

PET FORM  
Planning and Evaluation Tracking  
(2012-2013 Assessment Period)

Division of: Health Sciences

Person Responsible for this Division: Mark Rowh

Department of: Respiratory Care

Person Responsible for this Form: Valerie Hansen

Purpose Statement: To prepare students as competent entry-level respiratory therapists through a comprehensive didactic, laboratory and clinical curriculum following the accreditation requirements of the Committee on Accreditation for Respiratory Care (CoARC). (updated 4/11)

In addition, the Health Science Division Mission Statement is as follows: In keeping with the mission of Amarillo college, the Health Sciences Division mission is to provide a comprehensive educational environment that will prepare the graduate to effectively engage in the daily challenges and responsibilities required of a competent entry-level Health Science Professional. (updated 8/11)

The Division Philosophy states: Health Science education at Amarillo College adheres to the philosophy that a health science career is chosen and prepared for with a dedication of the student to the dignity and mental and physical well-being of the patient. (updated 8/11)

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**Goal Statement #1:**

**Strategic Plan 1.4 Align AC learning outcomes with THECB outcomes which emphasize 21<sup>st</sup> century skills.**

**Outcome/Objective Statement #1A (This is a new outcome/objective in 2011-2012.)**

80% of students will demonstrate the ability to comprehend, apply and evaluate information relevant to their role as a registry-level respiratory therapist by passing all laboratory procedural simulations on the first attempt in RSPT 1410 and RSPT 1411 with a score of at least 70% to meet WECM End-of-Course Outcomes.

• Results (Provide Numbers and Percentages for Quantitative Data)

- **2009-2010 Data:** No data available
- **2010-2011 Data:** No data available
- **2011-2012 Data**
  - Fall 2011 – Sims attempted 137  
RSPT 1410 Sims passed on 1<sup>st</sup> attempt 133  
First attempt pass rate 97%
  - Spring 2012 - Sims attempted 169  
RSPT 1411 Sims passed on 1st attempt 162  
First attempt pass rate 96%
  - Fall 2012 – Sims attempted 163  
RSPT 1410 Sims passed on 1<sup>st</sup> attempt 161  
First attempt pass rate 99%

• Analysis

- Outcome threshold was met. Results and analysis will be gathered for 2013.

- Improvements  
Analysis of student evaluation of the Procedures courses previous to 2011, identified a deficiency in the number of faculty in the labs. As a result, two adjunct faculties were added to the program in Fall 2011 to help in labs and clinics. Although not officially monitored prior to 2011, it was evident to faculty that first-time pass rates on laboratory simulations needed to be improved.
  - Recommendations/Actions for 2012-2013
    - Person Responsible (Who will complete the action?):  
Program Director
    - Action Plan:  
Monitor and analyze student progress in the simulation laboratory.
    - Expected Time Frame Needed to Implement Action Plan (Please provide specific deadline date):  
Data is gathered and analyzed at the end of Fall semester and again, after Spring semester.
    - Budget Information Needed for Future Action (Cost/Details):  
None
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### **Outcome/Objective Statement #1B**

**(Be sure to include audience, behavior, conditions, degree/benchmark, and evaluation method):**

80% of students will demonstrate the ability to comprehend, apply and evaluate information relevant to their role as a registry-level respiratory therapist by passing a program exit exam on the first attempt in RSPT 2230 with a score of at least 55% to meet WECM End-of-Course Outcomes. The cut score is established by the Commission on Accreditation for Respiratory Care (CoARC).

- Results (Provide Numbers and Percentages for Quantitative Data)
    - **2009-2010 Data:** Numbers = 12 out of 12 and Percentage= 100%
    - **2010-2011 Data:** Numbers = 6 out of 10 and Percentage= 60%
    - **2011-2012 Data:** Numbers = 10 out of 12 and Percentage= 83%
  - Analysis
    - The sophomores in 2011-2012 performed slightly above the expected benchmark for first-time pass rate and significantly above the previous cohort. The two students who did not successfully complete on the first exam attempt, passed the second attempt and subsequently graduated.
  - Improvements
    - Based on current results/analysis, the new remediation policy instituted in Fall 2011 appears to have had positive results. The two part-time faculties hired in Fall 2011 to help in the laboratories and the clinical portions of the program also appear to have made a positive impact.
  - Recommendations/Actions for 2012-2013
    - Person Responsible (Who will complete the action?):  
Program Director
    - Action Plan:  
Continue to monitor student progress with current faculty and remediation policies. Re-analyze results in 2013.
    - Expected Time Frame Needed to Implement Action Plan (Please provide specific deadline date):  
Data is gathered and analyzed at the end of Summer semester every year.
    - Budget Information Needed for Future Action (Cost/Details):  
None
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## Goal Statement #2:

### Monitor Program Effectiveness

#### Outcome/Objective Statement #2A (This is a new outcome/objective in 2011-2012.)

70% of each student cohort will complete the respiratory care program with a grade of C or better in all required courses. (No Excuses/ATD goal: earn a certificate, degree or transfer)

- Results (Provide Numbers and Percentages for Quantitative Data)

- **2009-2010 Data:**

# BEGINNING PROGRAM (2008)	DROPPED/ ACADEMIC	DROPPED/ FINANCIAL	DROPPED/ OTHER	GRADUATED/ 2010	GRADUATED/ 2011
21	4	0	6	9	2

11/21 = 52% of 2008 cohort graduated with AAS Degree

- **2010-2011 Data:**

# BEGINNING PROGRAM (2009)	DROPPED/ ACADEMIC	DROPPED/ FINANCIAL	DROPPED/ OTHER	GRADUATED/ 2011	WILL GRADUATE/ 2012
16	1	0	5	8	2

10/16 = 63% of 209 cohort graduated with AAS Degree

- **2011-2012 Data:**

# BEGINNING PROGRAM (2010)	DROPPED/ ACADEMIC	DROPPED/ FINANCIAL	DROPPED/ OTHER	GRADUATED/ 2012	WILL GRADUATE/ 2013
21	3	1	7	10	0

10/21 = 48% of 2010 cohort graduated with AAS Degree

- Analysis

- Even though this is a new outcome/objective, the benchmark for 2010 was not acceptable. Individual analysis of the cause for student attrition are primarily non-academic, i.e. spousal job transfers, change of majors, pregnancies, etc. None of the factors could have been predicted by the program's current admission process as all accepted students had, at least, the minimum acceptance requirements.

- Improvements

- In order to improve retention, the department faculty will meet with all students to inform them of the resources available should they develop financial, tutoring or counseling difficulties.
- The curriculum has been changed for Fall 2013, to allow the addition of Medical Terminology and Human A&P II. These additions may improve the students' science knowledge to better the chances of completing the program.
- Beginning in Spring 2013, completion of a Health Occupations Aptitude exam (administered by the AC Testing Center) will be required of all applicants and will be evaluated during the admission process. Exam results can predict the student's readiness and capability for successful completion of the program. The examination addresses required pre-requisite and acquired educational achievements commensurate with the objectives of the program. It comprises five separate tests that measure abilities, skills, knowledge and attitudes important for success in the program.

- Recommendations/Actions for 2012-2013
    - Person(s) Responsible (Who will complete the action?):  
Program Director and Director of Clinical Education
    - Action Plan:  
Results will be analyzed periodically throughout the year to identify at-risk students.
    - Expected Time Frame Needed to Implement Action Plan (Please provide specific deadline date):  
Results are gathered and analyzed every year as each cohort graduates.
    - Budget Information Needed for Future Action (Cost/Details):  
None
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### Outcome/Objective Statement #2B

80% of students will successfully pass the National Certification exam after completion of all program requirements.  
(CoARC threshold)

- Results (Provide Numbers and Percentages for Quantitative Data)
    - **2009-2010 Data:** 10 out of 11 (91%)
    - **2010-2011 Data:** 9 out of 10 (90%)
    - **2011-2012 Data:** 11 out of 12 (92%)
  - Analysis
    - Provide Previous Data/Result Analysis  
Results for this cohort are incomplete. These students graduated in August 2012 and have 6 months to pass the National Certification exam. The eleven students, who have passed the exam at this date, passed on the first attempt. The benchmark for the 2011-2012 appears to have been met, even though one graduate has not attempted the exam.
  - Improvements

None Made.
  - Recommendations/Actions for 2012-2013
    - Person Responsible (Who will complete the action?):  
Program Director
    - Action Plan:  
Continue to monitor student progress.
    - Expected Time Frame Needed to Implement Action Plan (Please provide specific deadline date):  
Data is gathered and analyzed 6 months and 1 year post-graduation.
    - Budget Information Needed for Future Action (Cost/Details):  
None
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### Outcome/Objective Statement #2C

100% of graduates will have at least a 3 (Likert scale of 1-5) on employer surveys administered after graduation to measure satisfaction with clinical skills.

- Results (Provide Numbers and Percentages for Quantitative Data)
  - **2009-2010 Data:** 11 out of 11 (100%)
  - **2010-2011 Data:** 9 out of 9 (100%)  
One of the ten 2011 graduating students is not employed.
  - **2011-2012 Data:** Data will not be available until April 2013.

- Analysis
  - The benchmark for the 2009-2010 and 2010-2011 was met.
- Improvements  
None Made.
- Recommendations/Actions for 2012-2013
  - Person Responsible (Who will complete the action?):  
Program Director
  - Action Plan:  
Continue to monitor survey results. In the event that the benchmark is not met, Program Faculty will determine needed curriculum changes to improve the identified deficiencies in graduate clinical skills.
  - Expected Time Frame Needed to Implement Action Plan (Please provide specific deadline date):  
Data is gathered and analyzed 6 months post-graduation.
  - Budget Information Needed for Future Action (Cost/Details):  
None

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### **Goal Statement #3:**

Upon completion of the program, graduates will demonstrate personal behaviors consistent with professional and employer expectations as a registry-level respiratory therapist.

### **Outcome/Objective Statement #3A**

**(Be sure to include audience, behavior, conditions, degree/benchmark, and evaluation method):**

100% of students will have at least a 3 (Likert scale of 1-5) on summative evaluations of professional behavior performed by program faculty.

- Results (Provide Numbers and Percentages for Quantitative Data)
  - **2009-2010 Data:** 11 out of 11 (100%)
  - **2010-2011 Data:** 10 out of 10 (100%)
  - **2011-2012 Data:** Data will not be available until April 2013.
- Analysis
  - The benchmark for the 2009-2010 and 2010-2011 was met.
- Improvements  
None Made.
- Recommendations/Actions for 2012-2013
  - Person Responsible (Who will complete the action?):  
Program faculty
  - Action Plan:  
Continue to monitor student progress of professional behavior skills.  
Review evaluation tool to assure it measures areas as intended.
  - Expected Time Frame Needed to Implement Action Plan (Please provide specific deadline date):  
On-going
  - Budget Information Needed for Future Action (Cost/Details):  
None

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### Outcome/Objective Statement #3B

(Be sure to include audience, behavior, conditions, degree/benchmark, and evaluation method):

100% of students will have at least a 3 (Likert scale of 1-5) on employer surveys administered after graduation to measure satisfaction with graduates' professional behavior.

- Results (Provide Numbers and Percentages for Quantitative Data)
    - **2009-2010 Data:** 11 out of 11 (100%)
    - **2010-2011 Data:** 9 out of 9 (100%)  
One of the ten 2011 graduating students is not employed.
    - **2011-2012 Data:** Data will not be available until April 2013.
  
  - Analysis
    - Provide Previous Data/Result Analysis  
(Include if benchmark was met and how results relate to outcome statement):  
The benchmark for the 2009-2010 and 2010-2011 was met.
  
  - Improvements

None Made.
  
  - Recommendations/Actions for 2012-2013
    - Person Responsible (Who will complete the action?):  
Program faculty
    - Action Plan:  
Continue to monitor professional behavior skills and employer survey results.  
Review evaluation tool to assure it measures graduate performance as intended.
    - Expected Time Frame Needed to Implement Action Plan (Please provide specific deadline date):  
On-going
    - Budget Information Needed for Future Action (Cost/Details):  
None
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