



# CoARC NEWSLETTER

COMMISSION ON ACCREDITATION FOR RESPIRATORY CARE

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## President's Report — Kathy J. Rye, EdD, RRT-ACCS, FAARC

I am pleased to deliver my first report as President of the CoARC. As the information in this newsletter confirms, the past year has been a period of unprecedented recognition, dynamism, and success for the Commission.

In our ongoing effort to demonstrate accountability to the public through competency-based, outcomes-centered standards that require programs to achieve and demonstrate valid measures of success, the 2015 CoARC *Accreditation Standards for Entry into Respiratory Care Professional Practice* are nearing completion of a five-year review and revision process. The revision allows streamlining of the current Standards as well as careful and thoughtful deliberation regarding associate, baccalaureate, and master's degree education requirements. This process includes input from all of our constituents. We anticipate final draft approval in July 2014 with effective date of July 1, 2015. In 2015, new CoARC Standards will be in effect and evidence of compliance related to outcome assessment (Standard 3.05) will include documentation demonstrating the program's review and analysis of the CRT and WRRT NBRC School Score Reports at least annually. Currently, the CoARC is only requiring the use of the CRT NBRC School Score Report as part of its standardized progress report for CRT credentialing success. In addition, under the new Standards content areas where scores fall below the national mean an analysis and action plan must be developed and implemented. In preparation for the new Standards CoARC would like to assist programs who have questions related to the use of the NBRC School Score Reports. On the CoARC website ([www.coarc.com](http://www.coarc.com)) click "For Programs" in the menu bar and select "Webinars". Click on the April 27, 2012 webinar or simply click on ([Your NBRC CRT and WRRT School Score Reports: What Are They and How Do I Interpret Them?](#)) and you will go directly to the webinar. If there are questions you may contact the Executive Office for additional assistance.

At its July 2013 Board meeting, the CoARC approved developing accreditation standards and a review process for programs designed especially to meet the needs of the practicing respiratory therapist who, having already completed an accredited respiratory care program with an earned entry into RC professional practice degree, is returning to school to obtain an advanced degree. CoARC conducted a web-based survey conducted in June 2013 on the current status of degree advancement programs as well as interest in a formal accreditation review process of such programs. Based on the survey results, the Board decided to move forward with developing accreditation Standards for these types of programs. Drafts of the *Accreditation Standards for Degree Advancement Programs in Respiratory Care* will



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## President’s Report (Continued)

be shared with the public for feedback via web-based survey. We anticipate final draft approval of Standards by early 2015 and should begin accepting applications for accreditation of DA programs by mid-2015.

We are also progressing with the development of the second draft of the *Accreditation Standards for Advanced Practice Programs in Respiratory Care*. Advanced practice respiratory therapists (APRTs) are expected to function as mid-level providers, who assess patients, develop care plans, order and provide care and evaluate and modify care based on the patient's needs and response to therapy. The APRT is expected to provide and direct care under the guidance of a supervising physician, often directed by clinical protocols. The CoARC Board reviewed the first draft of the APRT Standards at its March 2013 meeting. The draft APRT Standards were then shared with the APRT Workgroup (consisting of representatives from the AARC, the NBRC, and the CoARC) for comments and feedback. In late 2013, the draft APRT Standards were shared with the public for feedback via web-based survey. Subsequent drafts of the APRT Standards, Evidence of Compliance, and Interpretive Guidelines will be published during 2014 (and early 2015, if needed). We anticipate a final draft approval by mid-2015 with applications being accepted by the fall of 2015.

It is indeed a revitalizing and challenging time for CoARC. A special thanks to all of the valuable volunteer site visitors and Commissioners who have made the achievements of the past year possible. It would be impossible to carry out the mission of the organization without the hard work of these volunteers, as well as the Executive office staff: Tom Smalling, Jana Anderson, Lisa Collard, Bonnie Marrs and Shelley Christensen. It is truly a privilege to serve as President of this organization, working with such a distinguished group of colleagues from all around the country. The CoARC looks to the future with confidence grounded in our mission, inspired by our communities of interest and collaborating organizations, and guided by our commitment to quality Respiratory Care education.

The program data table below is from the **2013 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, 2013; (2) Accreditation actions taken in 2013; (3) Aggregated statistics of graduate, enrollment, and outcomes data from the 2013 Annual Report of Current Status submitted on July 1, 2013; and (4) Programmatic data related to the AARC 2015 and Beyond Project.

Program Numbers by CoARC Level as of December 31, 2013 (n=448)			
	200-level	300-level	400-level
Continuing Accreditation	328	16	5
Initial Accreditation	63	0	2
Probationary Accreditation	7	0	0
Provisional Accreditation	27	N/A	N/A
Inactive Accreditation	0	0	0
Approval of Intent	1	N/A	1
Letter of Intent	3 – applications in progress	N/A	0
Total # of Associate Degree Programs			381
Total # of Baccalaureate Degree Programs			57
Total # of Master’s Degree Programs			3

## ***CoARC Stephen P. Mikles Media Award***

named in honor of the contributions of President Stephen P. Mikles, EdS, RRT,  
FAARC (September 9, 1952 - July 4, 2013 )

During the Lambda Beta Society reception at the AARC 2013 International Congress in Anaheim, CA, CoARC presented its scholarship award in posthumous honor of President Stephen Mikles.

Stephen P. Mikles ("Steve" to those who knew him) completed his undergraduate studies in respiratory therapy at SUNY Upstate Medical Center in Syracuse, New York and his graduate studies in education at the University of South Florida in Tampa, Florida. His commitment to education and teaching was exemplified by his long, successful career as a Professor and Program Director of the Respiratory Care Program at St. Petersburg College in Florida. Steve was an instructor at SUNY Upstate Medical Center from 1977 to 1979. He became a faculty member at St. Petersburg College in 1979 and had been the program director there since 1986. Steve had a reputation as an outstanding educator who was widely respected and admired by his students and peers.



Steve was a respiratory care educator, a volunteer in respiratory care accreditation services during almost 20 years of service to CoARC and its predecessor organization. He was a member of the AARC continuously since 1973. He was a tireless promoter of excellence in education and the credentialing process. On November 2, 1975, he was awarded the NBRC's standard of excellence, the RRT credential (Registry number 3309).

Steve's service to the profession went beyond the accreditation arena. He had been actively involved in a number of committees with the NYSSRC, FSSRC, AARC and NBRC since the late 1970's. In 2008, the AARC bestowed one of its highest honors on Steve Mikles by recognizing him as a Fellow of the American Association for Respiratory Care for his outstanding character, dedication and service. Although he served on many state and national committees, he considered his work in the classroom as his greatest contribution to the profession.

Steve was an outstanding and determined individual with a strong character. He had a very positive attitude and truly embraced doing everything he could to better his profession. He had an unrivaled dedication to helping educational programs as evidenced by his experience with and time spent on improving program outcomes. During his many years with CoARC, Steve was instrumental in helping many other new board members gain the skills and judgment required to function properly as a Referee. His involvement and achievements in various professional activities served as an inspiration for each of us. Steve's involvement, knowledge, and contributions have been instrumental to the success of our accreditation system.

Steve Mikles' extensive history with CoARC and his countless volunteer hours working with other state and national organizations over the past two decades has served as an invaluable resource to many students, colleagues, to CoARC, and to the profession.

Steve Mikles was also a beloved husband, father, grandfather, educator, leader, mentor and friend. He touched countless lives and he will be greatly missed.

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**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 ensure that high quality educational programs prepare competent respiratory therapists for practice, education, research and service."

**SCOPE**

CoARC accredits respiratory care degree programs at the Associate, Baccalaureate, and Master’s Degree level in the United States. 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
- Collaborative Leadership
- Accountability
- Transparency
- Excellence

*However beautiful the strategy, you should occasionally look at the results.*

**-Winston Churchill**



The CoARC is continually evaluating its accreditation processes and business practices to ensure they are consistent with its mission. This past year, the CoARC embarked on a revision of its 2011-14 strategic plan. The Strategic Planning Committee has made recommendations for some revisions/updates to our strategic plan. The Strategic Planning Committee is responsible for gathering information from other CoARC committees to develop short and long term strategic goals for the organization. The committee periodically (at least annually) reviews the CoARC’s mission statement, vision statement, and core values to ensure they reflect current practice. The committee also reviews current critical issues and formulate action plans. In addition, the Commission conducts ongoing review of financial, staff, and operational resources at each Board meeting.

The revision process began with a survey that was sent to the Commissioners and site visitors asking for input on how CoARC is functioning. The survey asked the following: (1) What is the CoARC doing really well, including its assets, capabilities, and greatest accomplishments?, (2) What external circumstances could improve the services and health of the CoARC and meet consumer needs, and threats or weakness reframed into possibilities?, (3) What does the CoARC desire to be known for based on its scope, purpose, and values?, and (4) Considering its strengths, opportunities, and aspirations, what are the meaningful measures that would indicate that we are on track to achieving our goals? Following the November 2013 meeting, the Strategic Planning Committee began using the survey results to develop additional goals, action plans, objectives, etc., as needed.

Revisions were made to CoARC’s purpose statements as follows: CoARC accreditation is a nongovernmental peer review process that operates in accordance with nationally recognized standards in the United States and its territories. Accreditation by CoARC is intended to:

1. Promote excellence in the provision of respiratory care through education of future respiratory therapists;
2. Ensure that respiratory care programs have resources, goals, and outcomes that are appropriate to prepare individuals to fulfill their expected roles;
3. Ensure that accredited respiratory care programs comply with the CoARC standards and policies;

## Executive Director's Report (continued)

4. Inform the public of the purposes and values of programmatic accreditation;
5. Foster self-review and continuing improvement in respiratory care programs; and
6. Promote, develop and support charitable, scientific, literary, and educational activities that advance high quality respiratory care education.

The CoARC also revised its mission statement, vision statement, scope, and core values. The revised core values that guide the CoARC in its planning and operations are as follows:

- **Professionalism** – CoARC operates with integrity and honesty.
- **Service** - CoARC is supportive of and responsive to the needs of its communities of interest.
- **Collaborative Leadership** - CoARC sets its direction after collegial and meaningful dialogue with its communities of interest.
- **Accountability** - CoARC is committed to consistency and fairness in its decision-making processes.
- **Transparency** – CoARC promotes openness to innovation, communication, continuous quality improvement, and best practices.
- **Excellence** – CoARC promotes the highest quality in respiratory care education and provision of safe and effective respiratory care services.

Look for more details about the CoARC's goals, objectives, and action plans in a CoARC Communique to be published in an upcoming edition of the AARC Times .

Lastly, I would like to thank all of the CoARC volunteers who have selflessly given their time and talents to assuring the quality of respiratory care education. Your hard work and dedication are sincerely appreciated. It is a privilege for me to oversee the work of this wonderful organization and an honor to recognize and acknowledge the contributions of CoARC's dedicated Board members, site visitors, and staff. 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:

1. Provide high quality accreditation services of to Respiratory Care educational programs.
2. Assist programs in meeting high quality accreditation standards and outcomes.
3. Provide information and guidance to the public regarding accreditation of respiratory care educational programs.
4. Attract adequate resources of talent and funding to ensure the viability of CoARC.
5. Improve communications with CoARC stakeholders and explore collaborative projects of mutual interest.

## 2014 CoARC Meeting Dates

**March 27-29, 2014 - Bedford, TX**  
**July 13-15, 2014 - Marco Island, FL**  
**November 13-15, 2014 - Bedford, TX**

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## 2013 Distinguished RRT Award Recipients

CoARC has determined the recipients of the CoARC 2013 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 2013 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. Forty-Nine (49) 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 2013 CoARC Distinguished RRT Credentialing Success Award certificate during a CoARC reception preceding the 2014 AARC Summer Forum. Below is the list of recipients for 2013.

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.

Bellarmino University	Macomb Community College
Broward College	Mansfield University
Chattanooga State Community College	Mayo Clinical College of Medicine/Mayo School
Chippewa Valley Technical College	Millersville University
Collin College	Monroe County Community College
Dakota State University	Nassau Community College
Dalton State College	Ohio State University
El Centro College	Ohlone College
Foothill College	Ozarks Technical Community College
Georgia Regents University	Pima Medical Institute-Denver
Georgia State University	Rush University Medical Center
Gwinnett Technical College	Santa Fe College
Harrisburg Area Community College	Spartanburg Community College
HCCS: Coleman College of Health Sciences	St. Johns River State College
Henry Ford Community College	Stony Brook University
Highline Community College	Texas Southern University
Indian River State College	Tidewater Community College
Indiana Respiratory Therapy Education 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
Kettering College	University of Texas Health Science Center
Long Island University	University of Texas Medical Branch
Louisiana State University Health Science - New Orleans	Weber State University
Louisiana State University Health Sciences - Shreveport	Weber State University - IHC Campus
	West Chester University

## Revised CoARC of Policies and Procedures Released

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 2013 and took effect on January 1, 2014 (additional changes are described on our website at <http://www.coarc.com/31.html>):

### **1.133 Teach-Out Plans and Agreements**

Enrolled students who complete the program under a CoARC-approved teach-out agreement are considered graduates of a CoARC accredited program. Students taught out by an institution that does not hold CoARC accreditation will not be considered graduates of a CoARC-accredited program.

### **2.042 Satellite Program Option-International**

CoARC no longer accredits International Satellites.

### **3.012 Positive Placement**

The definition of Positive (Job) Placement has been revised.

### **6.011I Key Personnel**

Programs with an Approval of Intent are not eligible for temporary or acting replacements.

### **9.11 Change in Program Location**

Change in clinical affiliates eliminated as a substantive change.

### **10.0 Complaint Procedure**

CoARC revised this section.

### **Section 12.0 and throughout the document**

The term “first-professional” was replaced with “Entry into Respiratory Care Professional Practice.”

### **Glossary**

Definition of “Adverse Action” added.

## Recent CoARC Board Decisions

- Postponed accreditation action on graduate and employer satisfaction outcomes until the submission of the 2014 annual report of current status (RCS).
- Published a Statement regarding AARC PEP meeting Standard 3.11;
- Approved an On-Time Graduation Rate Threshold at 70% that will likely be implemented with the July 2015 RCS submission ;
- Allowed programs to count all job placements during the 3-year reporting period and not just those within the 10-12 month reporting period. The Board is in the process of reviewing the current definitions of job placement and attrition to determine if any future changes to the definitions and thresholds are warranted.
- Began gathering data on first-time pass rates for the CRT, WRRT, and CSE for the 2014 calendar year via the annual report;
- Published a Joint Statement with NBRC Regarding Changes to NBRC Admissions Policies and CoARC Policy 13 (available at [www.coarc.com/13.html](http://www.coarc.com/13.html)).

## What is Probationary Accreditation?

The CoARC makes most accreditation decisions during its Board meetings three times per year (typically in March, July, and November) based on an accreditation review cycle described in Section 1 of the *CoARC Accreditation Policies and Procedures Manual* (available at [www.coarc.com/31.html](http://www.coarc.com/31.html).) The statuses of Administrative Probation, Voluntary Withdrawal of Accreditation and Voluntary Inactive Accreditation do not require a vote by the CoARC Board and are processed by the Executive Office throughout the year.

Probationary Accreditation is a temporary status of accreditation conferred when an accredited program is not in compliance with one or more *Standards* and/or Policies following submission of one or more progress reports, and has not corrected deficiencies identified earlier by the CoARC. Probationary Accreditation can also be conferred when a sponsor receives an adverse action as described in CoARC Policy 1.07. The program must file a Probation Report as directed by the CoARC Executive Office. However, if at any time during the year, the program is able to rectify all the deficiencies that resulted in Probationary Accreditation and achieve compliance with the *Standards*, the CoARC will consider removing the probationary status when review of the Probation Report so warrants. If compliance with the *Standards* is not demonstrated within 1 year, accreditation will be withdrawn. A program may remain on probation for no longer than one year without demonstrable and remarkable extenuating circumstances, in which case probation may be extended for an additional year. In no case will probation status exceed 2 years. A probation decision can be subject to reconsideration but cannot be appealed (See CoARC Policy 1.06). Enrolled students completing the program under Probationary Accreditation are considered graduates of a CoARC accredited program. Programs on Probationary Accreditation are prohibited from increasing cohort and enrollment numbers until Probationary Accreditation is removed. The CoARC requires a sponsor to complete a teach-out plan when a program is placed on probation, requests inactive status, voluntarily or involuntarily withdraws (see CoARC Policy 1.13).

### Interactive map of CoARC Programs Available!

The following link provides a mapping of all CoARC programs and related program information as of December 31, 2013: <http://www.maptive.com/ver3/RC2013CoARCRCSData>

Use this link to access an interactive map of Outcomes Data\* from 2013 CoARC Annual Report of Current Status (RCS) for Sleep Specialist Program Options <http://www.maptive.com/ver3/PSGCoARC2013RCSData>

## State- or Institutional-Mandated Credit Limits?

While the CoARC Board has declined any request to provide a formal letter of support due to the fact that we do not mandate a minimum number of credits, the CoARC recommends cautioning the state or institution that reducing hours may increase the risk of impairing your students' ability to pass national credentialing exams which would then threaten a program's accreditation. The Standards at risk of becoming non-compliant are *Standard 4.01 - The program must prepare students to meet the recognized competencies for registered respiratory therapists identified in these Standards* and *Standard 4.10 - The program must ensure that the length of study in the respiratory care program is sufficient for students to acquire the expected knowledge and competencies. The minimum length of the program must be two academic years of full-time instruction or its equivalent.*

## DR. RALPH KENDALL NAMED CoARC COMMISSIONER EMERITUS.

At the AARC Summer Forum, Dr. Ralph Kendall was named CoARC Commissioner Emeritus. Here is the resolution presented to Dr. Kendall as adopted by the Board of Commissioners on July 13, 2013:

**WHEREAS**, Dr. Ralph Kendall has provided significant and lasting contributions to the Commission on Accreditation for Respiratory Care (CoARC), since his appointment to the CoARC Board in 2000; *and*

**WHEREAS**, Dr. Ralph Kendall served as Chair of the CoARC Site Visit Review Committee, member of the Nominations and Elections Committee; and member of the Accreditation Policies/Standards/Bylaws Committee; *and*

**WHEREAS**, Dr. Ralph Kendall has a well-deserved national reputation for his dedicated service as a Site Visitor and Team Captain for the CoARC since 1994 having completed over 140 site visits; *and*

**WHEREAS**, Dr. Ralph Kendall holds a Doctor in Medicine degree from the Medical College of Virginia, a Bachelor of Science degree in Medicine from the West Virginia School of Medicine, a Bachelor of Science degree in Biology and Chemistry from Davis and Elkins College; *and*

**WHEREAS**, Dr. Ralph Kendall served with honor as a Captain in the U.S. Army Medical Corps and U.S. Air Force Reserves; *and*

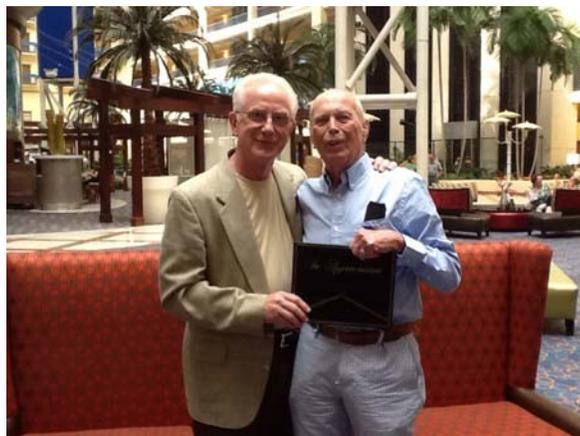
**WHEREAS**, Dr. Ralph Kendall has been a devoted husband to his beloved wife Virginia for over 59 years; *and*

**WHEREAS**, The respiratory care programs, faculty, students, graduates, and the public across the United States have benefited greatly from Dr. Ralph Kendall's immense dedication, hard work, knowledge, and expertise in ensuring high quality respiratory care education; *and*

**WHEREAS**, Dr. Ralph Kendall is a cherished friend, colleague, and mentor to a multitude of current and former CoARC Commissioners, Executive Office staff, and Site Visitors; *now, therefore be it*

**RESOLVED**, that the Board of Commissioners of the CoARC, convened at its 2013 Summer Meeting in Orlando, Florida, hereby expresses its most sincere appreciation to Dr. Ralph Kendall for his extraordinary past service to the CoARC, his colleagues, the respiratory care community, and to the public interest; *and be it further*

**RESOLVED**, that the Board of Commissioners of the CoARC expresses its utmost gratitude to Dr. Ralph Kendall and confers upon him, the status of Commissioner Emeritus with all the rights, privileges, and immunities accorded to such status.



## Roles and Functions of CoARC Commissioners

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. The role of the Commissioner is to support and advance respiratory care education by active participation in the work of the CoARC.
  - B. Commissioners are elected to the CoARC for an initial 4-year term and may be reelected for a second 4-year term.
  - C. Commissioners receive no compensation for their services related to the CoARC, other than reimbursement for travel and expenses.
  - D. Commissioners must agree in writing to abide by CoARC policies including those regarding confidentiality and conflict of interest. They shall not participate in consultative activities related to accreditation for any respiratory care program subject to CoARC accreditation, even if not for personal gain. Such activities shall not be conducted while serving as a commissioner or for 1 year thereafter.
  - E. The routine work of the CoARC Board occurs over three meeting periods yearly, the first in March (usually the first weekend), the second during the AARC Summer Forum (usually in mid-July), and the third in November (usually the first or second weekend). Part of a commissioner's fiduciary responsibility to the CoARC includes attending the meeting and participating actively in decision-making.
  - F. Typically the volume of the work of the CoARC requires that committees or task force meetings be held via web conferencing in the month preceding the CoARC Board meeting.
  - G. For each Board meeting, each Commissioner is responsible for reviewing an average of eight program files, which could include site visit reports, annual reports or progress reports. There is a standardized format for presenting a program file and the reviewer's typewritten comments are to be provided electronically to the Executive Office prior to the meeting.
  - H. In addition to the scheduled meetings of the CoARC, each commissioner is required to participate in at least one program site visit in a three (3) year period (with the exception of the Public Board member). New commissioners should participate in a mandatory site visit within the first twelve (12) months of the beginning of their commission term. This activity involves review of program materials prior to the 2-day visit. Site visitors typically plan for an additional day to accommodate travel. The site visitor usually arrives at the program late afternoon or early evening preceding the visit and leaves by mid to late afternoon the second day of the visit. Site visits are typically scheduled Monday & Tuesday, or Thursday & Friday.
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## Commissioners

**Ronald C. Allison, MD**  
American Thoracic Society



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## Commissioners (continued)

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**Diane Flatland, MS, RRT-NPS**  
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## Commissioners (continued)

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**Shane Keene, DHSc, RRT-NPS, CPFT, RPSGT**  
Association of Schools of Allied Health  
Professions



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**Bradley Leidich, MEd, RRT, FAARC**  
Therapist At Large



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## Commissioners (continued)

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American College of Chest Physicians



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**Michael Prewitt, PhD, RRT, FCCP**  
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## Commissioners (continued)

**Gary C. White, MEd, RRT, RPFT**  
American Association for Respiratory Care



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## Changing Program Information or Personnel?

<http://www.coarc.com/34.html>

Do you have a change in any of the following:

1. Change in President/CEO?
2. Change in Dean?
3. Change in Program Director?
4. Change in Director of Clinical Education?
5. Change in Medical Director/Co-Medical Director?
6. Change in Primary PSG Instructor?
7. Change in Billing Contact?
8. Change in Program Name?
9. Change in Program Address?

If so, the CoARC Website address listed above will provide you with the instructions and documentation you need to report these changes. For questions concerning program personnel changes and related documentation, please contact Shelley Christensen, Executive Office Administrative and Accreditation Services Assistant at (817) 283-2835 ext. 100 or email at [shelley@coarc.com](mailto:shelley@coarc.com).

## Free CoARC Webinars...

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

In an effort to develop and maintain an effective orientation, training, and professional development program for key program personnel, CoARC has established a free webinar training series

### Spotlight on a CoARC Committee:

In an effort to maintain sufficient financial, personnel, and other resources to carry out its operations effectively and efficiently, the CoARC established a Finance Committee. The Finance Committee is a fiduciary, and is responsible for directing and monitoring the investment management of the various fund assets on behalf of the CoARC with the following charges:

- The committee shall consist of a minimum of six (6) members of the Board that include the Treasurer (Chair), President-Elect, and four Commissioners. The Assistant Executive Director/Director of Finance and Operations will serve as the Executive Office staff liaison;
- The committee will provide financial oversight for the organization, including budgeting and financial planning, financial reporting, creating and monitoring of internal controls and accountability policies, and actively build and preserve the financial resources necessary to support the accomplishment of CoARC's mission;
- The committee will develop multi-year operating budgets that integrate strategic plan objectives and initiatives;
- The committee will present proposed budgets and all financial recommendations and policies to the Board for approval;
- The committee will monitor adherence to the annual operating budget;
- The committee will make recommendations to the Board regarding the hiring and evaluation of investment managers/advisors, as needed;
- The committee will review all proposals which require a long-term commitment of the organization's resources and make recommendations to the Board relevant to the adoption of such policies;
- The committee will develop and update (as necessary) policies that help ensure the assets of the organization are protected and manage exposure to risk;
- The committee will ensure policies and procedures for financial transactions are documented in the Accounting Manual, and the manual is reviewed annually, and updated as necessary;
- The committee will present financial reports to the Board at each Board meeting;
- The committee shall recruit and select the auditor;
- The committee shall review the draft audit and 990 as presented by the auditor and present the audit report to the Board;
- The committee shall review the management recommendation letter from the auditor and ensure follow-up on any issues mentioned.

### Programmatic Outcomes Data...

<http://www.coarc.com/47.html>

Check here for the latest information on programmatic outcomes based on the 2013 Annual Report of Current Status (RCS) as well as interactive maps of the data.

### Need a CoARC Form or Report?

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

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

## CoARC Presentations at the 2013 AARC Summer Forum

### H.F. Helmholtz Educational Lecture Series

Teaching Students How to Stay Up-to-date on Mechanical Ventilation Issues

[Susan P. Pilbeam, MEd, RRT, FAARC](#)

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

### CoARC Symposium: CoARC Educators Workshop: New Horizons in Respiratory Care Education

Advanced Practice Respiratory Therapist Update - [David Shelledy, PhD, RRT, FAARC](#)

Managing Your Clinical Sites - [Kathy J. Rye, EdD, RRT, FAARC](#)

Degree Ladders: Opportunities for Practitioners - [Pat Munzer, DHSc, RRT, FAARC](#)

Update on Revisions to the CoARC Standards for the Profession of Respiratory Care - [Allen N. Gustin, Jr., MD, FCCP](#)

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

## CoARC Presentations at the 2013 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.

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## 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 28 site visits over the past 6 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 Fourth Annual Dr. Ralph Kendall, MD Outstanding Site Visitor Award was presented to Monica Schibig, MA, RRT-NPS, CPFT. Ms. Schibig became a site visitor for CoARC in 2008 and has participated in 20 on-site reviews over the past 5 years. Ms. Schibig has been described as a joy to work with, that has a positive helpful attitude, and is very knowledgeable and clear about all aspects of the site visit process. Her dedication to the accreditation process has been seen in numerous ways by mentoring new site visitors, serving as a presenter on two Site Visitor Training Webinars, a member of the Site Visit Committee, an Appeal Panel, and as a Commissioner for CoARC. Ms. Schibig has been very helpful and flexible by serving on 6 site visit teams this past year and organized 5 of those visits by serving as the team captain. In May of this past year, she volunteered to serve as a team captain with only 3 weeks' notice so a new program would have the site visit completed prior to the July Board meeting deadline. This type of dedication and service to this valuable portion of the accreditation process should not go unnoticed. THANK YOU MONICA!

## Recognition of 2013 CoARC Site Visitors

The following individuals have graciously contributed to CoARC's mission by volunteering their time and expertise as site visitors in 2013. Members that served as team captains are designated by asterisks.

Curtis Aumiller, MS, MBA, RRT-NPS, RPFT\*  
 Thomas Baxter, EdD, 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\*  
 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  
 Paul Goldiner, MD  
 Christine Hamilton, DHSc, RRT, AE-C\*  
 Thomas Harding, MS, RRT, RCP\*  
 Thomas Hill, PhD, RRT, FAARC\*  
 Tom Jones, MEd, RRT

Shane Keene, DHSc, RRT-NPS, CPFT, RPSGT  
 Ralph Kendall, MD, FCCP\*  
 Paul LaMere, MEd, RRT\*  
 Brad Leidich, MEd, RRT, FAARC\*  
 Arthur Marshak, EdD, MS, RRT, RPFT  
 Andrew Mazzoli, PhD, RRT  
 Kenny McCowen, BS, RRT  
 Karen McDonald, MS, RRT-NPS  
 Marby McKinney, MEd, RRT-NPS  
 Ed Moser, MBA, RRT, RCP  
 Timothy Op't Holt, EdD, RRT, AE-C, FAARC\*  
 Leann Papp, EdS, RN, RRT, RCP\*  
 Michael Prewitt, PhD, RRT\*  
 Rose Rearley, MA, RRT, RPSGT  
 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 Yacovone, MEd, RRT  
 Beth Zickefoose, BS, RRT-NPS, RPFT

# THANK YOU!

## CoARC Executive Office Staff

**Thomas R. Smalling, PhD, RRT, RPFT, RPSGT, FAARC**

Executive Director (Extension 101)

E-mail: tom@coarc.com

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



**Phone: 817-283-2835**  
**Fax—Plain Paper: 817-354-8519**  
**Fax—Fax to E-mail: 817-510-1063**

**Shelley Christensen**

Executive Office Administrative and Accreditation Services Assistant (Extension 100)

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



**Lisa Collard, AS**

Director of Accreditation Services/  
Executive Administrative Assistant (Extension 106)

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



**Jana L. Anderson**

Assistant Executive Director/  
Director of Finance and Operations (Extension 103)

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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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