Minutes RCP Advisory Board December 7, 2018 Private Dining, Culinary and Allied Health Building

**Members Present:** Al Moss, Megan VanDonselaar, Jason Brady, Jan Burdick, Dr. Dykstra, Kristi Holmes, Nikki Kyle, Kim Leonard, Dr. Malin Darrell Ratliff, Amy Rinehart, Scott Thomas, Faith Bentley

Student Representatives: Michelle Holly, Jenni Crosby, Grace Diaz, Nicole Wisdom

**Members Absent:** Jon Anderson, Alex Gass, Nancy Graff, Laura Harris, Nick Jenema, Zaundra Lipscomb, Christy Neve, Jessica Sturgill, Chris Stroven, Patti Henning

**Introductions.** Attendees reviewed the contact information for accuracy.

**Minutes:** The minutes of the May 10, 2018 meeting were reviewed; a motion was made by Kim Leonard to approve and seconded by Kristi Holmes.

#### **Program Update:**

## Boards exam update:

 New standards will be introduced for the 2020 exam. The expectation is that there will be more PFT, movement of questions within the exam and no new curriculum.

## Learning Assistants:

- A grant was approved under Perkins to provide learning assistants to health career students. The assistants will be hired to assist the learning of students, not to teach. They will also be available to help with open labs.
- Learning assistants will be available approximately 12 hours/week.
- This would be a great opportunity for new graduates that are interested in academia. The hourly rate will be around \$20/hr.

## • Staffing Changes:

- Al announced his retirement, effective May 31, 2019. Al has been with the program for 37 years.
  - The Director position will post with a minimum requirement of a bachelor's degree, a master's will be preferred.

## **Baccalaureate Degree:**

- KVCC has established an articulation agreement with U of M-Flint. This program is a CoArc accredited degree completion program.
- KVCC is currently working with Davenport to create a "wrap-around" program. This would allow students to take courses from KVCC and Davenport concurrently. This has been presented to Davenport's curriculum committee, we are waiting for a response. With this agreement, a student could graduate within a year from obtaining their Associate's in Respiratory Therapy with a bachelor's degree. Davenport's curriculum includes many online courses which is an enhancement to our students. KVCC will encourage Davenport to develop a CoArc accredited degree completion program.
- KVCC is currently working with Western to establish an articulation agreement. KVCC will encourage Western to develop a CoArc accredited degree completion program.

## **Enrollment/Placement:**

- Al Moss reported that the program started 23 new students, with 22 remaining. One student dropped out for personal reasons. There are 19 2<sup>nd</sup> year students.
- In 2018, we had 17 graduates, all but 1 are working in areas associated with Respiratory Therapy.

## **Capital Update:**

#### • Capital 2018-2019:

 Approved for 2 Non Invasive Ventilators with Perkins funding. The college is waiting for Perkins funding to be distributed.

## Capital requests for 2019-2020

- o High flow O2 systems
- Monitors for lab rooms
- Arterial Puncture simulator more realistic
- o PAPR
- Infant Warmer
- ALS manikin
- Motion was made to support these capital requests by Dr. Malin and a 2<sup>nd</sup> by Dr. Dykstra. The committee approved unanimously.

#### **NBRC** update

- Al presented the annual NBRC School's Summary.
  - Therapist multiple choice (TMC-High-cut score)
    - Seventeen graduates from 2017 attempted the TMC, 13 passed on the first attempt; 3 passed a subsequent attempt.
    - Sixteen graduates in 2018 attempted the TMC, 14 passed on the first attempt; one passed on a subsequent attempt.
  - To date, of the 2017 graduates, seventeen have attained the CRT credential and 16 have obtained the RRT credential.
  - To date, of the 2018 graduates, sixteen have attained the CRT credential and 11 have obtained the RRT credential.
  - Since January of 2015, 70 candidates have attempted the TMC and 63 have passed at the high-cut score. The program pass rate is 90%; which is 125% of the national pass rate. All candidates passed at the low-cut score. The program pass rate is 100%; which is 123% of the national pass rate.
  - Al presented a spreadsheet showing TMC scores by content area from January 1, 2015 to present. Two content areas 3F-Utilize Evidence Based Medicine Principles and 3H-Assist a Physician/Provider in Performing Procedures were slightly below the national average. 3F was at 99% and 3H was at 96% of the national average.

- Al presented a spreadsheet showing TMC scores by content area for the 2018 graduates. There were several areas below the national average.
  - 1E-Recommend Diagnostic Procedures 96% of the national average.
  - 2B-Ensure Infection Control 98% of the national average.
  - 2C-Perform Quality Control Procedures 91% of the national average.
  - 3B-Perform Airway Clearance and Lung Expansion Techniques 98% of the national average.
  - 3D-Administer Medications and Specialty Gases 96% of the national average.
  - 3H-Assist a Physician/Provider in Performing Procedures 79% of the national average.
  - 3I-Initiate and Conduct Patient and Family Education 92% of the national average.
- Clinical Simulation Exam (CSE)
  - Sixteen graduates from 2017 attempted the CSE, 11 passed on the first attempt;
    5 passed on subsequent attempts.
  - Thirteen graduates from 2018 attempted the CSE, 9 passed on the first attempt;
    2 passed on subsequent attempts.
  - Al presented a spreadsheet showing TMC scores by content area from January 1, 2015 to present. Three content areas 2A-Assemble and Troubleshoot Equipment, 2B-Ensure Infection Control and 3H-Assist a Physician/Provider in Performing Procedures were below the national average. 2A was at 97%, 2B was at 90% and 3H was at 75% of the national average.
  - Al presented a spreadsheet showing CSE scores by content area for the 2018 graduates. There were several areas below the national average.
    - 1C-Perform Procedures to Gather Clinical Information 99% of the national average.
    - 1D-Evaluate Procedure Results 99% of the national average.
    - 1E-Recommend Diagnostic Procedures 97% of the national average.
    - 2B-Ensure Infection Control 72% of the national average.
    - 3B-Perform Airway Clearance and Lung Expansion Techniques 72% of the national average.
    - 3D-Administer Medications and Specialty Gases 82% of the national average.
    - 3E-Ensure Modifications are Made to the Respiratory Care Plan 93% of the national average.
    - 3F-Utilize Evidence Based Medicine Principles 84% of the national average.
    - 3I-Initiate and Conduct Patient and Family Education 95% of the national average.
- Al commented that in general the performance of the 2018 graduates was lower than previous classes. Although the program is unsure what led to this lower performance, the college was closed for a number of days due to flooding and snow. This reduced class time may have impacted student performance. The program will be reviewing learning modules associated with each of the above content areas.
- o Dr. Dykstra made the point that many physician procedures were now being performed by Advanced Provider Practitioners (APP.) He also mentioned that Bronson recently had a major turn-over in the Critical Care Physician team. A number of physicians left and have been replaced. This may impact the students' ability to get exposure to physician assisted procedures. The 2<sup>nd</sup> year students commented that they have been able to observe and assist both physicians and APPs. Students need to be assertive in order to participate in these learning opportunities.

#### **CoARC** update

- The program self-study will be due in 2021.
- Al presented spreadsheets summarizing the following CoArc surveys:
  - o Employer ratings of the 2017 graduates:
    - All items on the survey were rated above the program's cut-score of 3 on a 5 point Likert scale.
    - Employer comments were also shared; Dr. Dykstra mentioned that comments would be more meaningful if they were more directed toward graduate skill level.
  - Ratings of the program by the 2017 graduates:
    - All items on the survey were rated above the program's cut-score of 3 on a 5 point Likert scale.
  - Program personnel survey:
    - All items on the survey were rated above the program's cut-score of 3 on a 5 point Likert scale.
    - The comments from the survey were also shared.
      - Lack of computer access in the CAH was mentioned in a number of comments.
      - Lack of study space in the CAH was mentioned in a number of comments.
      - Lack of open lab time to practice procedures.
        - Al mentioned that the addition of learning assistants through Perkins may allow for more open lab time.

## **Clinical Update:**

- Megan let the advisory board know that Mary Free Bed has been added as a clinical site for our students. At this hospital, students will be exposed to bronchial hygiene, trach care, and general management of patients with neurological disorders.
  - The above rotation has allowed the program to schedule pulmonary function testing and pulmonary rehab in a separate rotation.
  - o Pulmonary function will have increased emphasis on the 2020 version of the TMC.
- The program plans to teach non-invasive ventilation early in the winter semester. Scott Thomas reiterated the importance of non-invasion ventilation as a critical component to the student's learning experience.
- Megan is reviewing the clinical policies related to dress code; and will be asking for input from each affiliate.

#### **Advisory Board Updates**

- The advisory board was asked if there are new areas of focus within their departments.
  - All affiliates are beginning to use META-NEB therapy. The program should consider adding this to future labs. Currently the volume of therapy may not be high enough to support clinical competency with the META-NEB.
  - Many of our clinical affiliates are using Phillips V-30 BI-PAP devices for patients admitted to the hospital that are using home BI-PAP devices.
  - Jason mentioned that he can provide materials that can be used to teach blood gas analyzer quality control.

## **Next Meeting**

Al Moss reported that the next meeting will be scheduled at the end of winter/2019 semester.

# Adjournment

The meeting was Adjourned at approximately 11:00 am.