists with the MSRC degree. As you are aware, CoARC mandates the Key Personnel (Program Director and Director of Clinical Education) for all baccalaureate and master’s degree programs have a minimum of a master’s degree. Your proposed program will assist the profession nationally but producing high quality faculty members. The Texas State proposed MSRC would also assist programs in meeting the regional accrediting agencies (such as Southern Association for Colleges and Schools Commission on Colleges) faculty credentialing requirements (18 graduate hours within the discipline). As we have discussed at national meetings, this continues to be an issue across the profession. Thank you for providing the program and curriculum to address this national problem.

In addition to the need for quality faculty members, the profession also needs MSRC trained therapists in other healthcare areas. In the Louisville area alone, more than half of the hospital-based managers plan to retire in the next five years. Hospital-based educators as well as therapists involved in quality improvement are also nearing retirement age. The Texas State proposed program will meet this need and produce our profession’s future leaders.

Thank you for leadership in our profession. Your proposed program responds to multiple needs of the RC profession. I strongly support the development of Texas State MSRC Program.

Sincerely,

Christy Kane
PhD, RRT-NPS  
Department Chair and Program Director

BELLIARME UNIVERSITY  
2001 Newburg Road | Louisville, KY 40205 | P: 502.452.8000 | www.bellarmine.edu
April 26, 2016

Dr. Gregg Marshall, Chair
Department of Respiratory Care
Texas State University
601 University Drive
San Marcos, TX 78666-4684

Dear Dr. Marshall,

I am pleased to learn of your interest in implementing a Master of Science in Respiratory Care (MSRC) degree program with a Leadership Track and a Polysomnography Track option. The American Association for Respiratory Care (AARC) recently released a position statement regarding the future of Respiratory Therapy education with strong support for the future need of graduate education. With changing healthcare industry demands requiring strong leadership and specialty credential expertise, our profession must move forward to meet the challenges ahead in every avenue of patient care.

With an increasingly competitive workforce, there is a growing need for a post-professional master’s degree program. A MSRC degree will advance critical thinking and leadership skills often needed in workflow remodeling, enhance quality improvement initiatives to support decision-making, and strengthen problem-solving skillsets to potentially improve patient care outcomes.

I am pleased to offer this letter of support for the proposed MSRC program and can attest to the growing need for programs of this kind to provide a strong applicant pool for future clinicians, managers and supervisors, clinical educators, academic educators, medical industrial sales, and researchers. The addition of this master’s program in Respiratory Care at Texas State University would benefit patients, the healthcare industry, and future leaders in this rapidly evolving sector of healthcare.

Sincerely,

Joe McWilliams, RRT
Director Respiratory Care
St. David’s HealthCare
St. David’s South Austin Medical Center
901 W. Ben White Blvd.
512.816-6452 (Office)
512.751.0720 (Cell)
512.816-6123 (FAX)
Date April 26, 2016

Dr. Gregg Marshall, Chair
Department of Respiratory Care
Texas State University
601 University Drive
San Marcos, TX 78666-4684

Dear Dr. Marshall

As a person who has a beginning in Respiratory Care, I know firsthand what is needed to contribute to the department, facility and system. We have moved well beyond the days of only worrying about the "RT Department". I have moved through many roles throughout my 30 year career and from AAS to BAAS and then a Master of Science in Leadership and Ethics. I can safely say that opportunities in Respiratory Leadership and beyond would not have been possible without my Master's degree. I am glad many more of my Respiratory family will be afforded opportunity to grow and contribute on many more levels than before.

Sincerely,

Lauren S Nichols, MSOLE, RRT
Sr. Improvement Advisor
Center for Experience and Effectiveness
Seton Healthcare Family
SAO suite 305
512-324-0000 ext. 85537
512-844-4982 cell
Attachment C
Student Interest Survey
Master of Science in Respiratory Care
Needs Assessment
Student/graduate Feedback

We are compiling information to support a proposal for a Master of Science in Respiratory Care (MSRC) degree. Your feedback to this anonymous survey is a very important part of the approval process.

1. Your current status is:
   - Texas State Respiratory Care student
   - Texas State BS Respiratory Care graduate
   - Texas State AS Respiratory Care graduate
   - Pre-Respiratory Care major

2. Have you completed a master's degree?
   - yes
   - no

3. If yes, what was your major?

4. If there had been a Texas State Master of Science in Respiratory Care degree available, would you have enrolled in it?
   - yes
   - no
   - not sure

5. Are you considering enrolling in a master’s degree program?
   - yes
   - no
   - not at this time

6. If the Texas State MSRC degree is approved, do you think that you would enroll in it?
   - yes
   - no
   - not sure at this time

7. To complete the MSRC degree, would you prefer to take the courses:
   - in person on the San Marcos campus
   - in person on the Round Rock campus (courses broadcast via ITV from San Marcos)
   - online only
   - mix of online and in-person (hybrid)

8. The proposed program is projected to begin fall 2017. Do you think you would:
enroll in the program
consider enrolling in the program
I am not interested in enrolling

9. Which course offerings would encourage you to enroll in the MSRC program (choose all topics that interest you):
   Clinical Sub-Specialty (SDS (sleep), NPS, ACCS, AE-C, RPFT)
   Research (clinical, bench-top, evidenced-based practice)
   Leadership/Management (HR management, supervision, healthcare economics)
   Education (curriculum design, instructional strategies, learning theory)

10. Would a Master of Science in Respiratory Care be helpful to advance your personal career or others in your RT department?
    Yes/No

11. Please provide your comments and/or suggestions regarding a Master of Science in Respiratory Care degree to assist us as we draft the proposal and continue through the approval process.

Thank you so much for your participation in this survey. Information about the status of program will be posted and distributed as appropriate as we continue with the process.

The Department of Respiratory Care
College of Health Professions
Texas State University
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Attachment E
Assessment of Library Resources
Library Director’s Statement for Proposed
Master of Science in Respiratory Care

A library collection analysis for a Master of Science in Respiratory Care was undertaken in May 2016. The analysis included a five-year review of library allocations and expenditures for Respiratory Care, a comparison with three benchmark institutions identified by program faculty (Northeastern University, Loma Linda University, and Youngstown State University), and some analysis of library holdings in related disciplines (Business and Health Administration).

Respiratory Care Library Allocation and Expenditure.

The annual library allocation for Respiratory Care has declined 17.5% over the last five years. Factors impacting this included decreases in formula criteria such as faculty FTE and semester credit hours taught, or low growth compared to other programs. The department’s allocation has been largely used to support journal subscriptions.

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* $4,777 added to cover serial estimate. An additional $1000 provided to help purchase new material.

Serials and Databases

Journal and database holdings are satisfactory or better and can support the proposed program. Respiratory Care sponsors 20 journal subscriptions. Sixteen of these subscriptions have ranks in JCR – Journal Citation Reports in categories ranging from Respiratory Care to Neurosciences, Anesthesiology, Clinical Neurology or Psychiatry. Full text access to 86 “pulmonary” journals is available through journal packages or licensed databases. The library subscribes to 77 health and medicine research databases. The library also subscribes to 69 business databases which provide additional support for the program.

Books

The OCLC collection analysis of selected subject areas identified 534 shared titles among the benchmarking group. Texas State shares 246 (only 46%) of the titles with at least one of the benchmark institutions. That also means that 288 (54%) titles in the analysis are unique to Texas State.

Recommendation

The minimal funding available for new book purchases in recent years is an area of concern. In FY2015-2016, $2,000 of the Respiratory Care library allocation was available for new book purchases, lesser amounts were available in the previous four years. The uncertainty of future allocations calls for supplemental funding for several years to ensure at least some new book holdings in the subject areas of healthcare management and sleep disorders.
The average cost of a book in the category of general medicine is $117.96. This cost applied to the
gap in holdings revealed in the collection analysis totals $126,217. Over a five-year period, this
amounts to $25,243 per year. However, retrospective purchasing is not a priority for this program
and all courses are planned to be online. Still, library support for a Master’s degree should include
book resources, albeit with a preference for electronic versions whenever possible. The library can
make print versions of books available to students who do not attend courses on campus. $5,000
per year for a five-year period is recommended to provide support for this Master’s degree
program.
This statement has focused on collection holdings, however the library is prepared to support the
Master’s in Respiratory Care through the Round Rock Campus Library offering the full range of
library services including document delivery and interlibrary loan, instruction, and research
consultation.

Joan L. Heath
Associate Vice President and
University Librarian
July 18, 2016
Attachment F
Electronically Delivered Program Certification Form
Texas Higher Education Coordinating Board
Certification Form for Electronically Delivered
and Off-Campus Education Programs

Administrative Information

1. **Institution**: Texas State University

2. **Program Name** – Show how the program would appear on the Coordinating Board’s program inventory [e.g., Master of Arts (MA) in English Literature]:

Master of Science major in Respiratory Care

3. **Program CIP Code**: 51.0908.00

4. **Program Delivery** – Describe how the program will be delivered: online, off-campus face-to-face or off-campus electronic-to-groups? If off-campus, include information as to where the program will be delivered and be sure to follow the requirements for area notification as outlined in the *Guidelines for Approval of Distance Education*.

The program will be delivered online.

5. **Proposed Implementation Date** – Report the first semester and year that students would enter the program at the proposed additional site(s).

Fall 2017

6. **Contact Person** – Provide contact information for the person who can answer specific questions about the program.

   - Name: Gregg Marshall, PhD
   - Title: Professor and Chair, Department of Respiratory Care
   - E-mail: sm10@txstate.edu
   - Phone: 512-245-3514
Based on *Principles of Good Practice for Academic Degree and Certificate Programs and Credit Courses Offered Electronically.*

**CURRICULUM AND INSTRUCTION**

- Each program or course results in learning outcomes appropriate to the rigor and breadth of the degree or certificate awarded.

- A degree or certificate program or course offered electronically is coherent and complete.

- The program or course provides for appropriate interaction between faculty and students and among students.

- Qualified faculty provides appropriate oversight of the program or course that is offered electronically.

- Academic standards for all programs or courses offered electronically will be the same as those for programs or courses delivered by other means at the institution where the program or course originates.

- Student learning in programs or courses delivered electronically should be comparable to student learning in programs offered at the campus where the programs or courses originate.

**INSTITUTIONAL CONTEXT AND COMMITMENT**

**Role and Mission**

- The program or course is consistent with the institution's role and mission.

- Review and approval processes ensure the appropriateness of the technology being used to meet the objectives of the program or course.

**Students and Student Services**

- Program or course announcements and electronic catalog entries provide appropriate information.

- Students shall be provided with clear, complete, and timely information on the curriculum, course and degree requirements, nature of faculty/student interaction, assumptions about technological competence and skills, technical equipment requirements, availability of academic support services and financial aid resources, and costs and payment policies.
Enrolled students have reasonable and adequate access to the range of student services and student rights appropriate to support their learning.

The institution has admission/acceptance criteria in place to assess the extent to which a student has the background, knowledge and technical skills required to undertake the program or course.

Advertising, recruiting, and admissions materials clearly and accurately represent the program or course and the services available.

Faculty Support

The program or course provides faculty support services specifically related to teaching via an electronic system.

The institution assures appropriate training for faculty who teach via the use of technology.

The institution provides adequate equipment, software, and communications access to faculty to support interaction with students, institutions, and other faculty.

Resources for Learning

The institution ensures that appropriate learning resources are available to students.

The institution evaluates the adequacy of, and the cost to students for, access to learning resources and documents the use of electronic resources.

Commitment to Support

Policies for faculty evaluation include appropriate recognition of teaching and scholarly activities related to programs or courses offered electronically.

The institution demonstrates a commitment to ongoing support, both financial and technical, and to continuation of the program or course for a period of time reasonable and sufficient for students to complete the course or program.

EVALUATION AND ASSESSMENT

The institution evaluates the program’s or course’s educational effectiveness, including assessments of student learning outcomes, student retention, and student and faculty satisfaction.

At the completion of the program or course, the institution provides for assessment and documentation of student achievement in each course.
On behalf of Texas State University, I assert that the preceding Coordinating Board criteria have been met for all courses associated with this program that will be delivered electronically and off-campus face-to-face.

_________________________________  ______________________
Chief Academic Officer or President  Date
Dr. Eugene Bourgeois

Name: ____________________________

Title: ____________________________
Attachment G
Proposed Curriculum Sequence for Full-time Students in the Leadership Concentration
FALL – 9 hours
RC 5301 – Advanced Cardiopulmonary Physiology
RC 5302 – Clinical Practice Guidelines and Respiratory Care Protocols
RC 5303 – Respiratory Care Research Methods and Designs

SPRING – 9 hours
HA 5362 – Healthcare Organizational Behavior/Theory
LTCA 5335 – Financial Management in Long Term Care
RC 5305 – Respiratory Care Applied Research

SUMMER – 9 hours
HA 5321 – Healthcare Law (3-0)
RC 5304 – Cardiopulmonary Disease Patient Education
RC 5307 – Advanced Respiratory Care Seminar

FALL – 9 hours
RC 5306 – Academic Leadership in Respiratory Care
HA 5304 – Healthcare Economics and Financial Theory
RC 5308 – Advanced Cardiopulmonary Diagnostics and Therapeutics

36 hours
Attachment H

Proposed Curriculum Sequence for Full-time Students
in the Polysomnography Concentration
FALL – 9 hours
RC 5301 – Advanced Cardiopulmonary Physiology
RC 5302 – Clinical Practice Guidelines and Respiratory Care Protocols
RC 5303 – Respiratory Care Research Methods and Designs

SPRING – 10 hours
RC 5310 – Fundamentals of Polysomnography
RC 5211 – Polysomnography Instrumentation
RC 5313 – Polysom Therapeutic Intervention
RC 5214 – Sleep Staging and Diagnostics

SUMMER – 8 hours
RC 5215 – Clinical Polysom-Sleep Staging
RC 5304 – Cardiopulmonary Disease Patient Education
RC 5307 – Advanced Respiratory Care Seminar

FALL – 9 hours
RC 5306 – Academic Leadership in Respiratory Care
RC 5305 – Respiratory Care Applied Research
RC 5308 – Advanced Cardiopulmonary Diagnostics and Therapeutics

36 hours
Attachment I
Proposed Curriculum Sequence for Part-time Students
FALL – 6 hours
RC 5301 – Advanced Cardiopulmonary Physiology
RC 5302 – Clinical Practice Guidelines and Respiratory Care Protocols

SPRING – 3 hours
HA 5362 – Healthcare Organizational Behavior/Theory

SUMMER – 3 hours
HA 5321 – Healthcare Law

FALL – 6 hours
RC 5306 – Academic Leadership in Respiratory Care
RC 5308 – Advanced Cardiopulmonary Diagnostics and Therapeutics

SPRING – 3 hours
LTCA 5335 – Financial Management in Long Term Care

SUMMER – 3 hours
RC 5307 – Advanced Respiratory Care Seminar

FALL – 6 hours
RC 5303 – Respiratory Care Research Methods and Designs
HA 5304 – Healthcare Economics and Financial Theory

SPRING – 3 hours
RC 5305 – Respiratory Care Applied Research

SUMMER – 3 hours
RC 5304 – Cardiopulmonary Disease Patient Education

36 hours
May 2016,

Dear Program Director,

Do you have colleagues that enjoy helping others reach their full potential? Are those colleagues searching for methods to assure that high quality of Respiratory Therapy is provided by Respiratory Care Program graduates? If so, then Kalamazoo Valley Community College (KVCC) may have the perfect opportunity for your colleagues. KVCC has a vacancy for a Director of Clinical Education (DE) in the Respiratory Care Program. Our current DE has announced his retirement. This is a full-time (10 month) tenure track position faculty position.

The program has very strong performance on national credentialing examinations and is exceeding all of the Commission on Accreditation for Respiratory Care (CoARC) benchmarks. The program completed its last CoARC self-study in 2011. The site visit team found no citations and had no recommendation for improvements. The program was recently recognized for outstanding Registered Respiratory Therapist (RRT) credentialing success by the CoARC.

The program is moving into a brand new simulation facility. Classes will begin in the new facility in September 2016. Equipment is being installed and tested throughout the summer, so that by the Fall Semester the program will be simulation ready.

The candidate must have earned at least a baccalaureate degree from an academic institution accredited by a regional or national accrediting agency recognized by the U.S. Department of Education. Master's or higher degree preferred.

In addition, the DE must:

a) hold a valid RRT credential and current state license;
b) have a minimum of four (4) years’ experience as a Registered Respiratory Therapist with at least two (2) years in clinical respiratory care;
c) have a minimum of two (2) years’ experience teaching in an accredited respiratory care program either as an appointed faculty member or as a clinical preceptor.

The DE also serves as a faculty member and teaches respiratory therapy theory courses, laboratory courses and simulations

I would appreciate it if you would forward this information on to any qualified preceptors or educators in your community. To access complete information regarding the application process and deadlines please direct your colleagues to go to:

https://jobs.kvcc.edu/postings/1566

Please let me know if you have any questions.

Sincerely,

Albert W. Moss
Program Director
Respiratory Care Practitioner Program
amoss@kvcc.edu
269 548 3232
 Ranked Faculty, Director of Clinical Education Department of Respiratory Care – Baccalaureate Degree Program

Below you will find the details for the position including any supplementary documentation and questions you should review before applying for the opening. We highly encourage you to gather any required application materials before starting the application, especially if there is an application deadline. To apply for the position, please click the Apply for this Job link/button. If needed, you may save a draft copy of your application and return to it at a later time. Your application is not complete until all required data and application materials are submitted and a confirmation number is provided to you.

If you would like to bookmark this position for later review, click on the Bookmark link. To email this position to a friend, click on the Email to a Friend link. If you would like to print a copy of this position for your records, click on the Print Preview link.

Bookmark this Posting | Print Preview | Apply for this Job

Posting Details

Position Information

St. Catherine University in St. Paul/Minneapolis, Minnesota, is a comprehensive Catholic university and home to one of the nation’s largest college for women and associate and graduate programs for both women and men. Founded by the Sisters of St. Joseph of Carondelet in 1905, the University integrates liberal arts and professional education within the Catholic traditions of intellectual inquiry and social teaching. Committed to excellence and opportunity, St. Catherine enrolls over 5000 students in associate, baccalaureate, master’s and doctoral programs in traditional day and evening/weekend/online formats. Associate and Graduate programs enroll both women and men.

Job Title: Ranked Faculty, Director of Clinical Education Department of Respiratory Care – Baccalaureate Degree Program
Primary Campus: St. Paul
Posting Number: 20160001-FAC

Position Summary Information
The Department of Respiratory Care invites applicants for a full-time ranked, tenure-track faculty position in the Baccalaureate Respiratory Care Program beginning June 2016, pending budget approval. Rank and salary are commensurate with education and experience.

We are searching for a faculty colleague who loves working with students, is passionate about interacting with diverse colleagues, students, and populations, and is committed to teaching, scholarship, and service. Situated in the Henrietta Schmoll School of Health with over 31 health profession programs, our Respiratory Care community at St. Catherine University is vibrant and dynamic with a commitment to educating respiratory therapists to be excellent and reflective practitioners, advocates for social justice, and visionary leaders. The Department of Respiratory Care at St. Catherine University offers a unique environment that warmly welcomes, carefully nurtures, and inspires faculty members to excel as teachers and scholars who provide service to the profession and community.

**Responsibilities:** The Respiratory Care Director of Clinical Education oversees all clinical operations including: negotiating/setting clinical schedules, student onboarding/compliance, supervising clinical adjunct instructors. The position includes teaching undergraduate respiratory care students in classroom, laboratory, seminar and clinical venues. Responsibilities include didactic, laboratory, small group, simulation, and clinical experiences/she visits in regional health care and community settings. There are also scholarship and service expectations associated with earning tenure.

**Requirements:** Respiratory Care professional degree and a Master’s degree in a related field are required. Doctorate in related field is preferred. Experience and experience in respiratory care education are required. Applicants must hold a valid RRT credential and current MN RT license (eligibility acceptable). Applicants must have significant experience as a Registered Respiratory Therapist with direct experience in clinical respiratory care and experience teaching in an accredited respiratory care program either as an appointed faculty member or as a clinical preceptor.

**Qualifications**

St. Catherine University seeks creative, adaptable faculty who enjoy working in a university climate that promotes cultural diversity and multicultural understanding. Candidates of color are encouraged to apply as are those who will contribute to a diverse candidate pool. Consistent with the university’s Catholic identity, its commitment to women, diversity and social justice, preference will be given to candidates who manifest these themes in their teaching, research and service.

**To apply:** Please go to the St. Catherine University Employment Site to apply for this position. Website link is: http://www.stkat.edu/hr. Applicants may also visit the University Human Resources office, located in Dr. Hall Hall Room 8, to submit an electronic application. Attach an application letter, CV and a statement of teaching interests. Candidates selected for interview will need to provide 3 references. Official transcripts and background check will be required for employment. For information, contact John Booth, Ph.D., RRT jboothright@stkate.edu.

Application review begins immediately and the position will remain open until filled.

**Special/Other Requirements**

**Summary**

St. Catherine University
2004 Randolph Avenue, St. Paul, MN 55105
EEO/AA/Drug Free Workplace Employer
Tobacco-Free Campus

Our university is a proud member of the Upper Midwest HERC and is committed to recruiting and retaining outstanding and diverse faculty and staff and assisting dual career couples. For more information and to find other higher education jobs in the Upper Midwest region, visit: www.uppermidwestrec.org

**Posting Detail Information**

Posting Start Date 05/02/2016
Close Date

Hiring Manager Name John Boothright
Hiring Manager Email jboothright@stkate.edu

**Posting Specific Questions**

Required fields are indicated with an asterisk (*).
1. * Do you have your Respiratory Care professional degree and Master's degree in a related field?
   - Yes
   - No

2. * Do you hold a valid RRT credential and are you eligible for the MN RT license?
   - Yes
   - No

3. * All applicants who are offered a position with St. Catherine University will be required to have a background check completed. Will you consent to a background check if offered this position with the University?
   - Yes
   - No

4. * Can you perform the essential functions of this position with or without accommodation?
   - Yes
   - No

5. * How did you hear about this opportunity?
   - St. Catherine University Website
   - St. Catherine University employee referral
   - Newspaper - Star Tribune paper
   - Newspaper - Star Tribune web
   - Community agency
   - Internet
   - Walk-in
   - HigherEdJobs.com
   - Newspaper - Pioneer Press paper
   - Newspaper - Pioneer Press web
   - The Chronicle of Higher Education
   - Higher Education Recruitment Consortium (HERC)
   - Other

**Applicant Documents**

**Required Documents**

1. Cover Letter
2. Curriculum Vitae
3. Statement of Teaching Interests

**Optional Documents**

1. Other Document 1
2. Other Document 2
Full Time Faculty Position

The Department of Respiratory Care in the School of Health Professions at The University of Texas Health Science Center at San Antonio is seeking candidates for a full time (12 month) faculty position for a well-established Commission on Accreditation for Respiratory Care program. The Department offers a 2+2 baccalaureate degree, degree completion program for respiratory therapist and a NEW Master of Science in Respiratory Care first professional degree.

Academic rank/appointment/tenure or non-tenure track status/salary are dependent on the educational experience and degree of the successful candidate. Position expectations include collaborating with the clinical affiliates to obtain clinical education experience placements for students, coordinate the student clinical experiences, and educate, supervise and evaluate clinical preceptors/instructors in the affiliated clinical practicum sites, teaching, service, and scholarly activity. Clinical practice opportunities are available through a faculty practice plan.

Minimum Qualifications:

1. **Master’s degree required:** Doctorate or equivalent terminal degree in education, biosciences, laboratory medicine or related field from an accredited university or college preferred;
2. Graduation from an accredited Respiratory Care Program;
3. Current certification as a Registered Respiratory Therapist (RRT);
4. Evidence of effective communication skills;
5. Two or more years of teaching experience in Respiratory Care program, professional qualifications and experience consistent with requirements for appointment for rank;
6. Three or more years of professional experience as a respiratory therapist.
7. Evidence of active participation in national professional societies;
8. Evidence of scholarship and/or research success.

Academic rank, salary, and tenure or non-tenure track status are dependent on the education and experience of the successful candidate. Review of applications will begin June 15, 2015 and the search will remain open until the position is filled. The position is available as early as Sept 1, 2015. Applications are being accepted and review will begin immediately and continue until the positions are filled. Send a letter of interest, current CV, and the names, email addresses and phone numbers of three references to:

De De Gardner, Dr(c)PH, RRT, FAARC  
Chair of the Department of Respiratory Care  
School of Health Professions  
UT Health Science Center – San Antonio  
7703 Floyd Curl Dr. MSC 6249  
San Antonio, Texas 78229-3900

Application materials can be submitted electronically to GardnerD@uthscsa.edu.

All faculty appointments are designated as security sensitive positions.

The University of Texas Health Science Center at San Antonio is an Equal Employment Opportunity/Affirmative Action Employer including protected veterans and persons with disabilities.
Greetings,

We are reaching out to inform you of a teaching opportunity in Respiratory Care. Boise State University has a top notch, well-rounded bachelors program with six full-time faculty. Our program is well supported by the university and college. In addition, Boise is a wonderful place to live. We maintain strong connections to the local healthcare facilities and our department has a family atmosphere that strives for a good work-life balance.

About the Position

**Clinical Assistant Professor or Clinical Associate Professor, Department of Respiratory Care**  
**Search #: HS-0007-16**

The Department of Respiratory Care is seeking applicants for two, 9 or 11 month, clinical track appointments teaching undergraduate professional courses at Boise State University. The start date for this position is August 15, 2016.

**You will have the opportunity to:**

- Teach courses within the curriculum of the Respiratory Care Program  
- Responsibilities may include instruction within the following settings: On-campus (lectures and labs), clinical/practical within a hospital, and/or online classes/courses  
- Specific areas of emphasis will include current knowledge of: adult critical care or, neonatal intensive care, advanced mechanical ventilation, and pulmonary disease management  
- Advise/mentor students  
- Participate in university service and scholarly activity

**At a minimum you should have:**

- Earned Master’s degree (completed by time of hire)  
- RRT credential, Idaho RCP License (or eligible)  
- Respiratory therapy clinical critical care experience

**Preferentially, you will have:**

- Doctorate (Ph.D., Ed.D., D.O., MD) degree (completed by time of hire)  
- At least two years clinical experience in an acute care facility  
- Teaching experience in a CoARC accredited Respiratory Care Program

**Application Instructions:**

Please submit a letter of interest, curriculum vitae, statement of teaching philosophy and the names/contact information of three professional references as a single PDF, to Keiko Krudson at keikokmudson@boisestate.edu. Include HS-0007-16 in the subject line of the email.

To ensure consideration, please submit application materials by May 31, 2016. Review of documents will continue until finalists are identified.
About Boise

Boise, Idaho is a unique blend of big city opportunity and small town charm. Boise has an energetic, vibrant feel, which boasts a rich cultural community with river, lake and mountain access, all in one great location. With a population of just over 500,000 and 234 days of sunshine, there’s something here for everyone! Time Magazine ranked Boise #1 in 2014 for “getting it right” with a thriving economy, booming cultural scene, quality healthcare, and a growing university. Livability.com further ranked Boise first among the top 10 cities to raise a family in 2014 thanks to an abundant quality of life, a family-friendly culture, a vibrant downtown and great outdoor recreation including skiing, rafting, camping, fishing, and biking. To additionally enhance the superb quality of life Boise offers, the university has committed to sustaining the conditions necessary for faculty to enter/thrive in their academic careers while meeting personal and family obligations.

About the Department of Respiratory Care

This is one of the top programs in the nation providing a Bachelor’s of Science in Respiratory Care. We pride ourselves in providing a community-based approach to the instruction of respiratory care; facilitating relationships not only with students but also with area hospitals. The combination of classroom instruction, laboratory, and experiential instruction through various clinical opportunities provides students with a well-rounded knowledge of respiratory care. On-campus students consistently exceed national passing rates on the registry exams and are actively recruited upon graduation. Clinical and interprofessional opportunities available to our students include a state of the art Simulation Center. The heavy emphasis on clinical experience, critical thinking, and interprofessional participation in addition to over 100 years of combined faculty experience, provides our students with an excellent and well-rounded education.

We take great pride in our faculty and staff, the students, and the program. When you’re here, you’re family! Boise State University is the largest university in Idaho, with an enrollment of more than 22,000 students. The University is located in Idaho’s capital city and largest metropolitan area, which serves as the government, business, high-tech, economic and cultural center of the state.

Additional Information

To learn more about Boise State, please visit: http://www.boisestate.edu

For additional information regarding the Department of Respiratory Care at Boise State, please visit:
http://hs.boisestate.edu/respcare/

To see what Boise is all about, please visit: http://www.cityofboise.org/ for more information

Background Investigations – Any offer of employment at Boise State University will be contingent upon the successful completion of a background investigation. To view the University’s full Background Investigations policy, please go to http://policy.boisestate.edu/human-resources/

Drug-Free Workplace – It is the policy of Boise State University to maintain a drug-free workplace and campus. For more information about this policy, please go to http://policy.boisestate.edu.

Jeanne Clery Statement - The Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (Clery Act) requires all colleges and universities that participate in federal financial aid programs to keep and disclose information about crime on and near their campuses to all job applicants. To read the Boise State University Safety Report go to http://security.boisestate.edu/anual-security-reports.

Boise State University is strongly committed to achieving excellence through cultural diversity. The University actively encourages applications and nominations of women, persons of color, and members of other underrepresented groups. EEO/AA Institution, Veterans preference. Please go to http://hrs.boisestate.edu/resources/ethnic/ for more information.
Job Description

Director of Respiratory Therapy (Job Number: 26670-1161)

Work Location: United States-Florida-Inverness-Citrus Memorial Hospital
Schedule: Full-time

Description

Since 1957 we've been part of the Citrus County community, growing from a single community hospital into a system with 198 licensed beds, outpatient rehab, diagnostic imaging, laboratory services, clinics and family care centers.

For more information about Citrus Memorial visit http://www.citrusmh.com/.

Mission

To improve the lives of the people we touch. Through innovation, professionalism and by applying the highest standards of quality, we strive to provide compassionate, patient-centered care.

Position

This position will oversee Respiratory Services and the Sleep Lab. Sleep Lab is currently outsourced. There will also be some responsibility to the Pulmonary Rehab department when it opens sometime in May 2016.

The Director of Respiratory Therapy is responsible for formulation and direction of operation, capital budgets for the departments, staff orientation, education, development, competency programs, and coordinates departmental staffing needs. The director effectively performs the leadership, managerial, quality improvement and departmental responsibilities. Directs and coordinates activities of the Respiratory Care Services Department in the hospital. Oversees staff in operation of diagnostic and therapeutic pulmonary procedures, to include: ventilation management, medical gas therapy, humidity and aerosol therapies, bronchodilator therapy, and bronchial hygiene therapy. Also, directs operations in the Pulmonary Lab to include bronchoscopy assistance, arterial blood gas testing and pulmonary function testing. Implements and monitors policy and procedures to ensure safety of patients and staff in compliance with government regulatory requirements. Directs all supervisors and department managers to achieve departmental goals. Creates and maintains good physician, patient, employee and vendor relationships. Identifies and remedies patient care issues by placing a strong emphasis on quality patient care and excellent customer satisfaction. The director identifies and remedies issues through continuous employee satisfaction survey results and manages employee turnover. Must direct department innovations and oversee budgetary needs by working with Senior Management in meeting the facility goals and vision.
Qualifications:

- RRT with a minimum of a Bachelors' degree, Masters preferred
- Three years Respiratory Care management experience to include management of personnel, payroll, budgets, capital, annual business plans, marketing, physician relations and management of supervisory positions.
- HCA or teaching hospital experience preferred
- Licensed in FL, can still practice
- Experience with Sleep Medicine, Level II, III, IV NICU
- Experience with Open Heart, Neurosurgery, Peds/PICU
- Experience with Pulmonary Rehab
- COPD Accreditation a plus
Welcome. You are not signed in.

Click the Forgot Password link to reset your password on your existing account. A new password will be sent to your email address on file.

For technical questions on an application to HCA or an HCA Affiliate only, call 844-422-5627 Option 1.

To see your status on a job submission: log in, click the My Jobpage tab, then click My Submissions.

If you have a disability and require assistance completing the online application, please contact the Human Resources Department of the facility to which you are applying.

Job Search | My Jobpage

Job Search | All Jobs

Job Description

Director Cardiopulmonary Services (Job Number: 02873-8035)

Work Location: United States-Florida- Atlantis- JFK Medical Center - Palm Beach
Schedule: Full-time

Description

Facility:

JFK Medical Center has evolved into a 472-bed acute care medical/surgical facility and healthcare complex specializing in cardiovascular care, neurosciences, oncology services, orthopedics and bariatrics as well as Women’s Services. JFK Medical Center is also a teaching facility for medical residents. Our level of service and team of professionals rank among the best in the nation. Our people possess the perfect combination of professionalism and compassion. Our overall mission is to enrich the lives of our patients by providing care that never quits. Our determination shows through in everything we do from hiring the best, most qualified people, to creating a dynamic work place where ongoing educational opportunities are a top priority.

What makes us special...
The City of Atlantis is located near the coastal cities of Lake Worth and Boynton Beach. Close to the Beach, Trendy Restaurants and Shopping Malls. There’s a little something for everybody.
On site benefits for JFK Medical Center include Child Care (6 weeks to pre K), JFK Charter School (K-5), car detailing, car repair, ship-a-weigh program – shipping packages anywhere in the US from our loading dock for 40% off, gym with personal trainer FREE, and much more!

JFK Medical Center is a member of the nation’s leading provider of healthcare services, Hospital Corporation of America. HCA Ranks on Fortune’s list of Most Admired Companies for three consecutive years. In addition, HCA has also been named one of Ethisphere’s World’s Most Ethical Companies for seven consecutive years. Join our tradition of excellence!

Benefits:
We offer a generous compensation package for Full-time and Part-time including: vacation, 401k, and Medical Insurance.

Description:

https://hca.taleo.net/careersection/01hca/jobdetail.ftl?job=2030156&src=JB-15360
Reporting to the COO, the Director is responsible for the administrative oversight of the Cardiopulmonary, Pulmonary Rehab, and Neurodiagnostic services including directing departmental activities, technologist staff and ancillary personnel.

Responsibilities include:

- Manage overall clinical, quality, administrative and fiscal aspects of Cardiopulmonary Services
- Work with administration on planning, organizing, and directing Cardiopulmonary and Sleep Disorders Center
- Ensure compliance with all local, state, and federal regulations
- Communicate appropriately and clearly to physicians, staff, Medical Director and administrative team
- Demonstrate knowledge/understanding of trauma protocols and initiates/perform protocols
- Demonstrate critical airway skills, patient assessment and decision-making skills necessary in Code Blue and Rapid Response calls

Qualifications

Qualifications:

- Current Florida State Respiratory License
- Graduate of an AMA-approved School of Respiratory Therapy or equivalent
- Bachelor's degree required; Master's degree preferred
- BLS certification
- Minimum 5 experience in Cardiopulmonary management in an acute care setting

Keywords: Respiratory Therapy, Cardiopulmonary, Pulmonary, Director, Manager, RRT, Ventilator
Position Title: MANAGER, CLINICAL TRIALS
Requisition Number: 401121974
Auto req ID: 80669BR
Location: Durham
Duke Entity: MEDICAL CENTER
Department Name: DCRI - Site Support & Management
Shift: First/Day
Full Time / Part Time: FULL TIME
Job Code: 2302 MANAGER, CLINICAL TRIALS
Job Family Level: 76

Job Description:

Occupational Summary:

Working in a matrix management environment, serve as an expert resource to project team members to oversee and facilitate the development and implementation of tools, plans and strategies for managing sites and clinical monitoring activities for clinical research projects in assigned Therapeutic Area(s) (TA). Serve as supervisor for assigned Clinical Operations staff within assigned TA. Participate as member of therapeutic core team with faculty leader, Assistant Director, and other functional group key representatives.

WORK PERFORMED:

Supervision of Staff Activities - 40%
- Serve as supervisor for assigned Clinical Operations staff within therapeutic area(s) and assess assigned staff on work assignments, utilization and productivity.
- Develop written performance standards for Clinical Operations personnel.
- Provide expertise in managing sites and clinical monitoring activities utilizing advanced practices to assigned project teams. Provide advice and guidance to team members for assessment, resolution, and documentation of both routine and complex site and study issues.
- Conduct performance evaluations for assigned staff.
- Work with internal and external training resources as required; ensure that all staff assigned are current with their required training (non-study specific) including SOPs, ICH/GCP, and field-based training.
- Provide development opportunities for assigned staff including coaching, mentoring and performance management.

Functional Group/Therapeutic Area(s) Support and Strategic Planning - 30%
- Coordinate the standardization and maintenance of status reports and other information sources.
- Facilitate communication with external partners and key therapeutic area investigators when issues arise that affect multiple projects and/or Therapeutic Area(s).
- Work with project leadership to facilitate cross-functional team and multiple business-partner communication for proactive study-wide problem solving regarding study progress and trial issues.
- Assess overall project metrics and study timelines across the assigned Therapeutic Area(s) and assist with the coordination and prioritization of TA team efforts.
- Coordinate with project leadership to identify and notify appropriate parties of emerging out of scope activities. Evaluate impact on resource needs, study processes and related documents.
- Collaborate with clinical operations management and staff to identify current and anticipate long-term staffing resource needs.
- Collaborate with project leadership to provide project-specific training as needed.
- Participate in the development of the protocol, protocol revisions and amendments, monitoring plan,
scope of work and operational processes, as required.

- Provide input into the development of the CRF (data capture forms) design and completion instructions, site materials, query rules and resolution process, and related data tools and status reports.

### New Business Development - 15%

- Collaborate with the Therapeutic Area(s) management (faculty and Clinical Operations management), Business Development, cross-functional management, and the proposal project leader in the development of scope of work, associated budget and timelines for new business proposals (commercial and government) as required.
- Represent Clinical Operations in sponsor meetings, including new business, operational meetings and sponsor audits.
- Participate in scientific meetings as appropriate.

### Monitoring Activities - 10%

- Perform activities of Lead CRAs (Senior CRA and other monitoring staff) on a temporary basis as needed to move project deliverables and timelines forward.
- Provide expertise in managing sites and clinical monitoring activities utilizing advanced practices to assigned project teams. Provide advice and guidance to team members for assessment, resolution, and documentation of both routine and complex site and study issues.

### Other General Activities - 5%

- Interview job candidates and make hiring recommendations for Clinical Operations positions.
- Attend appropriate clinical team leadership meetings, department meetings and organizational meetings.

### Minimum Qualifications

#### Education/Training

Work requires graduation from an accredited degree program providing clinical training as a Registered Nurse (RN), Physician’s Assistant (PA), or Pharmacist. Completion of an allied health degree (e.g., Respiratory Therapy, Histological Technology, Licensed Practical Nurse), Masters in Public Health, or Bachelor’s degree will be considered depending upon work experience as described below. **Advanced degree preferred**

#### Experience

Minimum of 5 years related clinical research experience including 4 years directly related clinical trials research experience to include at least 2 years clinical trial monitoring and 2 years of clinical trial lead experience. Minimum of 1 year of direct supervisory experience required.

Strongly prefer clinical research experience in therapeutic area and 3 years direct supervisory experience.

OR AN EQUIVALENT COMBINATION OF RELEVANT EDUCATION AND/OR EXPERIENCE

#### Required Knowledge, Skills and Abilities

- **Strong personnel management and team leadership skills**
- **Ability to train, coach and evaluate site management and clinical monitoring team members**
- **Ability to direct and manage competing complex individual and team clinical trial activities to meet objectives, timelines and budget**
- **Strong technical knowledge and skills for monitoring procedures and practices**
- **Strong knowledge of clinical research trial operations**
- **Strong knowledge of FDA regulations, ICH guidelines, and Good Clinical Practices and their application to clinical trials**
- **Strong technical spelling and grammar skills, including reviewing and proof reading of business documents and communications**
- **Ability to write, speak, and present strategies clearly and concisely in a variety of communication settings and styles**
- **Strong interpersonal skills, ability to establish and promote positive business relationships, customer service oriented**
- **Ability to collaborate with team members to achieve trial-specific goals within specified timelines; ability to collaborate with internal and external partners to achieve departmental and organizational goals**
- **Proficient computer skills including MS Office, Word, Excel and PowerPoint, EPM, CTMS, etc.; ability to learn and use computer applications**
- **Ability to independently use critical thinking skills to effectively solve problems and use conceptual thinking to anticipate impact of decisions**
- **Strong knowledge of medical terminology**
- **Knowledge of scientific application to clinical trials research**
- **Understanding of departmental SOPs and systems**
- **Ability to travel 25%, some for consecutive nights**

https://jobs.baylor.com/TGWeSHHost/jobdetails.aspx?jobId=91890&partnerId=25017&siteId=5172&codes=IND
Preferred Qualifications

- Therapeutic Experience (2 years + recent)
- Multi-center trial experience (2 years)
- Experience managing all phases of a trial life cycle
- Experience managing multiple levels of employees
- Experience managing multiple number of employees
- Experience on commercial and government projects
- Regulatory knowledge

Duke University is an Affirmative Action/Equal Opportunity Employer committed to providing employment opportunity without regard to an individual’s age, color, disability, genetic information, gender, gender identity, national origin, race, religion, sexual orientation, or veteran status.

Essential Physical Job Functions:
Certain jobs at Duke University and Duke University Health System may include essential job functions that require specific physical and/or mental abilities. Additional information and provision for requests for reasonable accommodation will be provided by each hiring department.

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Respiratory Clinical Coordinator must have an MS degree and 3 years of experience. Must also have NBR-C-RRT and Florida license and a minimum of 3 years of teaching experience.

The Minimum Rank Qualifications are:

The Director of Clinical Education must be a Registered Respiratory Therapist (RRT), and hold such professional license and NBR-C certificate as is required by the state of Florida and a Master's degree.

The Director of Clinical Education must have a minimum of four (4) years' experience as a Registered Respiratory Therapist, of which at least two (2) must include experience in clinical respiratory care. The Director of Clinical Education must have a minimum of two (2) years' experience in teaching in an accredited respiratory care program either as an appointed faculty member or as a clinical preceptor.

The Director of Clinical Education must have regular and consistent contact with students, faculty, and clinical affiliates regardless of program location and will:

a. Assist with the development and assessment of the clinical education component of the curriculum with the Program Director.
b. Coordinate and implement the clinical education component of the curriculum including site placements, site visits, and evaluation.
c. Be responsible for facilitating students' clinical education.
d. Be responsible for ensuring clinical education program compliance, and inter-rater reliability.

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Job Description

Account Executive - Respiratory Care (South Houston) - 16122150

Hill-Rom is a $2.6B leading worldwide manufacturer and provider of medical technologies and related services for the health care industry, including patient support systems, safe mobility and handling solutions, non-invasive therapeutic products for a variety of acute and chronic medical conditions, medical equipment rentals, surgical products and information technology solutions. Hill-Rom's comprehensive product and service offerings are used by health care providers across the health care continuum and around the world in hospitals, extended care facilities and home care settings to enhance the safety and quality of patient care.

Description

The Account Executive in Hill-Rom Respiratory Care is primarily responsible for selling Hill-Rom Respiratory Care products to clients. Additionally, the Account Executive is responsible to work collaboratively with internal partners, to develop and implement comprehensive strategic territory sales plans for all Hill-Rom Respiratory Care products, programs and services. This position manages both clinical and financial aspects of the account to provide ultimate customer satisfaction.

RESPONSIBILITIES:

- Meet, if not exceed sales quotas
- Develop and implement a territory business plan and sales strategy
- Explore and close new business opportunities
- Communicate Hill-Rom's competitive differentiation to enhance sales and convert competitive accounts
- Effectively utilize and coordinate internal/external resources to achieve sales and territory goals
- Complete company reports, plans and projects in accordance with company standards and expected deadlines
- Conduct effective and ongoing communications with all Hill Rom internal and external customers
- Understand and comply with company and

https://hillrom.taleo.net/careersection/2/jobdetail.ftl?job=137694&src=JB-10140
regulatory/compliance policies and procedures
• Stay within company budget guidelines with business expenses
• Complete other duties as assigned

Qualifications

QUALIFICATIONS:
• B.S./B.A. or equivalent related work experience
• At least 2 years demonstrated experience as a top level sales performer in the medical device or healthcare industry
• Exceptional written, verbal and interpersonal communication and presentation skills
• Valid driver’s license
• Ability to lift up to 40 - 50 lbs
• Ability to travel as needed 75% (No Overnight Travel)

PREFERRED:
• Bachelor’s degree, Master’s or MBA
• Significant experience in negotiating and closing new business
• Demonstrated strategic selling skills (strategy development and execution)
• Must be able to work independently and in a team environment
• Outstanding planning and organization skills
• Strong analytical problem-solving skills and computer aptitude
• Familiar with a variety of concepts, practices, and procedures related to field sales
• Respiratory clinical experience a plus

Equal Opportunity Employer: Minority/Female/Veterans/Disabled Persons

Job: Sales

Primary Location: United States-Texas-Houston

Schedule: Full-time

Shift: 1st Shift

https://hillrom.taloc.net/careersection2/jobdetail.it?job=137694&src=JB-10140
**Director Respiratory Therapy**

**Location:** Fort Myers, FL  
**Type:** Full-Time  
**Shift:** Variable Days  
**Schedule:** 8:00 AM-5:00 PM

**Description:**

***There are two positions available, one is at Lee Memorial Hospital and one is at HealthPark Medical Center***

All qualified candidates will be reviewed and vetted through the retained search firm: MERRINE GROUP.

The Director will be accountable for the management of departmental operations of Respiratory Care Services at the specific acute care hospital to which assigned. Responsibilities include financial, strategic development, and staff development and planning. Directs, delegates, and facilitates activities of the Respiratory Care staff. Develops, recommends, and implements policies and procedures. Coordinates the management of all areas within Respiratory Care Services and Pulmonary Rehabilitation if present in the facility.

**Requirements:**

**Education:** BS or BA degree required. Masters preferred.

**Experience:** Minimum of 5 years clinical experience including 2 years experience in all intensive care/critical care areas. Minimum of 5 years recent management/supervisory experience required.

**License:** State of FL Licensed Registered Respiratory Therapist

**Other:** credentialed by the NBRC as a Registered Respiratory Therapist.

External and internal applicants, as well as position incumbents who become disabled, must be able to perform the essential job-specific functions (listed within each job-specific responsibility) either unaided or with the assistance of a reasonable accommodation to be determined by the organization on a case-by-case basis. If the requirement is not met, then it is considered not applicable.

**General Requirements (has the ability to...)**

- Sit - Frequently (i.e. Weekly)
- Stand - Frequently (i.e. Weekly)
- Walk - Frequently (i.e. Weekly)
- Drive - Frequently (i.e. Weekly)
- Bend - Frequently (i.e. Weekly)
- Climb - Occasionally (i.e. Monthly)
- Kneel - Frequently (i.e. Weekly)
- Crouch - Occasionally (i.e. Monthly)
- Twist - Frequently (i.e. Weekly)
- Maintain Balance - Occasionally (i.e. Monthly)
- Reach - Frequently (i.e. Weekly)

**Sensory Requirements (has ability br...)**

- Far Vision - Frequently (i.e. Weekly)
- Near Vision - Frequently (i.e. Weekly)
- Color Vision - Frequently (i.e. Weekly)
- Depth Perception - Frequently (i.e. Weekly)
- Seeing Fine Details - Frequently (i.e. Weekly)
- Hearing Acuity Speech - Frequently (i.e. Weekly)
- Hearing Overhead Pages - Frequently (i.e. Weekly)
- Telephone use - Frequently (i.e. Weekly)

**Mental & Emotional Requirements (ability to...)**

- Cope with high level of stress - Frequently (i.e. Weekly)
- Make decisions under high pressure - Frequently (i.e. Weekly)
- Cope with anger/hostility of others in a calm way - Occasionally (i.e. Monthly)
- Manage irritability - Occasionally (i.e. Monthly)
- Concentrate - Frequently (i.e. Weekly)
- Handle a high degree of flexibility - Frequently (i.e. Weekly)
- Handle multiple priorities in stressful situation - Frequently (i.e. Weekly)

**Additional Information:**

Work alone - Frequently (i.e. Weekly)
Demonstrate high degree of stamina - Frequently (i.e. Weekly)
Adapt to shift work - Frequently (i.e. Weekly)
Work in areas that are cold and crowded - Occasionally (i.e. Monthly)

Hand Manipulation (ability with...)
Simple Grasping - Frequently (i.e. Weekly)
Fine Grasping - Frequently (i.e. Weekly)
Use of Keyboards - Frequently (i.e. Weekly)

Required Lifting (ability to lift...)
Up to 10 lbs - Frequently (i.e. Weekly)
11 to 24 lbs - Frequently (i.e. Weekly)
25 to 34 lbs - Frequently (i.e. Weekly)
35 to 55 lbs - Occasionally (i.e. Monthly)
Push/Pulling (ability to push and pull...)
Up to 10 lbs - Frequently (i.e. Weekly)
11 to 24 lbs - Frequently (i.e. Weekly)
25 to 34 lbs - Frequently (i.e. Weekly)
35 to 55 lbs - Occasionally (i.e. Monthly)

Environmental (may be exposed to...)
Infectious Diseases - Occasionally (i.e. Monthly)
Chemical Agents - Occasionally (i.e. Monthly)
Dust, Fumes, Gases Occasionally (i.e. Monthly)

Search Job Opportunities at Penn Medicine

Job Details

Director Respiratory-Analysis

Job ID #: 59016
Job Category: Respiratory Therapy
Specialty Area: Respiratory Therapy
Primary Shift: Day
Work Schedule: Full Time Day
Penn Medicine Entity: Chester County Hospital

Location: West Chester, PA
Address: 731 E Marshall St
Education Required: Per Position Description
Experience Required: Per Position Description
Employment Type: Full-Time Regular

Position Description

Position: Director Respiratory Care Services
Department: Respiratory Therapy (6220)

General Summary Statement
This position supports the Vice President of Ancillary Services and healthcare system leadership in the strategic planning, implementation, and evaluation of Respiratory Care Services and Business Analytics. The role organizes, directs, and controls resources and the program delivery of all modalities of Respiratory Care Services including Pulmonary Function Diagnostics. The role administers and coordinates the functions and staff in the Respiratory Care department and the Pulmonary Function Laboratory. The role is responsible for the preparation and maintenance of the operating and capital budgets for Respiratory Care and the Pulmonary Function Diagnostic Lab. This role also establishes, identifies, and ensures systems and standards to promote patient's safety and safe practices for delivering patient care. The role manages all respiratory and pulmonary function equipment, vendors and contracts. Areas of accountability include leadership, strategic planning, focus on patients and other markets, measurement, analysis, and knowledge of markets, staff focus, process management, and organization performance results.

Essential Duties and Responsibilities
1. Utilizes in-depth assessment and analysis to determine department readiness for accreditation.
2. Works closely with clinical leadership and other departments to closely identify gaps and solutions in systems and processes.
3. Utilizes cutting edge knowledge, research, best practice, and thorough understanding of standards/processes to develop integrated organizational interventions.
4. Directs and implements processes to assure compliance with JC/DOH criteria.
5. Collects and compiles data for best-starting utilization during changes in workload.
6. Provides an environment of motivation and commitment to magnet designation through celebration, continuous communication and education of the process.
7. Active participant on appropriate committees and working groups.
8. Facilitates the development and maintenance of a written Quality Improvement Plan that supports a systematic, coordinated, outcome-focused-improvement approach.
9. Develops and implements systems/processes to monitor, evaluate, and improve respiratory practices and patient care outcomes.
10. Integrates research with quality improvement activities to identify patient care issues and evaluates changes in practice.
11. Collaborates with local universities in planning and conducting research.
12. Works with all clinical departments to monitor, maintain, and order medical gases.

Education Training and Experience
1. Bachelor of Science required; Masters preferred.
2. Minimum of five (5) years of respiratory care with progressive leadership, and program/project development and management.
3. Minimum of three (3) years of experience working with a Level 3 Neonatal Intensive Care Unit.
4. Strong quality management experience.
5. Previous experience in a leadership respiratory department role at a magnet designated organization preferred.

Special Skills and Other Requirements
1. Possesses a high degree of leadership, motivation, self-direction, and initiative.
2. Experience in leading teams.
3. Excellent communication skills.
4. Ability to speak confidently in public both internally and externally.
5. Expertise in writing and editing documents.
6. Ability to mentor and inspire staff.
7. Ability to facilitate group processes toward defined outcomes.
8. Strong computer program skills: Excel, Word, PowerPoint, and Publisher.
9. Effective problem solving and conflict resolution skills.

Licensure/Certification Required
1. Current license to practice Respiratory Care in the Commonwealth of Pennsylvania.
2. Registered Respiratory Therapist (RRT) required.
3. Neonatal Pediatric Specialist (NPS) preferred.

Licensure/Certification Preferred
1. Participation with professional Respiratory Care Associations (AARC/FSRC) preferred.

Minimum Requirements

Additional Information

We believe that the best care for our patients starts with the best care for our employees. Our employee benefits programs help our employees get healthy and stay healthy. We offer a comprehensive compensation and benefits program that includes one of the finest prepaid tuition assistance programs in the region. Penn Medicine employees are actively engaged and committed to our mission. Together we will continue to make medical advances that help people live longer, healthier lives.

Penn Medicine
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We are an Equal Opportunity Employer and do not discriminate against any employee or applicant for employment because of race, color, sex, age, national origin, religion, sexual orientation, gender identity, status as a veteran, and basis of disability or any other federal, state or local protected class.

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Job Description

(Only QUALIFIED Healthcare Professionals accepted) The Director is responsible for planning, organizing, directing and managing resources for the Respiratory, NICU, and Sleep Lab service lines. These responsibilities include: budget responsibility, efficient/cost-effective resource utilization; recruitment and effective/efficient management of assigned staff; achieving quality outcomes; performance improvement; monitoring of quality and quantity of services; maintaining positive working relationships with staff and system departments and managers, and purchasing and maintaining equipment.

Qualifications:
MINIMUM EDUCATION: Bachelor's Degree in Business or Related Field
PREFERRED EDUCATION: Master's Degree in Nursing, Business or Related Field
MINIMUM EXPERIENCE: 5 years experience in discipline or specialty.
PREFERRED EXPERIENCE: 3-5 years progressively responsible management experience

REQUIRED CERTIFICATIONS/LICENSES: NA
PREFERRED CERTIFICATIONS/LICENSES: Specialty or Administration certification desired.
REQUERED CERTIFICATIONS/COMPLETIONS (e.g., CPR): BLS—Obtained through approved American Heart Association Training Center or the Military Training Network. (Only required if responsible for clinical departments)

Job Added: 4/2/2016 11:02:29 PM

Community Attractions

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Recruiter Name: Jack Thornton
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Send email to recruiter

70003508
Program Director of Clinical Services
CHRISTUS Health-68600
Operations:

HOSPITAL CAMPUS
CHRISTUS Health-68600

JOB TITLE
Program Director of Clinical Services

EXPERTISE
Nursing & Nursing Support

STATUS
Full Time

TRAVEL REQUIRED
None

REPORTING LOCATION
Irving

JOB DESCRIPTION

POSITION SUMMARY:

The position supports the CHRISTUS System Clinical Quality, safety and case management efforts of the Performance Effectiveness, Quality and Patient Safety division by providing support for regional standardization of key clinical efforts. The Program Director is responsible for providing clinical data analysis, systems optimization, clinical educational development, and support services to the acute care facilities, non-acute care and affiliated networks in areas of clinical quality, patient safety, case management and accreditation. This position will also serve as a content expert in the clinical information system to tie clinical delivery to the clinical operations of CHRISTUS Health acute care entities. The Program Director will work closely with system directors and regional or facility medical staff, nurses, Infection Control Preventionists, case managers and quality/patient safety leaders to identify and ensure best practices are hardwired throughout the system for standardization and sustained results. This position assists with other quality projects and tasks as assigned by the Vice President.

MAJOR RESPONSIBILITIES:

- Participate with and contribute to the quality and patient safety team to provide expert knowledge for accreditation for all health care delivery settings including acute care, long term care, skilled nursing facilities, rehab, home health, and ambulatory care to improve the quality of clinical outcomes, enhance service provided and the financial impact of the populations served by CHRISTUS Health.
- Assist with the preparation of CHRISTUS Senior Leaders for the tri-annual TJC review of the CHRISTUS facilities.
- Assist in the implementation of quality improvement, patient safety and harm reduction for all patients, including special populations, focused within the domestic domain.
- Assist with implementation of standardized national metrics aligned with the National Quality Strategy, and CHRISTUS Board strategies.
- Serve as a liaison between existing dedicated resources at the local level to promote shared learnings and best practice identification, standardization and communication.
- Prepare reports regarding progress, effectiveness and outcomes of system quality improvement initiatives.
clinical analysis and trended comparative data and harm reduction effectiveness.

- Assist in the development of standardized reports relative to clinical care, service line analysis, harm reduction, comparative data and statistical analysis including but not limited to statistical process control charts, lean six sigma methodologies. Effectively utilizes CHRISTUS clinical application software suite of tools.
- Develop and offer educational programs to optimize the use of CHRISTUS clinical application software to a variety of audiences, including quality professionals, clinicians and executive leadership.
- Identify resources and expertise for quality and patient safety improvement for CHRISTUS Health to encourage staff development and shared learnings across the System.
- Provide consultative services in the areas of clinical process redesign development for facilities, regions, system leaders and clinical staff.
- Serve as a liaison between existing dedicated resources at the local level to promote shared learnings and best practice identification and communication.
- Maintain awareness of industry changes and serve as a resource for sharing national best practice models.
- Develop and implement an ongoing assessment/reassessment process for operational efficiencies.
- Identify resources and expertise for quality, safety and case management for CHRISTUS Health to encourage staff development and shared learnings across the system.

REQUIREMENTS

POSITION QUALIFICATIONS:

1. A. Education/Skills:
   - Bachelor's degree in Nursing or other healthcare related clinical degree required. Master's degree preferred
   - Background in clinical performance study design, statistical analyses and report writing
   - Excellent teaching and speaking skills
   - Excellent interpersonal communication skills
   - Knowledge of computer programs such as: Midas Plus, Joint Commission Accreditation Manager and Tracer software, Microsoft, Excel, PowerPoint, and Access

1. B. Experience
   - Minimum five (5) years' experience in clinical quality, patient safety, case management and accreditation experience in a hospital setting. Management experience is a plus
   - Experience in both quality and case management desired.
   - Experience in clinical information system report design/developing for all areas of responsibility and contributions.
   - Ability to manage multiple projects and work collaboratively with CHRISTUS leaders and all associates.

1. C. Licenses, Registrations, or Certifications:
   - Registered Nurse
   - Other clinician such as respiratory therapist, pharmacist.
Respiratory Care Services Education Coordinator Job

Job Title: EDUCATION/COORD-RESP CARE/CID

Community/Memorial Hospital

Date Posted: 03-11-2016

Career at our award winning team! See What Is Possible.

Responsibilities
Under the general supervision of the Director of Respiratory Care Services - CID, and in collaboration with the Manager of Respiratory Care Services - CID, this role is responsible for establishing, developing, and maintaining relationships with community hospitals. This role is responsible for identifying opportunities staff development and patient teaching, based on ongoing assessment of needs, development and evaluation programs to meet these needs. This role is also responsible for ensuring excellence in patient care and customer service.

Participates in and facilitates teaching programs internally and with other departments including the identification of patient teaching and training needs. This individual is responsible for maintaining patient care and customer service. Participates in and facilitates teaching programs internally and with other departments including the identification of patient teaching and training needs. This individual is responsible for maintaining patient care and customer service.

Note:
Seven (7) years experience working in Respiratory Care with a minimum of five (5) years critical care experience is required. Recent progressive experience in Respiratory Care education is required.

Associate Degree from a CAMRT accredited Respiratory Care program is required. Baccalaureate degree in Respiratory Therapy, Business Administration, Health Administration is a related field, or an approved educational plan to achieve a baccalaureate degree within 5 years of hire/hire date is required.

Additional Information:
- Current Respiratory Care Permit by the Wisconsin Department of Safety and Professional Services is required.
- Registered Respiratory Therapist (RRT) is required.
- American Heart Association (AHA) Basic Life Support for Healthcare Providers (BLS) is required. American Heart Association (AHA) Advanced Cardiac Life Support (ACLS) is required. American Heart Association (AHA) Pediatric Advanced Life Support (PALS) is required. American Heart Association (AHA) Pediatric Advanced Life Support (PALS) is required. American Heart Association (AHA) Pediatric Advanced Life Support (PALS) is required. American Heart Association (AHA) Pediatric Advanced Life Support (PALS) is required. American Heart Association (AHA) Pediatric Advanced Life Support (PALS) is required. American Heart Association (AHA) Pediatric Advanced Life Support (PALS) is required. American Heart Association (AHA) Pediatric Advanced Life Support (PALS) is required. American Heart Association (AHA) Pediatric Advanced Life Support (PALS) is required.

Location: Eau Claire, WI

Respiratory Care Services Education Coordinator Job in Community Memorial Hospital at Froedtert Health

Our Mission

The Froedtert & the Medical College of Wisconsin regional health care network is comprised of an academic medical center, two community hospitals and more than 75 primary and specialty care health centers and clinics. The Froedtert & MCW health network offers exceptional care in the community and internationally, coordinated access to specialty expertise, clinical trials and the full range of tertiary care capabilities of a major academic medical center where the need for more complex treatment exists.

Froedtert Health has been widely recognized for our dedication to our staff, providing a work environment full of encouragement, innovation, collaboration and respect.

We are honored to be recognized in the Milwaukee Journal Sentinel’s Top Workplaces by Wisconsin Business for five consecutive years. Our host plus also wellness program has earned us recognition in the Milwaukee Journal Sentinel as a Healthiest Employer and a Gold Well Workplace award from the Wisconsin Council of America.

We invite you to review the job posting below. If you meet the requirements and qualifications for this opportunity, you are encouraged to apply.

Thank you for considering a career with Froedtert Health!

*0.8 FTE is Full-Time, any position less than 0.8 FTE is Part-Time, and 0.8 FTE is Optional Part-Time*

We are proud to be an Equal Opportunity Employer who values and maintains an environment that attracts, recruits, engages and retains a diverse workforce. As a federal contractor/subcontractor, we take affirmative action to ensure equal employment opportunity regardless of race, sex, disability and status as a protected veteran. We also affirm positive action to ensure that our primary considerations state with us at 1-844-777-3880. We maintain a drug-free workplace and perform pre-employment substance abuse testing.
REFERENCES


