



CoARC NEWSLETTER

COMMISSION ON ACCREDITATION FOR RESPIRATORY CARE

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April 15, 2013

President's Report — Stephen P. Mikles, EDS, RRT, FAARC

It has been a great privilege to serve as President of the Commission on Accreditation for Respiratory Care this past year. The members of the Executive Office and the Board have helped me carry out my duties and I offer them my deepest gratitude. I will pass the baton to Kathy Rye in November and I wish her well upon assuming the position of President.



Board Changes 2012

Jolene Miller, MEd, RRT completed her second four year term as the NN2 representative to the Board. She served on the Executive Committee as Treasurer from 2009-2012. She will be a tough act to follow as a Board member and as Treasurer. Jolene worked tirelessly as chair of the Accreditation Policies, Standards and Bylaws committee during the time she served as Treasurer. I am sure that I echo the sentiments of the entire Board and Executive Office staff in saying that she will be sorely missed.

Monica Schibig MA, RRT-NPS, CPFT completed her Therapist At-Large Board member term in November. I want to thank Monica personally and on behalf of the members of the Board of Commissioners and the Executive Office staff for her dedicated service.

CoARC held elections at its July Board meeting for new officers and Commissioners. They are as follows:

- Treasurer- Tom Hill
- Alan Barker – ATS Representative
- David Collins- NN2 Representative
- Charles Cowles- ASA Representative- First Full Four Year Term
- Ian Gilmour –At-Large Physician Representative

Report of Current Status Data Disclosure

Select data from the 2011 Report of Current Status (RCS) reports were posted for the first time on the CoARC website. Programs are now required to provide a link to the Programmatic Outcomes Data page on the CoARC website on their program website. The following data for each accredited program are now publically provided via our website.

Continued on next page

Inside this issue:

President's Report	1-2
Programmatic Data	2
H. Fred Helmholtz Lecture Series	3
Executive Director's Report	4-5
Future CoARC Meeting Dates	5
2012 Distinguished RRT Award Recipients	6
Interactive Map of Program Information	6
CoARC Evaluation of Policies and Procedures	7
CHEA Recognition	8
Number of Site Visits	8
What is Administrative Probation?	8
Spotlight on Standard 5.01	9
Links to FAQs, Complaint Process, News and Announcements, and Commissioner Functions	10
Commissioners	11-15
Institutional vs Programmatic Accreditation	16
AARC Summer Forum Presentations	17
AARC International Congress Presentations	17
2012 Outstanding Site Visitor Award	18
Recognition of 2012 Site Visitors	19
CoARC Executive Office Staff	20

President’s Report (Continued)

Attrition- with threshold posted
 Job Placement- with threshold posted
 CRT Success- with threshold posted
 RRT Success
 Total Graduates
 Total Enrollment

CHEA Recognition

Tom Smalling and I traveled to Washington, DC in June and went before the Council for Higher Education Accreditation (CHEA) Committee on Recognition. In September the CHEA Board of Directors accepted the Committee on Recognition’s recommendation to grant CoARC recognition. This is a milestone achievement for the Commission on Accreditation for Respiratory Care and denotes our commitment to service to the public as an educational accrediting agency.

CoARC Standards Revision

I had the pleasure of working with the members of the Accreditation Policies/Standards/ Bylaws committee on the Standards revision over the course of the past year. Final revisions were approved by the full Board in November 2012 and they were sent out for public comment in February 2013. The Standards have been streamlined and thoughtful deliberation was taken regarding associate and baccalaureate degree education.

In closing I again offer my sincere gratitude to Tom Smalling, Jana Anderson, Lisa Collard, Bonnie Marrs and Shelley Christensen for their continued unwavering support and service. It would be impossible to carry out the mission of CoARC without such a dedicated and talented staff.

The program data table below is from the **2012 Report on Accreditation in Respiratory Care Education** which is now available for download on the CoARC website. The CoARC developed this report to provide critical data in the following four areas: (1) Descriptive statistics of CoARC Programs as of December 31, 2012; (2) Accreditation actions taken in 2012; (3) Aggregated statistics of graduate, enrollment, and outcomes data from the 2012 Annual Report of Current Status submitted on July 1, 2012; and (4) Programmatic data related to the AARC 2015 and Beyond Project.

Program Numbers by CoARC Level as of December 31, 2012 (n=449)				
	100-level	200-level	300-level	400-level
Continuing Accreditation	0	327	17	5
Initial Accreditation	0	62	1	2
Probationary Accreditation	0	2	0	0
Provisional Accreditation	0	27	N/A	N/A
Inactive Accreditation	0	0	1	0
Approval of Intent	N/A	3	N/A	2
Letter of Intent	4 – applications in progress		N/A	0

Spotlight on the Dr. H. Fred Helmholz Education Lecture Series

The Dr. H. Fred Helmholz Education Lecture Series was established by CoARC in 1997 to recognize outstanding educators for their contributions to Respiratory Care Education.

It is certainly a fitting tribute that this Lecture Series serve as an ongoing reminder of Dr. Helmholz for he was a true pioneer in our profession. His tireless efforts on behalf of respiratory therapists touched many of us and his influence will be felt for decades to come. Dr. Helmholz was active in probably every single aspect of respiratory care. His medical career included research and clinical practice in high-altitude medicine, oxygen therapy, pulmonary function testing, and mechanical ventilation.

The AARC honored Dr. Helmholz with Honorary Member status and he was awarded the prestigious Jimmy A. Young Medal in 1993. He had a major presence at the International Congress, presiding as a judge for the Sputum Bowl Finals for many years. His sense of humor and sportsmanship were never more evident than by his willingness to wear whatever costume Jim Fenstermaker dreamed up, appearing as a Southern Gentleman, Santa Claus, Julius Cesar, and one of the Flying Elvies. The H. Fred Helmholz Sportsmanship Award is presented every year to the team which best demonstrates the passion, wisdom, and wit he brought to the competition.



Dr. Helmholz served as a member of the NBRC Board of Trustees from 1976 to 1988 and as President in 1985. The NBRC honored Dr. Helmholz with its Albert H. Andrews Award and Sister Mary Yvonne Jenn RRT Lifetime Achievement Awards, becoming the first Board Member to achieve Trustee Emeritus status. He was the first Honorary Member of Lambda Beta, the National Honor Society for Respiratory Care, and through donations, his books of poetry continues to support scholarships for respiratory care students.

His commitment to education led him to establish a respiratory care program at the Mayo Clinic, where he did most of the teaching for several years. And until a few years ago, he was involved as a standardized patient for the Mayo Multidisciplinary Medical Simulation Center. Dr. Helmholz was appointed by the ACCP to the Board of Schools for Inhalation Therapy in 1965, the initial group responsible for overseeing respiratory care education. When the Board of Schools transitioned to the Joint Review Committee for Respiratory Therapy Education under the AMA in 1969, Dr. Helmholz served as Chairman until 1976, running the organization out of his own offices at the Mayo Clinic, often at his own expense. He served the Joint Review Committee and CoARC, its successor, as a site visitor for decades.

Each year, CoARC invites an educator to present the H. Fred Helmholz Lecture at the AARC Summer Forum. The Lecture provides an opportunity to recognize individuals who have made significant contributions to respiratory care and education. Many of these individuals had the privilege to know and work with Dr. Helmholz, and we hope that this annual lecture appropriately perpetuates his legacy.

This year's presenter at the 2013 AARC Summer Forum will be Susan P. Pilbeam, MS, RRT, FAARC. Her presentation will be "Teaching Students How to Stay Up-to-date on Mechanical Ventilation Issues." For a list of past presenters, please visit the CoARC website: <http://www.coarc.com/72.html>

Executive Director’s Report—Thomas R. Smalling, Ph.D., RRT, RPFT, RPSGT, FAARC

MISSION STATEMENT

The mission of the Commission on Accreditation for Respiratory Care (CoARC) is to serve the public by ensuring high quality respiratory care education through accreditation services.

PURPOSE

The CoARC accredits first professional respiratory care degree programs at the Associate, Baccalaureate, and Masters Degree level in the United States and internationally. The CoARC also accredits professional respiratory care degree programs offering certificates in polysomnography.

THE VALUE OF PROGRAMMATIC ACCREDITATION

Provides consumer protection, advances and enhances the profession, and protects against compromise of educational quality.

CORE VALUES

- Professionalism
- Service
- Collaboration
- Accountability
- Transparency

Quality means doing it right when no one is looking.

-Henry Ford



This past year has been another busy and exciting year for CoARC. Our Board of Commissioners, Officers, volunteers, and Executive Office staff are to be commended for their role in revising policies and developing initiatives in 2012 in support of CoARC’s mission and strategic plan. The following are some highlights of CoARC activities for 2012 and early 2013:

- The *2010 CoARC Accreditation Standards for the Respiratory Care Profession* are undergoing a review and revision process. This will allow streamlining of the current Standards as well as careful and thoughtful deliberation regarding associate, baccalaureate, and master’s degree education requirements. This process will include input from all of our constituents. The anticipated final draft will be approved in spring 2014. To provide comments on the draft *Standards* or download a copy of the *Standards* revision timeline, please visit www.coarc.com/29.html;
- The CHEA Board of Directors held a public hearing in Washington D.C. on June 11-12 and on September 28th, the CHEA Board granted recognition to CoARC;
- The validation and review of the 2012 Annual Report of Current Status (RCS) was completed. Programmatic outcomes data were revised (based on the 2012 RCS) and is available at www.coarc.com/47.html;
- The *2012 Report on Accreditation in Respiratory Care Education* that provides (a) descriptive statistics of CoARC Programs as of 12/31/12; (b) accreditation actions taken in 2012; and (c) aggregate statistics of graduate, enrollment, and outcomes data for the 2012 RCS, and (4) Programmatic data related to the AARC 2015 and Beyond Project was released and is available at www.coarc.com/;
- The document, *The Accreditation Process and its Impact on the Respiratory Care Workforce*, was published in March 2012 and is available for download at www.coarc.com/13.html;
- The document, *Competency-Based Accreditation Standards*, was published in May 2012 and is available for download at www.coarc.com/47.html;

Executive Director's Report (continued)

- The document, *Career Entry Pathways and Academic Progression in Respiratory Care Education*, was published in July 2012 and is available for download at www.coarc.com/47.html;
- A response to the AARC's request for comparing the current accreditation Standards to the competencies outlined in Conference II of the AARC 2015 and Beyond Project was provided and is available for download at www.coarc.com/13.html;
- The Site Visitors Policy and Procedures Manual and other site visit documents were revised and are available for download at www.coarc.com/32.html;
- The Accreditation Policies and Procedures Manual was revised (effective January 1, 2013) and is available for download at www.coarc.com/31.html;
- The 2013 Third-Party Comments list was posted on our website (www.coarc.com/30.html);
- The Ad-Hoc Master's Degree Committee became a Standing Committee with the name change to "Advanced Practice and Education Committee" – see highlight on page 16 for more details;
- Letter of Review status replaced with Provisional Accreditation and requires a site visit prior to conferral;
- Revisions to the Interpretive Guidelines (Standards 3.08, 3.11, 3.13, 4.01,4.02, 4.04, 4.06 and 5.03) were published in March 2012 and are available for download at www.coarc.com/29.html;
- Revisions to the definitions of attrition and job placement thresholds were published (effective July 2012) and are available for review at www.coarc.com/15.html;
- Four webinars were conducted in spring 2012 and are archived for viewing at www.coarc.com/12.html
- Accreditation of 100-level programs was discontinued as of December 31, 2012.

In closing, I'd like to thank all of our staff, volunteers and Board members who worked so hard this past year and achieved so much for the organization. Although the tireless work by these dedicated individuals in support of CoARC's day-to-day operations often goes unnoticed by programs and the public, such efforts are vital to ensuring that this organization achieves its goals of:

- Providing high quality accreditation of Respiratory Care educational programs;
- Assisting programs in meeting high quality accreditation standards;
- Providing information and guidance to the public regarding accreditation of respiratory care educational programs;
- Attracting adequate resources of talent and funding to ensure the viability of CoARC; and
- Forming partnerships and strategic alliances that build upon shared strengths to develop CoARC's capacity to serve its community.

2013 CoARC Meeting Dates

March 21-23, 2013

Bedford, TX

July 14-16, 2013

Orlando, FL

November 7-9, 2013

Bedford, TX

2012 Distinguished RRT Award Recipients

CoARC has determined the recipients of the CoARC 2012 Distinguished RRT Credentialing Success Award. In selecting programs for this recognition, the CoARC Board used objective criteria based on key accreditation metrics documented in the 2012 Annual Report of Current Status (RCS). These programs were required to: (1) have three years of outcomes data, (2) hold accreditation without a progress report; and (3) have RRT credentialing success of 90% or above with green in all outcomes thresholds. Thirty-seven (37) out of approximately 450 programs in the country met these criteria. The CoARC extends its sincere congratulations to these programs, their faculty, students, and graduates for meeting these rigorous criteria. These recipients will receive the 2012 CoARC Distinguished RRT Credentialing Success Award certificate during a CoARC reception preceding the 2013 AARC Summer Forum. Below is the list of recipients for 2012.

Keep in mind that the conferral of this achievement award does not imply the CoARC's recommendation, endorsement or ranking of any program in relation to other CoARC-accredited programs. Publications or announcements of this award shall not imply such recommendation, endorsement, or ranking. The primary responsibility of CoARC is to accredit programs based on their compliance with established accreditation standards.

Chattanooga State Community College	Mayo Clinical College of Med/Mayo School
Collin College	Millersville University
Concorde Career College- Memphis	Nassau Community College
Dakota State University	Ohlone College
Dakota State University Satellite	Ozarks Technical Community College
Dalton State College	Pickens Technical College
Delaware Co CC/Crozer-Chester Med Ctr.	Spartanburg Community College
Foothill College	St. Catherine University
Georgia State University	Stony Brook University
Gwinnett Technical College	Texas Southern University
Henry Ford Community College	The Ohio State University
Indian River State College	Tidewater Community College
Indiana Respiratory Therapy Ed Consortium	University of Arkansas for Medical Sciences
Ivy Tech Community College -Wabash Valley	University of Missouri at Mercy Hospital
Kapiolani Community College	University of Missouri-Columbia
Long Island University	University of Texas Medical Branch
Louisiana State University Health Sciences	Weber State University
Macomb Community College	Weber State University-IHC Campus
Mansfield University	

Interactive map of CoARC Programs Available!

The following link provides a mapping of all CoARC programs and related program information as of December 31, 2012: <http://batchgeo.com/map/0dfb6b86d50fd6c47073479eb121e009>

CoARC Evaluation of Policies and Procedures

CoARC continually evaluates accreditation practices and maintains appropriate policies and procedures to ensure an effective and efficient process leading to fair and consistent treatment of all respiratory care programs. In concert with the work of its 9 standing committees, the CoARC Board revised some policies and procedures. The following summarizes some of the more substantive changes made to the policies and procedures that were approved in 2012 and took effect on January 1, 2013 (additional changes are described on our website):

1.07—Program Status in Relation to Adverse Governmental and other Accrediting Agency Actions

- The definition of an adverse action and the timeline for notifications has been clarified

1.13—Teach Out Plan Agreement

- The process of notifying the CoARC and the process for implementing teach-out agreements to ensure the fair and equitable treatment of remaining enrolled students have been revised.

1.14—Conflict between Standards and State or Local Laws

- A new policy is added that addresses conflicts between CoARC Standards and state or local laws governing either the respiratory care program or the sponsoring institution/consortium.

2.041—Satellite Program Option – United States

- The following definition has been clarified: *“A Satellite Program Option is a location geographically separate from the base program (and within the 50 U.S. States) at which all Respiratory Care core didactic and laboratory courses of the program are offered (does not pertain to sites used by a completely on-line/distance education program for individual students or base program students attending one or more classes via distance learning technologies). The satellite’s location must be advertised or otherwise made known to prospective students. Satellite locations function under the direction of the Key Personnel of the program.”*

3.012—Ongoing Review

- The following definition has been added: *“Fundamental respiratory care core coursework is defined as professional coursework progressing toward completion of respiratory care program once formally admitted into the program.”*

9.02—Change in or addition of degree awarded

- The offering of an additional first-professional degree track (e.g., AS and BS or BS and MS) is also considered a substantive change.

9.10—Increase in Enrollment Request

- The CoARC will track substantive increases in enrollments for eligible programs based solely on maximum annual enrollments (as opposed to being based on maximum number of students per cohort and maximum number of cohorts per calendar year.) Further explanation of this policy change is provided to programs in a separate CoARC letter of notification.

Section 11—Disclosure of Accreditation

- The disclosure of programs seeking CoARC accreditation has been clarified. Programs must also list degree(s) awarded in their disclosure notifications. Policies regarding Public Notice of Program Information (11.05), Public Notice of Accreditation Actions (11.06), and Misrepresentation of CoARC actions (11.07) has been added.

14.03—Confidentiality

- Additional accreditation information is identified as eligible to be released to the public.

14.07—CoARC Access to School Graduate/Student Certification Licensure Examination Data

- A new policy is added requiring programs to explicitly acknowledge the CoARC’s right to receive such data directly from the National Board for Respiratory Care (NBRC).
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CHEA Recognition—What Does it Mean?

The Council on Higher Education Accreditation (CHEA) is a private, non-profit, national organization that coordinates accreditation activity in the United States. CHEA is comprised of over 3,000 degree-granting higher education institutions as well as over 60 regional, institutional, and professional accrediting organizations. It serves as a national voice for voluntary accreditation and quality assurance to the U.S. Congress, the U.S. Department of Education, and to the general public, opinion leaders, students, and families. CHEA's primary purpose is to assure and strengthen academic quality and ongoing quality improvement in courses, programs and degrees. CHEA-recognized programs, such as CoARC, must demonstrate compliance with CHEA's Recognition Standards:

- Advancing academic quality;
- Demonstrating accountability;
- Encouraging, where appropriate, self-scrutiny and planning for change and needed improvement;
- Employing appropriate and fair procedures in decision making;
- Demonstrating ongoing review of accreditation practice;
- Possessing sufficient resources.

For more information about CHEA and its recognition process, please visit their website at www.chea.org.

Numbers of Site Visits from 2009—2012:

Sixty site visits were completed in 2009.
 Thirty site visits were completed in 2010.
 Ninety-three site visits were completed in 2011.
 Thirty-nine visits were completed in 2012.

Did You Know????

Commissioners and Site Visitors receive no compensation for their services related to the CoARC, other than reimbursement for travel and expenses.

What is Administrative Probation?

Administrative Probation is a status assigned by the CoARC Executive Office when a program (i.e. any program option with a separate CoARC ID number) does not comply with any of the administrative requirements. The placement of a program on Administrative Probation will not affect the eligibility for the NBRC Examinations of those students in the program. Substantive Change requests will not be considered while a program is on Administrative Probation. The initial request (for required documentation, fees, etc.) will include the warning that should the information/fees not be submitted prior to the applicable deadline, the program will be placed on Administrative Probation. Should the material/fees etc. not be received in the Executive Office by the deadline, a second request will be sent by certified mail, return receipt requested, to responsible individuals at the program's sponsor as well as to the program director, again informing the program that failure to submit the required material (within ten (10) days of the date on the return receipt) will result in the program's being placed on Administrative Probation. During a period of Administrative Probation, all listings of a program's accreditation status must include the words "Administrative Probation". Following conferral of Administrative Probation, failure to receive the requested material/fees etc. will result in the program's being placed on the next scheduled CoARC Board meeting agenda for consideration of Withhold or Withdrawal of Accreditation (see CoARC Accreditation Policy [1.055](#) and [1.058](#)).

Administrative requirements include: 1) Filing all required documents in a timely and truthful manner (e.g., Self-Study Report, Annual Report of Current Status, Progress Reports, Substantive Changes) by the date determined by the CoARC and communicated electronically or in writing to the program; 2) Agreeing to reasonable on-site review dates within the time frame established by the Executive Office; and 3) Payment of fees within the time frame established by the Executive Office.

Spotlight on CoARC Standard 5.01 and Policy 11.0—Disclosure of Accreditation

Institutions and programs are responsible for providing clear and credible information to stakeholders about all aspects of the program, including any program options. Published information about the program must be accurate and consistent wherever it appears. Published information should also be reviewed periodically to ensure it is up-to-date and consistent with CoARC Standards and Accreditation Policies. CoARC Standard 5.01 states that , “*Web pages, academic catalogs, publications and advertising must accurately reflect each respiratory care program offered.*”

A recent internal audit of compliance with CoARC Standards 5.01 revealed a significant number of programs with inaccuracies related to compliance with CoARC disclosure requirements as described in Policy 11.0. Specifically, CoARC Policy 11.01 requires institutions and programs to be accurate in reporting to the public the program’s accreditation status. Publication of a program’s accreditation status must include the full name, mailing address, website address, and telephone number of the CoARC. The CoARC also requires a program to inform all current students and applicants in writing of the program’s accreditation status including changes to its accreditation status.

Section 11 provides additional guidance on the disclosure of a program’s accreditation status. Such disclosure requirements vary depending on the type of accreditation status conferred upon the program. For example, Policy 11.02 requires programs holding Provisional Accreditation to provide a specific disclosure statement that includes the CoARC definition of Provisional Accreditation.

Further, Policy 11.03 states:

A. If a program holds Initial or Continuing accreditation with the CoARC, the sponsor must use the following language when referring to that accreditation:

1. In at least one of its comprehensive publications customarily used to officially convey institutional information (e.g., program website), it must state:

*“The [name of program, degree(s) awarded, and campus location] is accredited by the
Commission on Accreditation for Respiratory Care (www.coarc.com).”
Commission on Accreditation for Respiratory Care
1248 Harwood Road Bedford, Texas 76021-4244
(817) 283-2835*

Any communication source that provides information to the public regarding the program accreditation status must include information that is accurate and reflects the current status. The failure of a program to disclose its CoARC accreditation status in an accurate and timely fashion is a violation of Standards 5.01 and 5.02.

Please take the time to review the accuracy of your program’s disclosure statements. If you have any questions, please contact the CoARC Executive Office and we will be glad to help you.

Check Your Program’s Website for Compliance with CoARC’s Standard 5.03!

Standard 5.03 (p. 27) requires that programs provide a link to the CoARC website, or published URL (www.coarc.com/47.html), where student/graduate outcomes for all programs can be found. The intent of this *Standard* is that comparable outcomes information be readily available to the public and to allow potential students to use this information as a measure of programmatic quality when selecting a program.

Free Webinars...

<http://www.coarc.com/12.html>

In an effort to develop and maintain an effective orientation, training, and professional development program for key personnel, CoARC has established a free webinar training series. All live webinars are archived on this web page and can be accessed at any time at no cost.

Complaint Process...

<http://www.coarc.com/26.html>

It is the policy of CoARC to review all complaints received from any source, including students, against either an accredited program or CoARC itself that are related to compliance with CoARC's standards, policies, and procedures and to resolve any such complaints in a timely, fair, and equitable manner using established timelines for each step of the complaint procedure.

CoARC Board of Commissioners Functions

The Board of Commissioners is the independent decision-making body of CoARC charged with making formal accreditation awards through program review of degree-granting educational programs. The Board is the strategic-making body for the organization. Along with CoARC Executive Office Staff, they oversee all committees and representatives of the organization. The Board also acts as the governing body for the corporation as per its bylaws and articles of incorporation. The Board has final authority over all accreditation and policy decisions.

Functions (In addition to those stated in the CoARC Bylaws)

- a. Establishes, revises, adopts, and administers standards, policies, and procedures for accreditation, including eligibility for, granting of, periodic renewal of and withdrawal of accreditation and takes action as necessary.
 - b. Updates, as necessary, standards, policies and procedures related to the accreditation process, including written guidelines for accreditation documents and meetings.
 - c. Monitors accredited programs through the review process, which includes self-studies, progress reports, annual reports and other information.
 - d. Sets qualifications for CoARC board members, site visitors, and program reviewers.
 - e. Investigates written complaints concerning accredited programs.
 - f. Establishes, reviews, and modifies fees as necessary and provides for responsible fiscal planning and control for the administration of the accreditation process.
 - g. Formulates program review policies that assure efficient, consistent program evaluation for implementation by reviewers.
 - h. Reaches autonomous decisions regarding accreditation for respiratory care education programs.
 - i. Publishes accreditation decisions.
 - j. Appoints and trains site visitors and program reviewers.
 - k. Monitors performance of trained site visitors and program reviewers.
 - l. Collaborates with other accreditation agencies as appropriate to improve the efficiency of the accreditation process.
-

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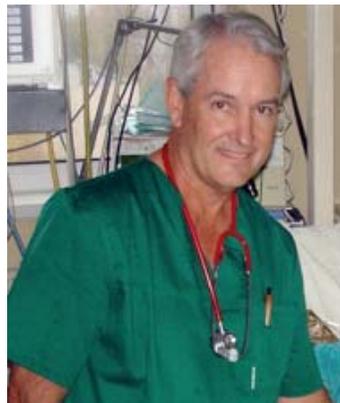
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Commissioners (continued)

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General Responsibilities of Commissioners

- a. Attend scheduled Board meetings and participate as voting members;
- b. Present program recommendations to CoARC Board;
- c. Communicate concerns related to the accreditation process to CoARC Board;
- d. Review accreditation recommendations and make decisions on the accreditation status of programs;
- e. Serve as Program Referee;
- f. Participate in site visits;
- g. Serve on standing or ad hoc committees, attend meetings related to accreditation, etc.;
- h. Take appropriate action to avoid conflict of interest in carrying out commissioner responsibilities;
- i. Report to their respective collaborating organizations on a periodic basis (with the exception of the public and at-large members).

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DID YOU KNOW???

CoARC has processes that call for CoARC to inform the public about accreditation decisions. One of the ways CoARC does this is to provide the public with information about the accreditation decision process. CoARC provides the public with a description of the nature and scope of CoARC accreditation activity as well as the importance and value of accreditation (<http://www.coarc.com/46.html>). CoARC also provides the public with detailed descriptions of its accreditation policies and procedures by publishing its Accreditation Policies and Procedures Manual (<http://www.coarc.com/31.html>). In addition, CoARC provides a list of programs scheduled to be reviewed prior to each Board meeting as well as the final accreditation actions taken following each meeting (<http://www.coarc.com/11.html>). This listing is categorized by accreditation action. CoARC is currently considering policy revisions that will clarify the disclosure of accreditation decisions that strikes a balance between CoARC's objectives of becoming more transparent while ensuring a clear and accurate interpretation by the public of the context of such decisions.

Spotlight on a CoARC Committee:

CoARC's Advanced Practice and Graduate Education is CoARC's newest Standing Committee.

The Committee is charged with:

- Developing graduate level education and advanced practice accreditation Standards, including Accreditation Standards for the Advanced Practice Respiratory Therapist (APRT);
- Developing and maintaining the competencies for the APRT;
- Reviewing advanced practice (APRT) and graduate education accreditation Standards at least every five years and recommend revisions, if any, to the Board;
- Reviewing/evaluating/advising the Commission on developments regarding graduate and advanced practice (APRT) programs;
- Working with the Accreditation Policies/Standards/Bylaws Committee to develop and review accreditation policy and processes for graduate level and advanced practice (APRT) programs.

News and Announcements...

<http://www.coarc.com/13.html>

Check here for updates from CoARC meetings, deadline dates for submissions, and announcements for revisions of CoARC documents.

Forms and Reports...

<http://www.coarc.com/33.html>

Forms and reports located throughout our web site are available at this link in alphabetical order.

Institutional versus Programmatic Accreditation: What's the Difference?

Institutional accreditation evaluates overall institutional quality. Institutional accreditation is focused on verifying the administrative policies, procedures and stability. Institutions must be institutionally accredited by an accrediting agency recognized by the U.S. Secretary of Education for the students of that institution to be eligible for Title IV (financial aid) programs. One form of institutional accreditation is regional accreditation of colleges and universities. There are 8 regional accreditors. There are also over a dozen other institutional accreditors that include national faith-based accreditors and national career-related accrediting organizations— several of which are the accreditors for institutions sponsoring respiratory care programs. For more information about institutional accreditation, please visit the U.S. Department of Education website at <http://ope.ed.gov/accreditation/>

Programmatic accreditation examines specific programs of study, rather than an institution as a whole. This type of accreditation is granted to specific programs at specific levels. Architecture, nursing, law, medicine, engineering programs, and over 60 other disciplines are often evaluated through specialized accreditation. For more information about programmatic accreditation, please visit the Association of Specialized and Professional Accreditors (ASPA) website at www.aspa-usa.org.

CoARC Presentations at the 2012 AARC Summer Forum

H.F. Helmholtz Educational Lecture Series

Topic: Excellence in Respiratory Care Education: Creating an Exemplary RC Program

Presenter: William Galvin, MEd, RRT, CPFT, AE-C, FAARC, Program Director, Gwynedd Mercy College

CoARC Symposium: CoARC Educators Workshop: Taking a Program From Good to Great!

Re-engaging Your Advisory Committee - From Improving Participation to Understanding Their Role in the Accreditation Process - [Gary C. White, MEd, RRT, RPFT](#)

Engaging Graduates and Employers in Program Evaluation - [Stephen P. Mikles, EdS, RRT, FAARC](#)

Re-Engaging your Medical Director - From Improving Participation to Understanding His/Her Role in the Accreditation Process - [David L. Bowton, MD, FCCP, FCCM](#)

Models of a Successful Inter-Rater Reliability Program - [Kathy J. Rye, EdD, RRT, FAARC](#)

Go to our website (<http://www.coarc.com/11.html>) to view the presentations.

CoARC Presentations at the 2012 AARC International Congress

COARC Workshop: Program Strategies for Transforming Your Students into Competent Therapists

How to Evaluate Students in the Classroom – An Accreditor’s Perspective - [Pat Munzer, DHSc, RRT, FAARC](#)

Resources to Assist Students in Preparing for Credentialing Success - [Bradley A. Leidich, MEd, RRT, FAARC](#)

Methods of Incorporating Critical Thinking into Your Curriculum - [David Shelledy, PhD, RRT, FAARC](#)

Competency-Based Standards for Respiratory Care Education - [Thomas R. Smalling, Ph.D., RRT, RPFT, RPSGT, FAARC](#)

Go to our website (<http://www.coarc.com/11.html>) to view the presentations.

Outstanding Site Visitor Award Presentation at AARC International Congress

The Commission on Accreditation for Respiratory Care (CoARC) recognizes up to two active Site Visitors annually, for dedicated service and outstanding contributions to the CoARC's mission of ensuring the high quality of respiratory care education. Nominations are made by the CoARC Commissioners.

In addition to meeting the minimum qualifications for a Site Visitor as described in the CoARC Site Visitor Policies and Procedures Manual, a nominee must have participated in at least three (3) CoARC site visits within the past two (2) years by the nomination deadline. In addition, nominees must not have any negative evaluations within the same two-year period, and have provided a special contribution to the site visit process.

The award was named for Dr. Ralph Kendall, MD as a permanent expression of CoARC's grateful recognition of his outstanding service as a site visitor and mentor. Dr. Kendall became a site visitor for CoARC in 1989 and has performed approximately 26 site visits over the past 4 years. Dr. Kendall also served as Chair of the CoARC Site Visit Subcommittee from 2003 to 2009. His expertise and assistance to program personnel and in training new site visitors is unparalleled and through the establishment of this award will not be forgotten.



The Third Annual Dr. Ralph Kendall, MD Outstanding Site Visitor Award was presented to Phyllis W. Brunner, BS, RRT. Ms. Brunner became a site visitor for CoARC in 1996 and has participated in 10 on-site reviews in the past 3 years. She consistently receives very positive comments from the program personnel, other site visit team members, and CoARC Referees. Of those 10 site visits she has served as team captain for 7 of them, has trained 1 new site visitor and two new team captains. Ms. Brunner has been described as professional, very thorough, fair, consistent and very knowledgeable of the Standards and process of accreditation and is often referred to as an excellent representative of CoARC in her evaluations. Her dedication and service to CoARC is invaluable.

THANK YOU PHYLLIS!



Recognition of 2012 CoARC Site Visitors

The following individuals have graciously contributed to CoARC's mission by volunteering their time and expertise as site visitors in 2012. Members that served as team captains are designated by asterisks.

Ronald Allison, MD
 Larry Arnson, PhD, RRT
 Catherine Bitsche, MA, RRT-NPS, RCP
 John Boatright, PhD, RRT
 Janet Boehm, MS, RRT, RCP, RPSGT*
 Erna Boone, MEd, RRT*
 David Bowton, MD, FCCP, FCCM*
 Phyllis Brunner, BS, RRT*
 Gina Buldra, BS, RRT, RCP
 Leah Carlson, BS, RRT, NPS
 David Chang, EdD, RRT, CPFT, NPS*
 Kelli Chronister, MS, RRT, CPFT, NPS*
 Regina Clark, MEd, RRT
 Joseph Coyle, MD*
 Carole "Kelly" Crawford-Jones, MS, RRT*
 Robert DeLorme, EdS, RRT*
 Diane Flatland, MS, RRT-NPS, CPFT, RCP, LP*
 Douglas Gardenhire, EdD, RRT
 Donna "De De" Gardner, MSHP, RRT
 Ian Gilmour, MD*
 Paul Goldiner, MD
 Christine Hamilton, DHSc, RRT, AE-C*
 Thomas Harding, MS, RRT, RCP*
 Thomas Hill, PhD, RRT, FAARC*
 Shirley Jenkins, BSED, RRT
 Tom Jones, MEd, RRT
 Chris Kallus, MEd, RRT*
 Shane Keene, DHSc, RRT-NPS, CPFT, RPSGT

Diane Klepper, MD
 Paul LaMere, MEd, RRT*
 Delia Lechtenberg, MA, RRT
 Kathleen Lee, EdD, RRT, FAARC
 Debra Lierl, MEd, RRT, FAARC*
 Douglas Masini, EdD, RRT-NPS, RPFT*
 Kenny McCowen, BS, RRT*
 Karen McDonald, MS, RRT-NPS
 Stephen Mikles, EdS, RRT, FAARC*
 Jolene Miller, MEd, RRT*
 Ed Moser, MBA, RRT, RCP
 Timothy Op't Holt, EdD, RRT, AE-C, FAARC*
 Leann Papp, EdS, RN, RRT, RCP*
 Michael Prewitt, PhD, RRT*
 Gina Ricard, BS, RRT-NPS
 Russell Rozensky, BS, RRT-SDS, CPFT, RPSGT*
 Kathy J Rye, EdD, RRT, FAARC*
 Peggy Spears-Davis, MS, RRT
 Monica Schibig, MA, RRT-NPS, CPFT*
 Gary White, MEd, RRT, RPFT*
 Mary Yacone, MEd, RRT
 Richard Zahodnic, PhD, RRT-NPS, RPFT
 Beth Zickefoose, BS, RRT-NPS, RPFT

THANK YOU!

CoARC Executive Office Staff

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- Self-Study Content Questions
- New Program Inquires
- Questions about Annual Reports
- Polysomnography
- Standards & Guidelines Questions
- Consortia Agreements
- Change in Sponsorship



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- Program Address & Name Changes
- Requests for Verification of Accreditation Status
- All Meeting Planning



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- Assist with Self-Studies
- Status of Accreditation Actions
- Special Projects
- Progress Report Submissions



Jana L. Anderson

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- Billing/Accounting
- Report of Current Status (annual report) questions
- Submission of Annual Reports
- CoARC Newsletter
- Website & Database Support



Bonnie Marrs, BS

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- Scheduling Site Visits
- Site Visitor Applications and Assignments
- Site Visit Surveys
- On-Site Review Reports



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