Institution Submitting Request: Dixie State College of Utah
Program Title: Respiratory Therapy
School or Division or Location: School of Nursing and Allied Health
Department(s) or Area(s) Location: Respiratory Therapy
Recommended Classification of Instructional Programs (CIP) Code\(^1\): 51.0812
Board of Regents’ Approval Date: 04/18/2008

Proposal Type (check all that apply):

<table>
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<tr>
<th>Section #</th>
<th>Item</th>
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<td>4.3.3</td>
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Chief Academic Officer (or Designee) Signature:
I certify that all required institutional approvals have been obtained prior to submitting this request to the Office of the Commissioner.

__________________________
Signature  
Date: MM/DD/YEAR

Printed Name: Donna Dillingham-Evans

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\(^1\) CIP codes must be recommended by the submitting institution. For CIP code classifications, please see http://nces.ed.gov/ipeds/cipcode/Default.aspx?y=55.
Program Description

The Respiratory Therapy program at Dixie State College was approved by the Board of Regents on April 18, 2008 and admitted its first students in fall semester of 2009.

The A.A.S. degree program in Respiratory Therapy requires 59 discipline-specific credits and a minimum of 19 prerequisite credits. The program prepares graduates to take the national credentialing board exam and to become licensed respiratory therapists in Utah, the U.S., and Canada. Respiratory therapists provide treatment, monitoring, evaluation, and management of patients with chronic and acute respiratory disorders. Therapists are employed in acute and long-term care facilities, clinics, sleep labs, and home care/durable medical equipment (DME) companies. The program has been accredited by the Commission on Accreditation for Respiratory Care [CoARC] since March 24, 2012.

Enrollment and Revenue Data

<table>
<thead>
<tr>
<th>Departmental/Unit Enrollment and Staffing Data</th>
<th>Prior to Program Implementation</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Department Student FTE (Based on Fall Third Week Data)</td>
<td>Est.</td>
<td>Actual</td>
<td>Est.</td>
<td>Actual</td>
</tr>
<tr>
<td>Total Department Faculty FTE (A-1/S-11/Cost Study Definition)</td>
<td>2</td>
<td>1.68</td>
<td>2</td>
<td>2.08</td>
</tr>
<tr>
<td>Student FTE per Faculty FTE (from Faculty FTE and Student FTE above)</td>
<td>7.5/1</td>
<td>8.9/1</td>
<td>15/1</td>
<td>10.2/1</td>
</tr>
</tbody>
</table>

| Program Level Data | | | |
| Total Number of Declared Majors in Program | N/A | 15 | N/A | 25 | N/A | 25 |
| Total Number of Program Graduates | N/A | N/A | 15 | 13 | 15 | 11 |
| Departmental Revenue | Est. | Actual | Est. | Actual | Est. | Actual |
| Total Revenue to Department (Total of Funding Categories from R401 Budget Projection Table) | $300,799 | $186,347 | $201,735 | $214,615 | $206,879 | $212,237 |
| Departmental Instructional Cost per Student Credit Hour (per Institutional Cost Study Definition) | N/A | $79.93 | N/A | $56.06 | N/A | $67.72 |

* The student enrollment discrepancy is for a number of reasons: 1) downturn in the economy and anticipation of decreased job availability given original estimate, and 2) qualified applicant pool not as large.
Institutional Analysis of Program to Date

The Respiratory Therapy program has graduated two cohorts and achieved a 100% first-time pass rate on the National Board for Respiratory Care C.R.T. examination, which is the standardized examination recognized for licensing respiratory therapists in the U.S. and Canada. The national pass-rate on this examination is 77%.

The program faculty and Advisory Committee have identified the following program strengths and weaknesses.

Strengths:
1) Program curriculum is appropriate in scope and depth to provide students and graduates with skills and knowledge to become licensed practitioners and successfully enter the profession;
2) Program faculty have demonstrated instructional skills and mentoring to help students develop knowledge, skills, and affective attributes [behaviors] expected of new graduates;
3) Program co-Medical Directors (Dr. Erick Ridout, Neonatologist and Dr. Christine Foster, Hospitalist) have provided strong medical input and assured that the curriculum and clinical experiences are appropriate from a medical perspective;
4) Classroom and laboratory facilities provided in the Taylor Health Sciences Building are exceptional and have contributed to students’ engagement in the program and to the mastery of their knowledge and skills;
5) Clinical sites have provided exceptional support to the development of bedside clinical skills and work habits while students are in the clinical settings and have provided a breadth and depth of clinical experiences to prepare our graduates to enter the workforce;
6) Program management and administrative support have established a level of student [lab] fees such that operating costs of the program have been minimized and appropriate laboratory equipment and supplies have been provided to the students with no institutional costs beyond initial start-up expenses;
7) Graduate employment rates are acceptable (83% of graduates are currently employed in the field) and employer satisfaction with the quality of Dixie State College graduate therapists is very high (additional information regarding employment is provided in the following section).

Weaknesses:
1) Graduate employment in the local market has not been as vigorous as was anticipated (100% employment of the first cohort, 67% of the second cohort within 8 months of program completion);
2) Limited access to a baccalaureate-level program in the discipline.

Actions:
1) Graduate employment, particularly for those new graduates who lack work experience and a baccalaureate degree, has been a concern. Lower than ideal employment is primarily due to general economic conditions in the state and nationally, although our graduates have been able to find employment if they are willing to relocate. To better match the graduates to local employment opportunities, based on the input from the Advisory Committee, the Program altered the selection of the third cohort such that we will slightly delay graduation of the third and fourth cohorts. Based on local and national demographics, employment opportunities will begin to improve over the next several years and the profession is listed among those with a high growth potential over the next 10 years;
2) The development of a clinical affiliation with the University of Utah has provided our students with additional levels of clinical experiences and has also provided them with employment opportunities as students become known by potential employers during their clinical practice rotations;
3) Program faculty, Advisory Committee, students, and the Dean of the School of Nursing and Allied Health express support of the development of a bachelor’s degree option for our graduates at Dixie State College. The recent emphasis on the development of baccalaureate degrees to allow the institution to grow has delayed the progress of a health-science related baccalaureate option, but this is an area of future growth that is becoming a national trend and it will continue to be a goal of the DSC program. A recent study [Kacmarek et al, Respiratory Care, May 2012] reflects that only 36.7% of respiratory care department
managers prefer an A.S.-level prepared new graduate. We have an ongoing concern regarding the strength of our applicant pool because 93% of our program applicants have expressed a desire to obtain a bachelor's degree and we have lost several qualified applicants because they have opted to apply to a bachelor’s degree program rather than continue their education at DSC. At present, the only bachelor’s degree option within the USHE is at Weber State University and several of our graduates have already matriculated at WSU to pursue this degree.

**Employment Information**

The program has 24 graduates to date and will graduate its third cohort in December, 2012. Of these 24 graduates, 20 are currently employed in the field of respiratory therapy for an overall employment rate of 83.3%.

We have 9 graduates who are employed in the St. George area, 2 in Cedar City, 2 in Idaho, 3 in Nevada, 2 in Salt Lake/Provo, 1 in Texas and 1 in Indiana. Of the 4 graduates who are not currently employed in the field, 2 are employed at Dixie Regional Medical Center in non-RT positions and 2 are sole proprietors of businesses in St. George and are waiting for the market to improve locally. Graduates who are currently employed are working in a variety of settings, including acute-care hospitals (Dixie Regional Medical Center, Valley View Medical Center, Utah Valley Regional Medical Center, University of Utah Hospitals and Clinics, St. Luke’s [Boise and Idaho Falls], Community Hospital [Anderson, IN], Washoe Medical Center [Reno, NV], Mesa View Hospital [Mesquite, NV], University Hospital [Lubbock, TX]), Sleep Labs, Home Care/DME companies, and long-term care facilities.

Professional accreditation standards require follow-up with employers regarding their satisfaction with the graduate performance and preparedness for employment. We have 100% data collection from employers and 100% satisfaction with the quality and preparation of our graduates (cut score of 3 or greater on a Lickert scale of 1-5).

As mentioned earlier, our new graduates are reporting that they would have more employment opportunities if they were bachelor's degree graduates, thus we would like to pursue creating this option for our graduates.