

Minutes
RCP Advisory Board
May 10, 2018
Private Dining, Culinary and Allied Health Building

Members Present: Jan Burdick, Darrell Ratliff, Jason Brady, Kristi Holmes, Alex Gass, Zaundra Lipscomb, Patti Henning, Nancy Graff, Al Moss, Megan VanDonselaar, Seth Malin, Brian Dykstra

Student Representatives: Michelle Holly, Bobbie Martin

Members Absent: John Anderson, Bobbie Martin, Laura Harris, Nick Jenema, Jessica Sturgill, Chris Stroven, Amy Rinehart

Introductions. Al Moss distributed the College Advisory Board Member information form to be reviewed by members for accuracy.

Minutes: The minutes of the December 16, 2017 meeting were reviewed and it was discovered that Dr. Malin's name was misspelled. A motion was made by Dr. Malin and seconded by Nancy Graff to approve the minutes after the correction is made.

Program Update:

Medical Director: Al Moss reported that Dr. Malin's appointment as Medical Director had been approved by CoARC.

Curriculum: Al Moss reported that the following curriculum changes have been approved by the College Board and will be implemented fall of 2019. Please note that current students taking the Microbiology course may be grandfathered in on a case-by-case basis.

RCP 125 - Basic Cardiac Life Support is being eliminated from the curriculum. Students will be required to attain American Heart Association (AHA) Basic Life Support (BLS) Certification prior to admission to the program. They will be required to maintain current Basic Cardiac Life Support while enrolled in the program. This change was made because the CPR course is now 8 hours of instruction. The RCP 125 course was 1 credit which is 16 hours of instruction. Students are able to attain AHA- BLS certification along Heartsaver First Aid in the college's WPE 112 course – Safety and first Aid.

RCP 230 – Contemporary Respiratory Topics was increased from 2 credits to 3 credits. RCP 230 is the capstone course in the program. It is offered the last 3 weeks of the program. In this course, the students are required to turn in a final draft of a Research paper, which is 10% of the grade. The rest of the course is spent on National Board for Respiratory Care Review. The NBRC increased the number of simulations from 10 to 20. The program time was sufficient to perform number of practice simulations required; but not to allow for time to provide directed feedback to the students.

Curriculum changes continued.

Microbiology Prerequisite. Applied Microbiology (HCR 120) has been replaced with Microbiology and Infectious Disease (Bio 130). HCR 120 was a 2-credit course and had a 2-credit prerequisite of HCR 118 Cellular Biology. Neither of these courses (HCR 118 and HCR 120) are readily transferable to WMU or other 4-year institutions. Since the profession is moving toward Baccalaureate degrees, the program felt that this was an appropriate modification in the curriculum to require the 4-credit BIO 130 as the microbiology pre-requisite.

General studies change. Requirements for Associates in Applied Science (AAS) Degree no longer specify the inclusion of political science. Previously the program required 3 credits in Psychology or Sociology and 3 credits in Political Science. Current AAS degrees require 3 credits from Social Sciences, which could include Psychology, Sociology, or Political Sciences along with a number of other elective courses.

Baccalaureate Degree:

It is Al Moss's opinion, that eventually Baccalaureate degrees will be required for entry to the Respiratory Therapy profession. He also believes that articulation with a four-year institution will be an intermediate requirement between now and the future requirement of a four-year degree.

Al Moss reported that the college will continue to work closely with the University of Michigan/Flint and Davenport University to establish articulation agreements.

University of Michigan Flint has begun the process of developing a CoARC approved degree completion program. The program has identified those courses that will transfer from KVCC to their program. We are currently working to formalize an articulation agreement.

Davenport University has sent us information on program articulation into their Bachelor of Science in Health Services Administration. Al stated that he will review this information over the summer.

CoARC will no longer accredit new Associate Degree programs beginning this year. Existing Associate Degree programs that meet outcome standards will be allowed to continue. KVCC's program exceeds all standards.

Enrollment/Placement

Al Moss reported that currently the program has 20 students completed their first year. Seventeen students graduated on April 30. One student that withdrew will return with the second year students to graduate in 2019.

The program started with 23 first year students fall of 2017. Two first year students have dropped; both stated personal reasons for their departure. One first year student did not meet the academic requirements for 2nd semester and did not return. This student plans to repeat first year beginning fall of 2018.

Fall of 2018 has brought 29 applicants, this same time last year, we had approximately 14. Of the 29 applicants, we have determined that 9 students also have applied for Nursing. The acceptance decision will be made on June 15. If we have less than 24 applicants, we will accept additional applications.

Capital Update

Capital 2017-2018:

Al Moss reported that the college has purchased the following items under Perkins funding.

Arterial Puncture Arm, a Critical Care Ventilator, EKG machine, and a Spontaneous Breathing Module (test lung).

Requests for 2018-2019

At the last meeting, Al Moss asked the Advisory Board to support the following capital requests for the 2018 – 2019 fiscal year:

Two Non-invasive Ventilators, Interface for the Ingmar Computerized test lung and the Sim-Man 3 G.

The 2018-2019 budget has not been released yet. We remain hopeful that these items will be approved.

NBRC update

No student has attempted the Therapist Multiple Choice exam since the December 2017 advisory board meeting.

Al Moss reported that 8 students have taken the clinical simulation exam since our last meeting. Two of these 8 students were 2017 graduates making it difficult to do an item analysis for 2017 graduates. Both 2017 graduates passed the exam on their second attempt.

CoARC update

Al Moss reviewed the results of the Student CoARC Survey.

Thirty-six students completed the survey; the vast majority of items were rated 4 (agree) or 5 (strongly agree). The following items had ratings less than our cut score of 3 (neutral):

Faculty teaches effectively in the clinical area –
1 student rated this item as 2 (disagree).

In the area of Laboratory Resources, the item, Technology is sufficient for me to perform the required laboratory exercises:

1 student rated this item as 2 (disagree).

The item, Learning resources (ex: textbooks, journals, reference materials and computers) are sufficient to support the curriculum (2.01)

1 student rated this item as 2 (disagree).

The student's written comments were shared and discussed with student's names redacted. Al Moss and Megan VanDonselaar discussed their concern that the student's ratings of them were not anonymous. They may be putting their clinical evaluations on Moodle to eliminate this concern.

Some key comments that were discussed:

Issues with mannequin reliability can interfere with the learning environment.

Computer resource availability is an issue in this building. Patti Henning discussed some possible plans for addressing this issue. Al Moss reported that he plans on orienting incoming students to the resources at Anna Whitten Hall (another downtown campus.)

Although this item was rated high, there were specific comments on temperature in the classroom and labs being too cold.

CoARC Program Personnel Survey

Al Moss stated that the CoARC Program Personnel Survey will be done through Trajecys. The program needs to have Advisory Board Members register with Trajecys. Once Advisory Board members are registered, the program will send the members information on completing the CoARC Program Personnel Survey.

Advisory Board Updates

Faith Bentley distributed Member Information Forms to confirm accuracy and the college's Occupational Program Advisory Committees Handbook. These forms will be used to reappoint members for 3-year terms.

Clinical Update

Megan Van Donselaar provided a clinical update.

Megan would like to expand Pulmonary Rehab clinical opportunities. Bronson Pulmonary Rehab should become available by the end of 2018. She is looking at availability at PIPP and Lakeland.

Megan also discussed the need for additional long-term ventilation clinics. Currently the program has to place students on the Midnight shifts because we do not have enough clinical rotations. The program has been pursuing clinical affiliation with a variety of Select Specialty Hospitals. They have sites in Grand Rapids on the Blodgett campus and on the Bronson, Battle Creek campus. We previously had agreements with them, but they would like a full-time instructor on site anytime students are present. The college cannot financially support this model. We've had difficulty reestablishing affiliation agreements. Nancy Graff volunteered to reach out to the current Select Specialty Hospital department leadership at the Blodgett site. The program will continue to pursue additional long-term ventilation clinical opportunities.

Metro U of M agreed to take up to 2 additional long-term ventilation students.

New Procedures and Equipment

Megan asked if there were new procedures or therapies being implemented. The major change at Spectrum was the use of the Phillips Respironics V30 for patients outside of Critical Care.

Megan is removing observations from the competency list. These skills categorized as observations will only be documented on the daily logs. Students will be provided with a minimum number of observations and/or assists for each of these procedures.

No other suggestions for deletions, modification, or additions of competencies was recommend at this time.

Trajecsys

Megan discussed implementation of Trajecsys.

At some clinical affiliates, preceptors are not participating in Trajecsys clinical competencies. They are signing the paper form without going into Trajecsys to complete competency. Megan asked advisory board members that are in leadership or management roles to encourage all preceptors to fully participate in Trajecsys. Dr. Dykstra described WMU's residency clinical tracking software, New Innovations. Megan appreciated the suggestion and she will look into this software. Al Moss stated that we went to Trajecsys in order to gather

more robust data required for accreditation. The program's self-study is due in 2020. AI is reluctant to change vendors until after accreditation. We are going to work with Trajecsys and our clinical partners to improve implementation.

Clinical Affiliation and Preceptor Evaluations

The semester just ended and Megan is collating the clinical affiliations and the preceptor evaluations. She is going to try to improve response rate from students regarding clinical sites. Megan stated that she will email key personnel at each affiliate the results of their clinical site and preceptor evaluations by June 10.

Bronson Battle Creek Intubation Rotation

Megan met with Dr. Lins and Mary Mulvaine to create a smoother process for students during their intubation rotation. Students will be assigned no more than two CRNAs each clinical day. Dr. Lins requested that students track each procedure they perform during the day. This information can be used by the CRNA to access progress. Megan is working with Mary to develop specific objectives.

Next Meeting

Al Moss reported that the next meeting will be scheduled at the end of fall 2018 semester or the beginning of winter 2019 semester.

Adjournment

The meeting was Adjourned at approximately 10:50 am.