

2014 Report on Accreditation in Respiratory Care Education

Commission on Accreditation for Respiratory Care



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INTRODUCTION

It is my great pleasure to provide to you, on behalf of the Board and Executive Office Staff of the Commission on Accreditation for Respiratory Care (CoARC), the *2014 Report on Accreditation in Respiratory Care Education*. This is the fourth edition of this report which presents information on CoARC accredited programs and accreditation actions taken by the CoARC on an annual basis. The CoARC has developed this report to provide critical data in the following four areas:

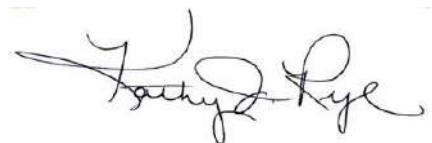
- Descriptive statistics of CoARC Programs as of December 31, 2014;
- Accreditation actions taken in 2014;
- Aggregate statistics of graduate, enrollment, and outcomes data from the 2014 Annual Reports of Current Status submitted on July 1, 2014; and
- Programmatic data related to the AARC 2015 and Beyond Project.

There were 16 accreditation site visits in 2014 involving 25 volunteers. The commitment level of these volunteers is remarkable and truly appreciated. The CoARC expresses its gratitude to each of them for sharing the time and talent essential to the critically important goal of ensuring the quality of all respiratory care programs.

The CoARC collected annual report data using the annual reporting tool developed and maintained by Liaison International. The Annual Report of Current Status (RCS) was completed by a total of 451 programs and program options in July 2014. We would like to acknowledge the considerable time and effort required to provide the important information encompassed by the RCS. The charts included in this report are derived from these data, and are designed to provide aggregate information on accredited respiratory care educational programs and their graduates to be used by the CoARC's communities of interest in their evaluations of the current state of the profession both locally and nationally.

Please feel free to share suggestions for improvements or changes by contacting our Executive Director, Tom Smalling, PhD, RRT, FAARC, at tom@coarc.com.

Thank you for your support,

A handwritten signature in black ink, appearing to read "Kathy J. Rye".

Kathy J. Rye, EdD, RRT, FAARC
President

EXECUTIVE SUMMARY

PROGRAMS BY PROGRAM TYPE

As of December 31, 2014, there were a total of 447 programs under accreditation review by the CoARC. These include 438 respiratory care programs (422 base and 16 domestic satellite campuses), and 9 sleep disorders specialist programs.

PROGRAMS BY DEGREE OFFERED

As of December 31, 2014, of these 438 total respiratory care programs, 85% confer the Associate degree and 14% confer the Baccalaureate degree. Three programs (<1% of total) confer the Master's degree. Compared to 2013, there was a 1.8% decrease in associate degree programs and a 7% increase in baccalaureate degree programs. The AS degree accounted for the largest (44.7%) of all degree types, a 23.4% decrease since 2011. The BS degree accounted for 13.7% of all degree types offered in 2014, an increase of 22.4% since 2011.

PROGRAMS BY INSTITUTIONAL TYPE

As of December 31, 2014, 56.4% of programs and satellites were offered at a community/junior college, which was a 2.0% decrease compared to 2013. 23.1% of programs were offered at a Four-Year College/University (a 5.2% increase compared to 2013); 16.0% of programs were offered at a Technical/Vocational School; 2.7% of programs were offered at an Academic HSC/Medical Center; 1.4% of programs were offered at a Career/Technical College; and 0.5% of programs were offered at a U.S. Military facility. Interestingly, 49 programs (11.1%) conferring the associate degree are offered at four-year colleges/universities.

PROGRAMS BY INSTITUTIONAL CONTROL/FUNDING

As of December 31, 2014, 79.5% sponsors were operating under a Public/Not-For-Profit status. Fifty-five (12.6%) sponsors were operating under a Private/For-Profit (Proprietary) status. Thirty-three (7.5%) sponsors were operating under a Private/Not-For-Profit status. Two (0.5%) sponsors were controlled and funded by the Federal Government. In addition, 68.3% of programs in 2014 conferring the associate degree are sponsored by Public/Not-For-Profit institutions. There were no significant differences in the distribution of programs by institutional type and control/funding between 2013 and 2014.

PROGRAMS BY GEOGRAPHIC REGION

As of December 31, 2014, sixty-two (14.2%) were located in the Northeast, one hundred nine (24.9%) in the Midwest, one hundred eighty-seven (42.7%) in the South and eighty (18.3%) in the West. As you can see a large number (44% percent of all Baccalaureate programs and 36% of all Associate degree programs) of programs are located in the South. The three Master's degree programs are located in the Midwest and South. There were no significant changes over the past three years.

PROGRAMS BY STATE AND D.C.

There are CoARC-accredited respiratory care programs in every state except Alaska. The state with the largest number of programs and satellites remains California with 38. States/locations with only one program include Wyoming, Vermont, New Hampshire, Hawaii, and the District of Columbia. As of December 31, 2014, the associate degree is offered in 48 states and the District of Columbia (North Dakota and Alaska

are the exception). The associate degree is the only degree offered in DC and 22 states. The baccalaureate degree is offered in 28 states. The master's degree is offered in Illinois, Georgia, and North Dakota.

DEGREE EARNED BY KEY PERSONNEL

A majority (52.5%) of PDs have earned a master's degree, with 34% having a baccalaureate and 13% having a doctorate. The BS, MS and PhD were the most commonly earned degrees for both PD and DCEs. For DCEs, a majority have the baccalaureate degree (50.2%), with the master's degree at 40.9%. Only 5% of DCEs have their Doctoral degree which was significantly lower than for program directors.

ACCREDITATION DECISIONS

There were a total of 116 accreditation actions taken by the Board and 57 accreditation actions processed by the Executive Office. In 2014, there were a total of 16 site visits, listed below.

Changes in Program Information and Personnel

Of the 46 permanent changes in PD in 2014, 12 reported changes due to retirement, 13 due to resignation, 9 due to re-assignment, and 8 due to other reasons. Four did not indicate a reason.

2014 ANNUAL REPORT OF CURRENT STATUS (RCS)

A total of 451 annual reports (426 base respiratory care programs, 18 satellite program options, and 7 sleep specialist program options) (again, different number than total number of programs) were used to generate the aggregate data (January 1, 2011 through December 31, 2013) from the 2014 RCS reports.

Total Program Applications

Total applications to accredited programs were 20,405 for 2013. Applications reached a peak of 23,430 in 2011, and decreased by 12.9% between 2011 and 2013. The mean number of applications per program was 46 in 2013.

RC Applications by Degree Offered

Compared to 2012, applications decreased by 12.5% for associate degree programs, by 11.3% for baccalaureate programs, and by 10.8% for masters programs.

RC Applications by Institutional Type

Compared to 2012, applications decreased by 12.8% for community/junior colleges, by 7.7% for four-year colleges/universities, by 14.1% for technical/vocational schools, by 20.6% for academic HSC/medical centers, and by 38.0% for career/technical colleges. There was a 23.1% increase for U.S. military programs.

RC Applications by Institutional Control/Funding

Compared to 2012, applications decreased by 13.8% in the public/not-for-profit sector and by 33.7% in the private/not-for-profit sector. Applications increased by 2.7% in the private/for-profit (proprietary) sector and by 23.1% for federal government (military) programs.

Applications by State (including D.C.) and Degree

California continues to have the largest (16.1% of total in 2013) number of applications.

Total New Enrollments

For 2013, there were 9,297 new students enrolled - 68.0% of capacity. The mean maximum annual enrollment capacity per program was 31 and the mean number of new enrollments per program was 21. There was a 5.3% decrease in new enrollments compared to 2012.

New RC Enrollments by Degree Offered

Compared to 2012, the number of new enrollments in 2013 decreased by 6.8% for associate degree programs. The number of new enrollments increased by 7.9% for baccalaureate programs, and by 14.8% for master's programs.

New RC Enrollments by Institutional Type

Compared to 2012, new enrollments in 2013 decreased 4.3% for community/junior colleges, by 19.4% for career/technical colleges, by 17.9% for academic HSC/medical centers, and by 16.5% for technical/vocational schools. New enrollments increased by 4.2% for four-year colleges/universities and by 5.3% for U.S. military programs.

New RC Enrollments by Institutional Control/Funding

Compared to 2012, new enrollments in 2013 decreased by 2.0% in the public/not-for-profit sector, and by 42.1% in the private/not-for-profit sector. New enrollments increased by 0.53% in the private/for-profit (proprietary) sector, and by 5.3% in the federal government sector.

New RC Enrollments by State (including D.C.) and Degree

California had the largest (23.1% of total) enrollments in 2013.

Total Graduates

There were 7,820 graduates in 2013. This is a 3.8% decrease in total graduates compared to 2012. This was the first decrease in total graduates observed over the past 5 years. The mean number of graduates per program was 18.

RC Graduates by Degree Offered

Compared to 2012, the number of graduates in 2013 decreased by 3.7% for associate degree programs and by 5.0% for baccalaureate programs.

RC Graduates by Institutional Type

Compared to 2012, the number of graduates in 2013 decreased by 4.8% in community/junior colleges, by 12.8% in technical/vocational schools, by 11.8% in academic HSC/medical centers, and by 23.8% in career/technical colleges. The number of graduates in 2013 increased by 10.4% in four-year colleges/universities and by 34.4% in U.S. military programs.

RC Graduates by Institutional Control/Funding

Compared to 2012, the number of graduates decreased by 4.0% in the public/not-for-profit sector, and by 37.5% in the private/not-for-profit sector. The number of graduates increased by 9.6% in the private/for-profit (proprietary) sector, and by 34.4% in the federal government sector.

RC Graduates by State (including D.C.) and Degree

California graduated the largest number of graduates (17.8% of total) in 2013.

Programmatic Attrition

For the 2014 RCS, the mean attrition rate was 19.1%. A total of 12 programs (2.8% of total) reported attrition rates above the CoARC-established threshold of 40%. When compared to the 2013, the 2014 RCS data shows no change in the mean attrition rate.

Attrition by Degree Offered, Institutional Type, and Institutional Control/Funding

For the 2014 RCS, associate degree programs had the highest mean attrition rate (20.1%) and master's degree programs had the lowest mean attrition rate (8.3%). Programs located in Academic HSC/Medical Centers continued to demonstrate the highest mean of 23.4%. Programs located Four-Year Colleges or Universities had the lowest mean of 14.6%. Programs controlled/funded by the federal government sector had the highest mean attrition at 22.8% for the 2014 RCS, while private/not-for-profit institutions had the lowest mean at 14.4%.

Positive (Job) Placement

The mean placement rate decreased to 84.6% with the highest rate of 100% (n = 36) and the lowest rate of 20.0% (n=1). A total of 39 programs (9.2% of total) reported placement rates below the CoARC-established threshold of 70%. When compared to the 2013 RCS data on placement rates, the 2014 RCS data shows a 0.7% decrease in the mean placement rate.

Placement by Degree Offered, Institutional Type, and Institutional Control/Funding

Baccalaureate degree and Associate degree programs showed decreases in mean placement rates when compared to 2013. Baccalaureate degree programs had a higher mean (91.7%) than Associate degree programs (83.5%). U.S. Military programs (controlled/funded by the federal government) had the highest overall mean (94.8%) while Technical or Vocational School programs continued to demonstrate the lowest mean (78.5%). Programs controlled/funded by private/for-profit (proprietary) institutions continued to demonstrate the lowest mean (75.1%).

CRT Credentialing Success

The mean CRT credentialing success was 92.4% with the highest at 100% (n=109) and the lowest at 42.6% (n=1). A total of 39 programs (9.2% of total) reported success rates below the CoARC established threshold of 80%. When compared to the 2013 RCS data, the 2014 RCS data shows a 0.6% increase in the mean CRT credentialing success rate.

CRT Credentialing Success by Degree Offered, Institutional Type, and Institutional Control/Funding

Baccalaureate degree programs' CRT success was higher (96.3%) than that of associate degree programs (91.8%). By institutional type, Academic HSC/Medical Center programs continued to demonstrate the highest mean at 98.6%. By funding criteria, U.S. Military programs (controlled/funded by the Federal Government) continued to demonstrate the lowest mean at 82.6%. All categories, with the exception of Four-Year Colleges or Universities, showed slight increases in mean CRT credentialing success when compared to the 2013 RCS. Programs controlled/funded by Public/Not-For-Profit institutions continued to demonstrate the highest mean at 93.4%.

RRT Credentialing Success

The mean RRT credentialing success was 67.9% with the highest at 100% (n=19) and the lowest at 0% (n=1). The 2014 RCS data shows a considerable increase (4.5%) in the mean. The number of programs reporting the highest RRT credentialing success rate (100%) increased to 19 for the 2014 RCS compared to 2013 RCS data.

RRT Credentialing Success by Degree Offered, Institutional Type, and Institutional Control/Funding

Baccalaureate programs had a higher mean (82.3%) than associate programs (65.5%). Both categories had an increased mean compared to 2013. By institutional type, Academic HSC/Medical Center programs continued to demonstrate the highest mean at 91.0%, while programs at U.S. Military facilities continued to demonstrate the lowest mean at 32.1%. By funding criteria the public/not-for-profit sector continued to demonstrate the highest mean (69.9%) and the federal government sector continued to demonstrate the lowest mean (32.1%). Increases in mean RRT credentialing success occurred for RC programs in all categories when compared to 2013 RCS data.

PROGRAMMATIC DATA RELATED TO THE AARC 2015 AND BEYOND PROJECT

As of 12/31/2014, 64 sponsors offer an entry into practice baccalaureate or graduate degree (Category I). An additional eighty-six sponsors are currently qualified to offer both the entry into practice associate degree and the baccalaureate degree or to transition their associate degree to a baccalaureate degree (Category II). Further, 86 sponsors under legislation passed by the various states in which they reside, may choose to have the capability of offering both the entry associate degree and entry baccalaureate degree or transitioning their associate degree to a baccalaureate degree (Category III). The remaining 202 sponsors that do not have the authority to award a baccalaureate degree may be capable of articulating with, or participating in a consortial partnership with, a 4-year degree-granting institution (Category IV).

Baccalaureate Degree Eligibility – Enrollment Capacity and Graduation Rates

As of December 31, 2014, 64 programs in Category I produced 790 graduates (53.5% of maximum enrollment capacity). The 86 programs in Category II produced 1,954 graduates (59.1% of maximum enrollment capacity). Given the graduation rates for the past two years, the number of baccalaureate degree graduates has the potential to increase by approximately 247% (or to about 2,700 graduates per year) if all sponsors in Category II were to convert their associate degree program to a baccalaureate degree program. The 86 programs in Category III produced 1,272 graduates (58.3% of maximum enrollment capacity). The 202 programs in Category IV produced 3,691 graduates (57.0% of maximum enrollment capacity). Twenty-eight states contain programs that fall under Category I. Thirty-two states contain programs that fall under Category II. Twelve states, including the District of Columbia, do not contain a program in either Category I or II. Eleven states, including the District of Columbia, contain programs that only fall under Category IV. One state (Hawaii) is comprised of only a Category III program.

MISSION AND SCOPE

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. The CoARC accredits entry into respiratory care professional practice 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

Accreditation provides consumer protection, advances and enhances the profession of Respiratory Care, and protects against compromise of educational quality. Accreditation also supports the continuous improvement of these educational programs by mandating continuing reassessment of resources, educational processes, and outcomes. The CoARC is responsible for evaluating respiratory care educational programs and publicly recognizing those which meet agreed-upon standards of quality, i.e., the *2010 Accreditation Standards for the Profession of Respiratory Care* (the "Standards"). The CoARC only accredits degree-granting, post-secondary programs throughout the U.S. that prepare graduates for entry into practice as respiratory therapists. Respiratory therapists are members of a team of health care professionals working in a wide variety of clinical settings to evaluate, treat, and manage patients of all ages with respiratory illnesses and other cardiopulmonary disorders.

HISTORICAL BACKGROUND

The Medical Society of the State of New York formed a Special Joint Committee in Inhalation Therapy on May 11, 1954. One of its purposes was "... to establish the essentials of acceptable schools of inhalation therapy (not to include administration of anesthetic agents) ..." In June 1956, the House of Delegates of the American Medical Association (AMA) adopted its Resolution No. 12, introduced by the Medical Society of the State of New York. The delegates "Resolved, that the Council on Medical Education and Hospitals is hereby requested to endorse such or similar 'Essentials' and to stimulate the creation of schools of inhalation therapy in various parts of these United States of America." A report entitled, "Essentials for an Approved School of Inhalation Therapy Technicians," was adopted by sponsor participants (American Association for Inhalation Therapy [AAIT], American College of Chest Physicians [ACCP], American Medical Association [AMA], and American Society of Anesthesiologists [ASA]) at an exploratory conference in October 1957. The AMA's House of Delegates granted formal approval in December 1962. The first official meeting of the Board of Schools of Inhalation Therapy Technicians was held at AMA's Chicago headquarters on October 8, 1963.

The Joint Review Committee for Respiratory Therapy Education (JRCRTE), the successor group to the Board of Schools came into being on January 15, 1970 as a recommending body to the Committee on Allied Health Education and Accreditation (CAHEA) of the AMA. The JRCRTE was dissolved in 1996 and the Committee on Accreditation for Respiratory Care became its successor organization, as a recommending body to the newly formed Commission on Accreditation for Allied Health Education Programs (CAAHEP). In 2008, the Committee on Accreditation for Respiratory Care began the process of becoming an independent accrediting body: the Commission on Accreditation for Respiratory Care (CoARC). The CoARC became a freestanding accreditor of respiratory care programs on November 12, 2009 and in September 2012, the Council for Higher Education Accreditation (CHEA) granted recognition to the CoARC.

Since 1986, the CoARC has used an outcomes-centered approach to its accreditation review process. This approach focuses on a specific set of outcomes which currently include the following: a) Graduate performance on national credentialing examinations; b) Programmatic attrition; c) Graduate and employer satisfaction with program; d) Job placement; and e) On-time graduation rate. The CoARC routinely monitors the program's outcomes results in relation to the thresholds via an Annual Report of Current Status (RCS). Any program not meeting all the thresholds must document in the RCS a detailed analysis of each deficiency and provide a specific action plan to address that deficiency.

PROGRAMS BY PROGRAM TYPE

The CoARC accredits Entry into Respiratory Care Professional Practice degree programs¹ and program options² 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. Programs are categorized into three categories and are assigned a unique 6-digit number based on the category to which they are assigned:

1. **(200-level):** Programs that prepare graduates with demonstrated competence in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains of respiratory care practice as performed by Registered Respiratory Therapists (RRTs). 200-level program graduates have the opportunity to earn both the National Board for Respiratory Care (NBRC) Certified Respiratory Therapist (CRT) credential and RRT credential. The CRT credential is a prerequisite for admission to the Registry Examination.
2. **(300-level):** Programs at 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). Satellite location(s) function under the direction of the Key Personnel of the base program.
3. **(400-level):** Programs that prepare sleep disorder specialists with demonstrated competence in the cognitive (knowledge), psychomotor (skills), and affective (behavior) learning domains of polysomnography practice as performed by sleep disorder specialists (SDS). 400-level program graduates have the opportunity to earn both the NBRC SDS credential and Board of Registered Polysomnographic Technologists (BRPT) Registered Polysomnographic Technologist (RPSGT) credential.

As of December 31, 2014, there were a total of 447 programs and program options under accreditation review by the CoARC. Most of these programs (445) are sponsored by public and private higher education institutions. Two programs are sponsored federally: one by the U.S. Army and one by the Air Force. In addition to this report, there are two internet links; one for RC programs and one for sleep specialist program options: For RC programs: <http://www.maptive.com/ver3/RC2014CoARCRCSData>. For sleep specialist program options: <http://www.maptive.com/ver3/PSGCoARC2014RCSData>.

Of the 447 programs, 3 RC programs and 2 SSPO program options received an Approval of Intent (approval of their applications to start developing an accredited program). A total of 25 programs held Provisional Accreditation which is the term used by the CoARC to signify that a program, through a multi-step process, has demonstrated sufficient compliance with the Standards to initiate a program and admit students. As mentioned previously, the CoARC also accredits sleep disorders specialist programs as add-on program options to accredited respiratory care programs. There were 7 such accredited program options. There were also a total of 16 domestic satellite campuses. **Table 1** (below) provides a breakdown of program numbers by CoARC level.

¹ An *Entry into Respiratory Care Professional Practice Degree Program* is an educational program designed to provide students who possess no prior competence in respiratory care, with the knowledge and clinical skills required to function competently as a registry-eligible respiratory therapist [see CoARC Policy 12.02.]

² Additional offerings by a base program include Sleep Specialist, additional Entry into Respiratory Care Professional Practice degree track, and Satellite- each of which is assigned a separate CoARC program number.

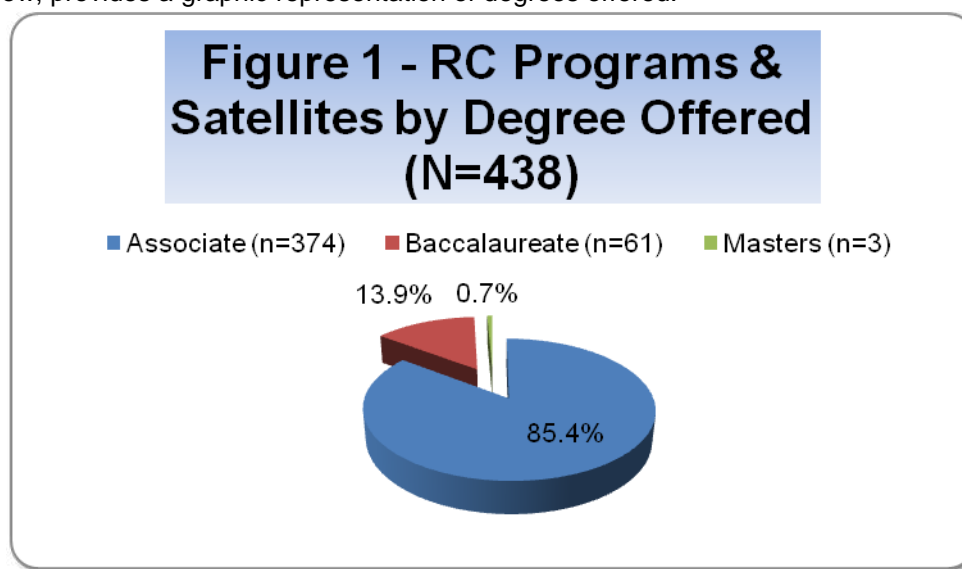
Table 1 – Program Numbers by CoARC Level as of December 31, 2014 (N=447)

	200-level	300-level	400-level
Continuing Accreditation	330	16	5
Initial Accreditation	49	0	2
Probationary Accreditation	13	0	0
Provisional Accreditation	25	0	0
Inactive Accreditation	2	0	0
Approval of Intent	3	0	2
Letter of Intent	0	0	0

PROGRAMS BY DEGREE OFFERED

Programs accredited by the CoARC are located in institutions which are accredited by a regional or national accrediting agency that is recognized by the U.S. Department of Education (USDE) and authorized under applicable law or other acceptable authority to award graduates of the program an associate or higher degree at the completion of the program (*CoARC Standard 1.01*). Note: The CoARC currently does not accredit or track data for *degree advancement programs*. A *degree advancement program* is an educational program designed to meet the needs of the practicing respiratory therapist with an earned Entry into Respiratory Care Professional Practice degree who, having already completed an accredited respiratory care program is returning to school to obtain a higher degree (e.g., ASRT to BSRT or BSRT to MSRT).

Figure 1, below, provides a graphic representation of degrees offered.



As of December 31, 2014, there were a total of 438 respiratory care programs and satellites that hold a CoARC accreditation status (including the 3 respiratory care programs with an Approval of Intent). Of these, 374 (85% of total) confer the Associate degree upon graduation and 61 (14% of total) programs confer the Baccalaureate degree. Three programs (<1% of total) confer the Master's degree (Rush University, Georgia State University, and St Alexius Medical Center/University of Mary). Compared to data from the 2013 Report on Accreditation, there was a 1.8% decrease in the number of associate degree programs offered and a 7% increase in the number of baccalaureate degree programs offered. Seven institutions offer a certificate upon completion of the sleep specialist program option (Stony Brook University, Valencia College, Texas State University-San Marcos, Youngstown State University, Gannon University, James A. Rhodes State College, and Southern Crescent Technical College).

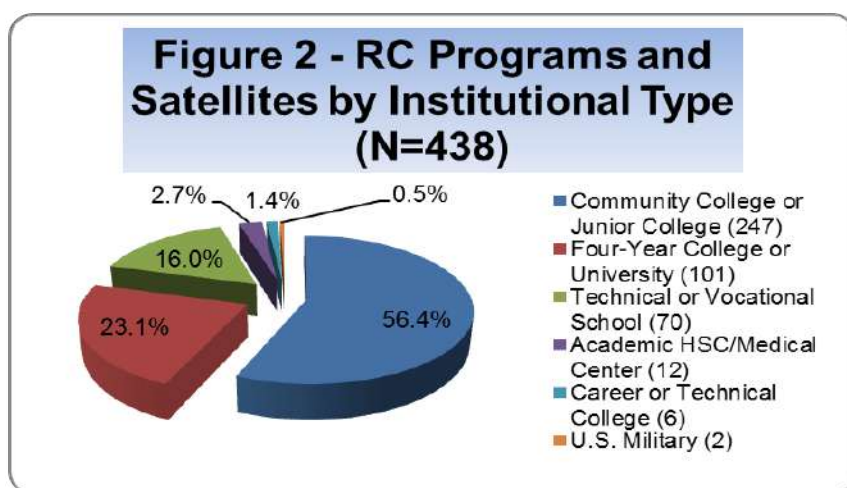
The CoARC further categorizes programs into 7 degree types/combinations. **Table 2** provides a breakdown of program numbers by degree and accreditation status. The Associate of Science (AS) degree accounted for the largest (44.7%) of all degree types offered in 2014. This is an 8.8% decrease compared to 2013 and a 23.4% decrease since 2011. The Associate of Applied Science (AAS) degree accounted for 39.7% of all degree types offered in 2014, an increase of 41.5% compared to 2011. The increase in AAS degrees between 2011 and 2014 may be related to the increase in state-mandated limits on the number of credit hours for associate degree programs. The Bachelor of Science (BS) degree accounted for 13.7% of all degree types offered in 2014, an increase of 22.4% compared to 2011. The one new BAS program was a conversion of an AAS program. **Note: In the 2013 and 2014 reports, the programs that offered more than one degree type (i.e., Associate and Baccalaureate or Baccalaureate and Masters) were separated and each degree offered was assigned a different CoARC number, so the data no longer reports combined degrees.*

Table 2 – RC Programs and Satellites by Degree for 2011 through 2014

	as of 12/31/11 (N=444)	as of 12/31/12 (N=437)	as of 12/31/13 (N=441)	as of 12/31/14 (N=438)
Associate of Science (AS)	256	239	215	196
Associate of Applied Science (AAS)	123	138	161	174
Associate of Specialized Technology (AST)	3	3	3	2
Associate of Occupational Studies (AOS)	2	2	2	2
Bachelor of Science/Masters of Science (BS/MS)	2	3	N/A*	N/A*
Bachelor of Science (BS)	49	49	57	60
Bachelor of Applied Science (BAS)	0	0	0	1
Associate of Science/ Bachelor of Science (AS/BS)	4	3	N/A*	N/A*
Associate of Applied Science/ Bachelor of Science (AAS/BS)	5	0	N/A*	N/A*
Master of Science (MS)	N/A*	N/A*	3	3

PROGRAMS BY INSTITUTIONAL TYPE

The CoARC assigns programs to one of six categories that define the type of institution sponsoring the respiratory care program. These categories are: (1) Academic HSC/Medical Center; (2) Career or Technical College; (3) Community College or Junior College; (4) Four-Year College or University; (5) Technical or Vocational School, and (6) U.S. Military. As of December 31, 2014, there were 247 respiratory care programs and satellites offered at a community or junior college. Although the category was the largest (56.4%) of all the categories, this is a 2.0% decrease compared to 2013 data. One-hundred one (23.1%) programs were offered at a Four-Year College or University, which is a 5.2% increase compared to 2013 data. Seventy (16.0%) programs were offered at a Technical or Vocational School. Twelve (2.7%) programs were offered at an Academic Health Sciences Center/Medical Center. Six (1.4%) programs were offered at a Career/Technical College. The two programs offered at a U.S. Military facility accounted for 0.5%. **Figure 2** illustrates these categories and results.



Four of the nine sleep disorders specialist add-on program options were offered at a Four-Year College or University. The remaining five sleep disorders specialist add-on program options were offered at a Community or Junior College.

Table 3 provides a comparison of programs by institutional type and degree. The majority (56%) of programs in 2014 conferring the associate degree are offered at community or junior colleges. Interestingly, 49 programs (11.1%) conferring the associate degree were offered at four-year colleges or universities in 2014.

Table 3 – RC Programs and Satellites by Institutional Type and Degree for 2013 and 2014						
	Associate		Baccalaureate		Masters	
	as of 12/31/14 (N=438)	as of 12/31/13 (N=441)	as of 12/31/14 (N=438)	as of 12/31/13 (N=441)	as of 12/31/14 (N=438)	as of 12/31/13 (N=441)
Community of Junior College	246	252	1	0	0	0
Technical or Vocational School	70	72	0	0	0	0
Four-Year College or University	49	47	50	47	2	2
Career or Technical College	6	7	0	0	0	0
Academic HSC/Medical Center	1	1	10	10	1	1
U.S. Military	2	2	0	0	0	0

PROGRAMS BY INSTITUTIONAL CONTROL/FUNDING

The CoARC assigns programs to one of four categories based on how an institution is operated: by publicly elected/appointed officials, with its major source of funds from public sources (Public/Not-For-Profit); by privately elected or appointed officials, with its major source of funds from private sources (Private/Not-For-Profit or Private/For Profit); or by a branch of the Armed Forces, with its major source of funds from federal appropriations (Federal Government). As of December 31, 2014, 348 (79.5%) institutions sponsoring a respiratory care program were operating under a Public/Not-For-Profit status. Fifty-five (12.6%) institutions were operating under a Private/For-Profit (Proprietary) status. Thirty-three (7.5%) institutions were operating under a Private/Not-For-Profit status. Two (<0.5%) of institutions were controlled and funded by the Federal Government. Compared to data from the 2013 Report on Accreditation, there were no significant differences. **Figure 3** illustrates these categories and results.

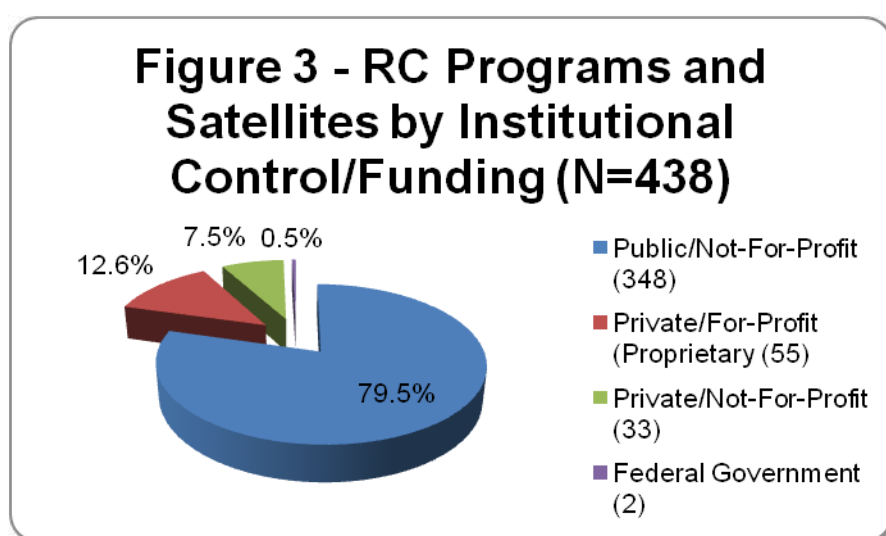


Table 4 provides a comparison of programs by institutional control and degree offered. The majority (68.3%) of programs in 2014 conferring the associate degree are sponsored by Public/Not-For-Profit institutions. There were no significant differences in the distribution of programs by degree offered and institutional type between 2013 and 2014, other than the notable difference mentioned in Figure 3 above.

Table 4 – RC Programs and Satellites by Institutional Control and Degree for 2013 and 2014						
	Associate		Baccalaureate		Masters	
	as of 12/31/14 (N=438)	as of 12/31/13 (N=441)	as of 12/31/14 (N=438)	as of 12/31/13 (N=441)	as of 12/31/14 (N=438)	as of 12/31/13 (N=441)
Public-Not-For-Profit	299	302	48	44	1	1
Private/For-Profit (Proprietary)	55	55	0	0	0	0
Private-Not-For-Profit	18	22	13	13	2	2
Federal Government	2	2	0	0	0	0

PROGRAMS BY GEOGRAPHIC REGION

Figure 4a illustrates the number of programs and satellites by region* between 2012 and 2014. As of December 31, 2014, sixty-two (14.2%) are located in the Northeast. One hundred nine (24.9%) are located in the Midwest. One hundred eighty-seven (42.7%) are located in the South. Eighty (18.3%) are located in the West. There were no significant differences during the past three years.

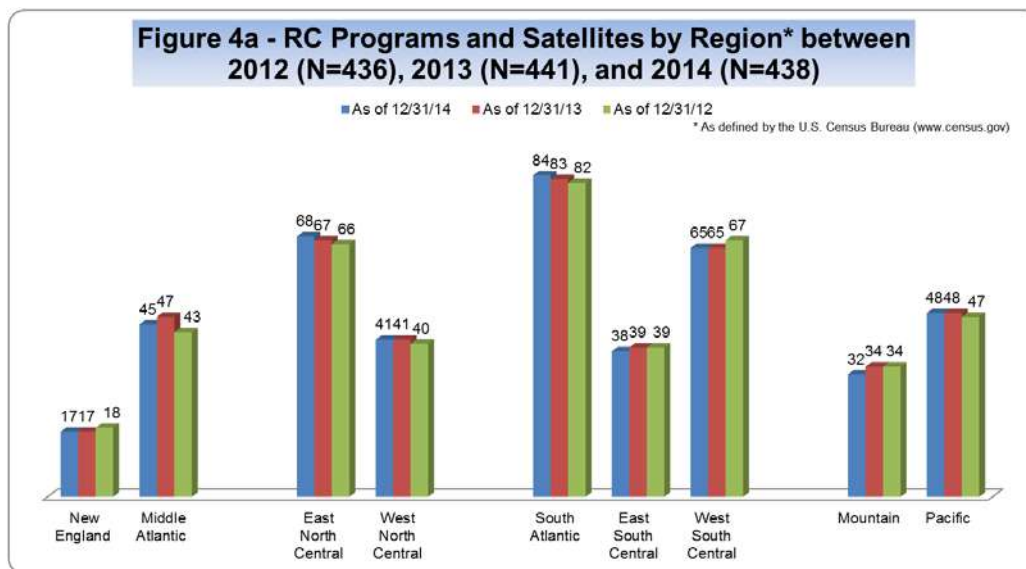
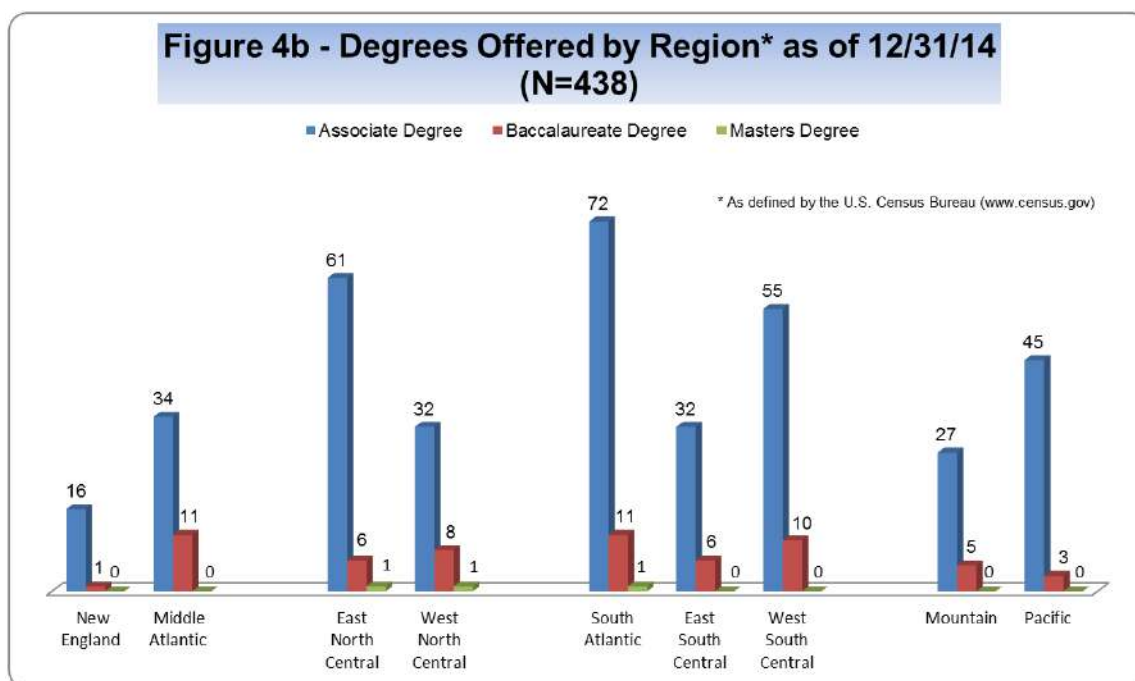


Figure 4b illustrates the degrees offered by region* for 2014. As of December 31, 2014, 44% percent of all Baccalaureate programs and 36% of all Associate degree programs are located in the South. The three Master's degree programs are located in the Midwest and South.



PROGRAMS BY STATE AND D.C.

Figure 5 provides a breakdown, from largest to smallest, of the number of respiratory care programs and satellites in each state and the District of Columbia. CoARC-accredited respiratory care programs are located in every state except Alaska. The state with the largest number of programs and satellites remains California with 38. States/locations with only one program include Wyoming, Vermont, New Hampshire, Hawaii, and the District of Columbia. Compared to data from 2013, Pennsylvania, Kentucky, New York, West Virginia, and Maryland each lost one program. Arizona lost two programs. Illinois and Virginia gained one program. Florida gained two programs.

Figure 5 - Respiratory Care Programs and Satellites by State and D.C. as of 12/31/14 (N=438)

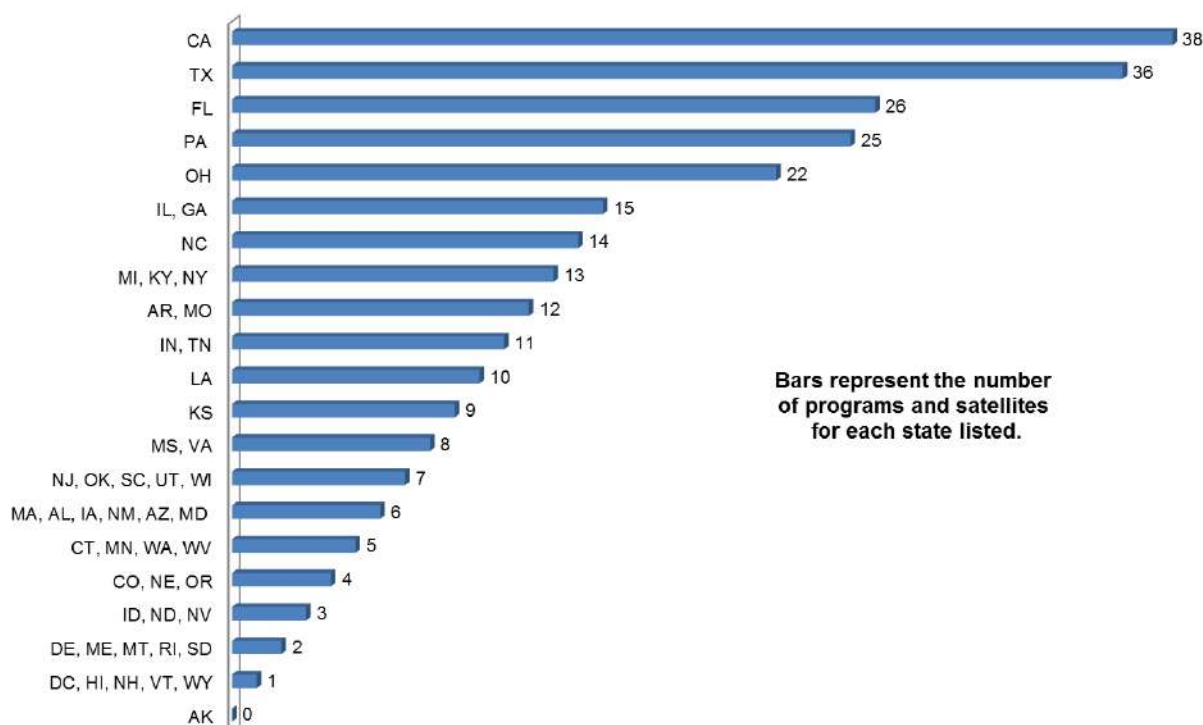


Table 5 (next two pages) provides a comparison of programs by state (including District of Columbia) and degree. As of December 31, 2014, the associate degree is offered in 48 states and the District of Columbia (North Dakota and Alaska are the exceptions). In 22 states and DC, the associate degree is the only degree offered. The baccalaureate degree is offered in 28 states. The master's degree is offered in 3 states (Illinois, Georgia, and North Dakota).

Not included in **Figure 5** and **Table 5** are the 9 sleep disorders specialist program options which are located in New York, Florida, Texas, Pennsylvania, Ohio, New Mexico, and Georgia.

Table 5 – RC Programs and Satellites by State (including D.C) and Degree (N=448) as of 12/31/14

	Associate	Baccalaureate	Masters
Alabama (n=6)	4	2	0
Alaska (n=0)	0	0	0
Arkansas (n=12)	9	3	0
Arizona (n=6)	6	0	0
California (n=38)	37	1	0
Colorado (n=4)	4	0	0
Connecticut (n=5)	4	1	0
District of Columbia (n=1)	1	0	0
Delaware (n=2)	2	0	0
Florida (n=26)	24	2	0
Georgia (n=15)	11	3	1
Hawaii (n=1)	1	0	0
Iowa (n=6)	6	0	0
Idaho (n=3)	2	1	0
Illinois (n=15)	13	1	1
Indiana (n=11)	10	1	0
Kansas (n=9)	8	1	0
Kentucky (n=13)	12	1	0
Louisiana (n=10)	8	2	0
Massachusetts (n=6)	6	0	0
Maryland (n=6)	5	1	0
Maine (n=2)	2	0	0
Michigan (n=13)	13	0	0
Minnesota (n=5)	3	2	0
Missouri (n=12)	10	2	0
Mississippi (n=8)	8	0	0
Montana (n=2)	2	0	0
North Carolina (n=14)	14	0	0
North Dakota (n=3)	0	2	1
Nebraska (n=4)	3	1	0
New Hampshire (n=1)	1	0	0
New Jersey (n=7)	5	2	0
New Mexico (n=6)	6	0	0
Nevada (n=3)	3	0	0
New York (n=13)	10	3	0
Ohio (n=22)	18	4	0
Oklahoma (n=7)	7	0	0
Oregon (n=4)	3	1	0
Pennsylvania (n=25)	19	6	0
Rhode Island (n=2)	2	0	0

	Associate	Baccalaureate	Masters
South Carolina (n=7)	7	0	0
South Dakota (n=2)	2	0	0
Tennessee (n=11)	8	3	0
Texas (n=36)	31	5	0
Utah (n=7)	3	4	0
Virginia (n=8)	5	3	0
Vermont (n=1)	1	0	0
Washington (n=5)	4	1	0
Wisconsin (n=7)	7	0	0
West Virginia (n=5)	3	2	0
Wyoming (n=1)	1	0	0

DEGREE EARNED BY KEY PERSONNEL

Figure 6 shows the highest degree earned by program directors of accredited respiratory care programs and satellites as of December 31, 2014. Since 2000, the CoARC has required a minimum of a baccalaureate degree for both the Program Director (PD) and Director of Clinical Education (DCE). At that time, PDs and DCEs who did not have baccalaureate degree were grandfathered in. As of December 31, 2014, only one of these individuals continues as a PD. Interestingly, the most common highest degree earned by PDs is not a baccalaureate (34.0% of total), but the master's degree (52.5%). Doctoral degrees ranked third most common with 13.0%.

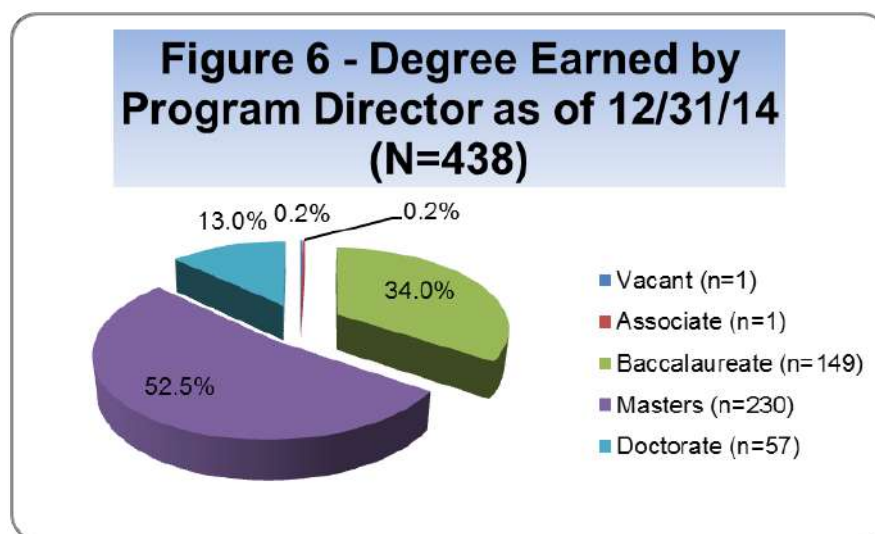


Table 6 shows the highest degree earned by program directors of accredited respiratory care programs and satellites as of December 31, 2014. The Baccalaureate of Science (BS), Master of Science (MS) and Doctor of Philosophy (PhD) were the most commonly earned degrees for each degree category.

Table 6 – Degree Earned by Program Director as of 12/31/14 (n=437)

	as of 12/31/14 (n=437)
Associate of Applied Science (AAS)	1
Bachelor of Science (BS)	95
Bachelor of Arts (BA)	26
Bachelor of Science in Respiratory Care/Therapy (BSRT/BSRC)	10
Bachelor of Science in Education (BSEd)	5
Bachelor of Applied Science (BAS)	3
Bachelor of Applied Technology (BAT)	2
Bachelor of Science in Health Administration (BSHA)	2
Bachelor of General Studies (BGS)	1
Bachelor of Health Sciences (BHS)	1
Bachelor of Independent Studies (BIS)	1
Bachelor of Business Administration (BBA)	1
Bachelor of Science in Health Management (BSHM)	1
Bachelor of Science in Health Sciences (BSHS)	1
Master of Science (MS)	63
Master of Education (Med/EdM)	53
Master of Business Administration (MBA)	26
Master of Arts (MA)	25
Master of Arts in Education (MAE)	10
Master of Science in Education (MSEd)	8
Master of Public Administration (MPA)	7
Master of Public Health (MPH)	6
Master of Science in Administration (MSA)	5
Master of Health Administration (MHA)	5
Master of Health Science (MHS)	5
Master of Management (MM)	3
Master of Science in Nursing (MSN)	2
Master of Professional Studies (MPS)	2
Master of Selected Studies (MSS)	2
Master of Arts in Teaching (MAT)	1
Master of Advanced Study (MAS)	1
Master of Science in Health Professions (MSHP)	1
Master of Training and Development (MTD)	1
Master of Rehabilitation Counseling (MRC)	1
Master of Human Resource Management (MHRM)	1
Master of Library Science (MLS)	1
Master of Higher Education (MHEd)	1

Doctor of Philosophy (PhD)	29
Doctor of Education (EdD)	12
Doctor of Health Science (DHSc)	4
Juris Doctor (JD)	3
Doctor of Public Health (DrPH)	3
Education Specialist (EdS)	2
Doctor of Management (DM)	1
Doctor of Oriental Medicine (DOM)	1
Doctor of Physical Therapy (DPT)	1
Doctor of Medicine (MD)	1

Figure 7 shows the highest degree earned by Directors of Clinical Education of accredited respiratory care programs and satellites as of December 31, 2014. The most common highest degree earned is a baccalaureate degree (50.2% of total), with the master's degree at 40.9%. Doctoral degrees totaled 5.0%, which was significantly lower than by program directors. Of the 8 DCEs with associate degrees, three hold a temporary position (which does not require the individual to meet all qualifications for the position) and five were grandfathered in – i.e. have held their positions since 2000.

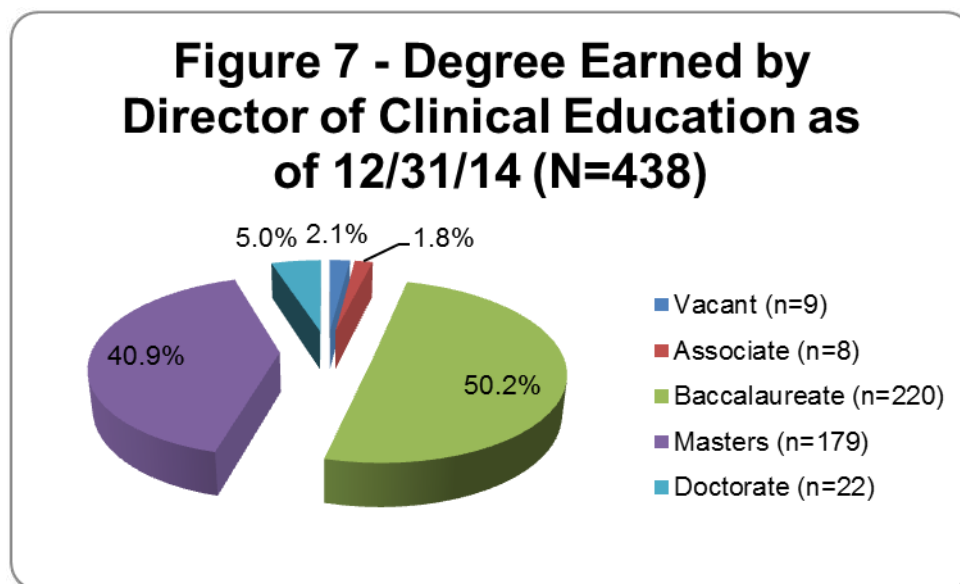


Table 7 shows a breakdown of the highest degree earned by DCE's of accredited respiratory care programs and satellites as of December 31, 2014. The Baccalaureate of Science (BS), Master of Science (MS) and Doctor of Philosophy (PhD) were the most commonly earned degrees for each degree category.

Table 7 – Degree Earned by Directors of Clinical Education as of 12/31/14 (n=429)

	as of 12/31/14 (n=429)
Associate of Science (AS)	4
Associate of Applied Science (AAS)	4
Bachelor of Science (BS)	151
Bachelor of Arts (BA)	36
Bachelor of Science in Respiratory Care/Therapy (BSRT/BSRC)	11
Bachelor of Health Sciences (BHS)	9
Bachelor of Applied Science (BAS)	3
Bachelor of Business Administration (BBA)	3
Bachelor of Applied Art and Sciences (BAAS)	1
Bachelor of Science in Education (BSEd)	1
Bachelor of Science in Management (BSM)	1
Bachelor of General Studies (BGS)	1
Bachelor of Independent Studies (BIS)	1
Bachelor of Liberal Studies (BLS)	1
Bachelor of Science in Health Systems Management (BSHSM)	1
Master of Science (MS)	64
Master of Education (Med/EdM)	42
Master of Business Administration (MBA)	17
Master of Arts (MA)	17
Master of Public Health (MPH)	9
Master of Health Administration (MHA)	7
Master of Science in Education (MSEd)	7
Master of Health Science (MHS)	4
Master of Public Administration (MPA)	3
Master of Science in Administration (MSA)	2
Master of Arts in Education (MAE)	2
Master of Science in Management (MSM)	2
Master of Advanced Study (MAS)	1
Master of Science in Health Services Administration (MSHSA)	1
Master of Divinity (MDIV)	1
Doctor of Philosophy (PhD)	9
Doctor of Health Science (DHSc/DHS)	7
Doctor of Education (EdD)	2
Education Specialist (EdS)	2
Juris Doctor (JD)	1
Doctor of Health Education (DHEd)	1

ACCREDITATION DECISIONS

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 2014 CoARC Accreditation Policies and Procedures Manual (revised version available at 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. **Table 8** is a summary of accreditation actions taken by the Commission as well as accreditation actions processed by the CoARC Executive Office in 2014. The three columns (March, July, and November) relate to specific actions taken by the Commission at CoARC's meetings.

Table 8 – CoARC Accreditation Actions for 2014					
		March 2014	July 2014	November 2014	Total
Approval of Intent		1	1	3	5
Provisional Accreditation		1	0	0	1
12 Month Review During Initial Accreditation		5	6	0	11
Initial Accreditation	Base Program	0	0	1	1
	Satellite Option	0	0	0	0
	Sleep Specialist Program Option	1	0	0	1
Continuing Accreditation	Base Program	12	11	5	28
	Satellite Option	0	0	0	0
	Sleep Specialist Program Option	1	0	0	1
Probationary Accreditation	Conferred	0	0	9	9
	Removed	0	1	1	2
	Reviewed	0	1	4	5
Progress Report Reviewed	Accepted as Final	3	0	19	22
	Additional PR Requested	2	1	27	30
Withdrawal Accreditation – Involuntary		0	0	0	0
Withhold Accreditation		0	0	0	0
Substantive Changes Reviewed by the Commission		0	0	0	0
Total Number of Accreditation Actions taken by the Commission in 2014					116
Letter of Intent Applications (3 Base; 2 SSPO)					5
Voluntary Inactive Accreditation					2
Voluntary Withdrawal Accreditation					9
Administrative Probation Assigned					6
Application for Substantive Change					35
Total Number of Accreditation Actions processed by the CoARC Executive Office in 2014					57

The CoARC is required to inform the public about its accreditation decisions. One of the ways the CoARC does this is to provide the public with information about the accreditation decision process, the nature and scope of CoARC accreditation activity and the importance and value of accreditation (<http://www.coarc.com/46.html>). The 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, prior to each Board meeting, the CoARC provides a list of programs scheduled to be reviewed and provides the final accreditation actions taken following each meeting (<http://www.coarc.com/11.html>).

The following section lists the specific accreditation actions taken by the CoARC during 2014.

Approval of Intent Granted

An Approval of Intent (AOI) is an action by the CoARC, following the submission of a Letter of Intent (LOI) Application. An AOI indicates that a sponsoring institution's plan to start a Respiratory Care program or sleep specialist program option is acceptable. An AOI authorizes the sponsor to submit a Provisional Accreditation Self-Study Report (PSSR) and to undergo a Provisional Accreditation site visit.

Program #	Program Name (date LOI application received)	Location	Effective
200616	Blessing-Rieman College of Nursing (9/3/2013)	Quincy, IL	3/23/2014
200617	Carlow University (3/14/2014)	Pittsburgh, PA	7/15/2014
200618	Eastern Florida State College (9/19/2013)	Cocoa, FL	11/15/2014
400171	Tyler Junior College (3/14/2014)	Tyler, TX	11/15/2014
400345	Central New Mexico Comm. College (6/11/2014)	Albuquerque, NM	11/15/2014

Provisional Accreditation Granted

The Provisional Accreditation status signifies that, following an AOI, a program has demonstrated sufficient compliance with the Standards to initiate a program. Such compliance includes: the completion and submission of an acceptable Provisional Accreditation Self Study Report (PSSR); completion of an initial on-site visit; and other documentation required by the CoARC. The program will remain on Provisional Accreditation until it achieves Initial Accreditation. The conferral of Provisional Accreditation authorizes the sponsor to admit its first class of students. It is recognized by the NBRC, providing graduates of these programs with eligibility to the Respiratory Care Credentialing Examination(s). After at least three (3) reporting years of outcomes have been collected and analyzed, a provisionally accredited program may apply for Initial Accreditation. Whether or not the program progresses to Initial Accreditation, enrolled students completing a program under Provisional Accreditation are considered graduates of a CoARC accredited program.

Program #	Program Name (date AOI granted)	Location	Effective
200615	Nova Southeastern University (7/16/2013)	Palm Beach Gardens, FL	3/29/2014

Initial Accreditation Granted

Initial Accreditation is conferred for a defined period of time (five years) to a program under Provisional Accreditation that, at the time of the second site visit, has demonstrated compliance with the *Standards*. At the end of the allotted time, the CoARC may confer either Continuing Accreditation or Withhold of Accreditation. Initial Accreditation may also be granted to Sleep Specialist Program Options (SSPO) operating in conjunction with an accredited Respiratory Care program that has demonstrated substantial compliance with the *Standards*. *Note: The Initial Accreditation status was eliminated effective January 1, 2015.*

Program #	Program Name (date Provisional granted)	Location	Initial End Date
400324	James A. Rhodes State College (AOI 3/24/2012)	Lima, OH	3/31/2019
200586	Simi Valley Adult School/Excelsior (Provisional 3/24/14)	Simi Valley, CA	11/30/2019

12 Month Review During Initial Accreditation

This is a review conducted approximately 12 months prior to the expiration of initial accreditation to determine if there are any significant compliance issues with CoARC Standards. Based on this review, Continuing Accreditation will be either conferred or withheld at a subsequent CoARC meeting.

Program #	Program Name (date Initial Accreditation Expires)	Location	Effective
200506	Marshall University/St. Mary's Med Ctr. (3/2015)	Huntington, WV	March 2014
200529	Jackson College (3/2015)	Jackson, MI	March 2014
200534	Ivy Tech Community College-Region 14 (3/2015)	Bloomington, IN	March 2014
200536	Carrington College – Las Vegas (3/2015)	Las Vegas, NV	March 2014
200539	St. Johns River State College (3/2015)	St. Augustine, FL	March 2014
200530	Northwest Kansas Technical Center (7/2015)	Goodland, KS	July 2014
200535	University of Arkansas Community College (7/2015)	Hope, AR	July 2014
200537	Trinity College of Nursing & Health Science (7/2015)	Rock Island, IL	July 2014
200540	Ivy Tech Community College-North Central (7/2015)	Goshen, IN	July 2014
200544	Wilkes Community College (7/2015)	Wilkesboro, NC	July 2014
200545	Concorde Career Institute-Jacksonville (7/2015)	Jacksonville, FL	July 2014

Continuing Accreditation Granted

Continuing Accreditation is conferred when 1) an established, currently accredited program demonstrates ongoing compliance with the *Standards* following submission of a continuing self-study report and completion of an on-site visit, or 2) a program holding Initial Accreditation is in full compliance with the *Standards* at the end of the 5 year Initial Accreditation period. Continuing Accreditation remains in effect until it is withdrawn: either voluntarily - the program withdraws from the accreditation process; or involuntarily - accreditation is withdrawn for failure to comply with the *Standards*.

Program #	Program Name	Location	Next Re-evaluation
200060	University of Southern Indiana	Evansville, IN	2024
200065	Highline Community College	Des Moines, IA	2024
200108	Ferris State University	Big Rapids, MI	2024
200156	Angelina College	Lufkin, TX	2024
200157	Napa Valley College	Napa, CA	2024
200230	Massasoit Community College	Brockton, MA	2024
200324	James A. Rhodes State College	Lima, OH	2024
200434	Sanford Brown College (Initial exp. 5/2014)	Fenton, MO	2019
200489	Southwestern Illinois College	Belleville, IL	2024
200516	Southern State Community College-Fayette (Initial exp. 5/14)	Washington Ct. House, OH	2019
200528	Southeast Arkansas College (Initial exp. 5/14)	Pine Bluff, AR	2019
200533	Pulaski Technical College (Initial exp. 5/14)	N. Little Rock, AR	2019
400152	Valencia College (Initial exp. 5/14)	Orlando, FL	2019
200303	Midland College	Midland, TX	2024
200510	Concorde Career College-Denver (Initial exp. 9/14)	Aurora, CO	2019
200513	Arkansas State Univ.-Mountain Home (Initial exp. 9/14)	Mountain Home, AR	2019
200520	Polk State College (Initial exp. 9/14)	Winter Haven, FL	2019
200521	Laurel Business Institute (Initial exp. 9/14)	Uniontown, PA	2019

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200522	Dalton State College (Initial exp. 9/14)	Dalton, GA	2019
200523	Antelope Valley College (Initial exp. 9/14)	Lancaster, CA	2019
200524	Baker College (Initial exp. 9/14)	Auburn Hills, MI	2019
200525	Concorde Career College-San Diego (Initial exp. 9/14)	San Diego, CA	2019
200526	Columbus Technical College (Initial exp. 9/14)	Columbus, GA	2019
200531	Great Plains Technical Center (Initial exp. 9/14)	Lawton, OK	2019
200296	Harrisburg Area Community College	Harrisburg, PA	2024
200321	Florida A & M University	Tallahassee, FL	2024
200430	Bridge Valley Community & Technical College	Charleston, WV	2024
200457	Hawkeye Community College (Initial exp. 11/14)	Waterloo, IA	2019
200517	Venango College of Clarion University (Initial exp. 11/14)	Oil City, PA	2019

Probationary Accreditation Conferred

Probationary Accreditation is a temporary status of accreditation conferred when, following submission of one or more progress reports, a program has not corrected deficiencies, related to one or more Standards and/or Policies, 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. Following conferral of Probationary Accreditation, 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 identified deficiencies, while at the same time remaining in compliance with all other Standards/Policies, the CoARC will consider removing the probationary status. 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 except for demonstrable and remarkable extenuating circumstances, in which case probation may be extended for an additional year. In no case will probationary status exceed 2 years. A probation decision is subject to reconsideration but cannot be appealed (See CoARC Policy 1.06). Enrolled students completing a 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 placed on probation either requests inactive status or when accreditation is withdrawn - voluntarily/involuntarily (see CoARC Policy 1.13).

Program #	Program Name	Location	Effective*
200174	El Paso Community College	El Paso, TX	11/15/2014
200228	Prince George's Community College	Largo, MD	11/15/2014
200439	Southwest Georgia Technical College	Thomasville, GA	11/15/2014
200551	Miller-Motte Technical College (Initial 7/2017)	Clarksville, TN	11/15/2014
200557	Florida National University (Initial 3/2017)	Hialeah, FL	11/15/2014
200559	Concorde Career Institute-Miramar (Initial 11/2016)	Miramar, FL	11/15/2014
200568	Stevens Henager College-Boise (Initial 11/2016)	Boise, ID	11/15/2014
200579	Pierpont Community & Tech College (Provisional 7/2014)	Fairmont, WV	11/15/2014
200589	Black River Technical College (Initial 11/2017)	Pocahontas, AR	11/15/2014

*This action does not become final until after the program has exhausted its rights to seek reconsideration (see CoARC Policy 1.07 – Reconsideration and Appeal).

Probationary Accreditation Removed*

*Following review of the Probation Report, Probationary Accreditation was removed and the programs listed below resumed their previous accreditation status.

Program #	Program Name (date initially placed on probation)	Location	Effective
200304	Labette Community College (11/9/2013)	Parsons, KS	7/15/2014
200083	Fresno City College (11/9/2013)	Fresno, CA	11/15/2014

Probation Report Reviewed*

* Following review of the Probation Report, Probationary Accreditation remains for the program listed below.

Program #	Program Name (date initially placed on probation)	Location	Next Action
200515	Virginia College at Birmingham (11/9/2013) (Initial Exp. 9/14)	Birmingham, AL	Nov 2014
200137	Baltimore City Community College (11/9/2013)	Baltimore, MD	Nov 2015
200490	Stevens Henager College (11/9/2013)	Murray, UT	Nov 2015
200505	Goodwin College (11/9/2013)	E. Hartford, CT	Nov 2015
200515	Virginia College at Birmingham (11/9/2013)	Birmingham, AL	Nov 2015

Progress Report Reviewed (Final)*

The CoARC requires a program to submit documentation addressing any *Standard* not met (i.e. a citation) as a progress report. The CoARC may request a Standardized Progress Report (series of questions developed by the CoARC) for a variety of deficiencies including attrition, job (positive) placement, and credentialing success (www.coarc.com). The decision to request a progress report is made by the Program Referee or the Commission during the accreditation review process. The progress report addressing the standard(s) with which the program has been found to be in non-compliance must be submitted within the specified period of time. The progress report will constitute the basis for subsequent Commission action. If the program is now in compliance with all the CoARC Standards the action will be to accept the report. If the report does not demonstrate compliance with the *Standards*, or if it was not submitted within the time frame specified on the request for the progress report, the Commission may either (1) request an additional progress report or (2) confer a Probationary Accreditation status. For more details about progress reports, please visit <http://www.coarc.com/57.html>.

*All Progress Reports were accepted as final for the programs listed below.

Program #	Program Name	Location	Next Re-evaluation
200132	Crafton Hills College (Moved from 11-2014 to 3-2014)	Yucaipa, CA	2021
200229	Sandhills Community College (Moved from 11-2014 to 3-2014)	Pinehurst, NC	2017
200450	Collins Career Center (Moved from 11-2014 to 3-2014)	Chesapeake, OH	2016
200051	Shenandoah University	Winchester, VA	2014
200061	Univ. of the District of Columbia Comm. College	Washington, DC	2022
200091	Midlands Technical College	Columbia, SC	2018
200102	East LA College/Santa Monica	Monterey Park, CA	2022
200268	Shawnee State University	Portsmouth, NH	2023
200278	Carteret Community College	Morehead City, NC	2015
200315	Stanly Community College	Locust, NC	2016
200345	Central New Mexico Community College	Albuquerque, NM	2016

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200433	Kaplan College-Modesto	Salida, CA	2017
200435	Genesee Community College	Batavia, NY	2017
200440	Concorde Career College-North Hollywood	N. Hollywood, CA	2022
200446	Mohawk Community College	Utica, NY	2019
200474	Oconee Fall Line Technical College	Dublin, GA	2023
200491	Northwest Arkansas Community College	Bentonville, AR	2015
200494	Pima Medical Institute-Chula Vista	Chula Vista, CA	2017
200542	Carrington College (Initial 7-2016)	Pleasant Hill, CA	2016
200562	McCann School of Business & Tech (Initial 11-2017)	Sunbury, PA	2017
200566	American Career College-Ontario (Initial 11-2017)	Ontario, CA	2017
200591	Shelton State Community College (Provisional 11-2015)	Tuscaloosa, AL	2016

Progress Reports Reviewed*

*All programs listed below are required to submit an additional Progress Report (PR).

Program #	Program Name	Location	Next CoARC Mtg
200293	Texas Southmost College (complaint)	Brownsville, TX	11/2014
200440	Concorde Career College – N. Hollywood (complaint)	N. Hollywood, CA	11/2014
200108	Ferris State University	Big Rapids, MI	11/2014
200008	Trident Technical College	Charleston, SC	11/2015
200085	Grossmont College	El Cajon, CA	11/2015
200108	Ferris State University	Big Rapids, MI	3/2015
200149	Del Mar College	Corpus Christi, TX	11/2015
200210	Los Angeles Valley College	Valley Glen, CA	11/2015
200238	Oakland Community College	Southfield, MI	11/2015
200250	Onondaga Community College	Syracuse, NY	11/2015
200266	Delta College	University Center, MI	11/2015
200276	California College San Diego	San Diego, CA	11/2015
200293	Texas Southmost College	Brownsville, TX	11/2015
200343	Southern University at Shreveport	Shreveport, LA	3/2015
200372	Victoria College	Victoria, TX	11/2015
200385	Pittsburgh Career Institute (VW effective 1-31-2015)	Pittsburgh, PA	3/2015
200390	Carrington College – Phoenix Westside	Phoenix, AZ	11/2015
200498	Concorde Career Institute- San Bernardino	San Bernardino, CA	11/2015
200513	Arkansas State U- Mountain Home (VW effective 12-31-2015)	Mountain Home, AR	11/2015
200533	Pulaski Technical College	N. Little Rock, AR	11/2015
200536	Carrington College- Las Vegas (Initial 3-2015)	Las Vegas, NV	11/2015
200543	United States Air Force School of Health	Ft. Sam Houston, TX	11/2015
200578	San Juan College (Provisional 7-2015)	Farmington, NM	11/2015
200582	Coahoma Community College (Provisional 7-2015)	Clarksdale, MS	3/2015
200584	El Camino Community College (Initial 7-2018)	Torrance, CA	3/2015
200588	Platt College (Provisional 7-2015)	Ontario, CA	11/2015
200596	Platt College – Alhambra (Provisional 7-2015)	Alhambra, CA	11/2015
300020	University of Arkansas – Batesville (200176 Satellite)	Batesville, AR	11/2015
300027	University of Ark for Med Sciences (200176 Satellite)	Texarkana, AR	11/2015
400324	James A Rhodes State College (SSPO Initial 3-2019)	Lima, OH	3/2015

Withhold Accreditation*

A program seeking Provisional Accreditation, Initial Accreditation or Continuing Accreditation may have such accreditation status withheld if, following submission of a self-study and completion of an on-site evaluation, the accreditation review process confirms that the program is not in compliance with the Standards. A program that has had its accreditation status withheld shall no longer be allowed to admit students. For programs that receive a Withhold of Accreditation status, enrolled students who complete the program are considered graduates of a CoARC accredited program. The CoARC requires a sponsor to formulate and complete a teach-out plan when the CoARC takes action to withhold a program's accreditation (see Policy 1.13). *This action does not become final until after the program has exhausted its rights to seek reconsideration and to file an appeal (see CoARC Policy 1.06 – Reconsideration and Appeal).

Withhold of Accreditation was not conferred in 2014.

Withdrawal Accreditation – Involuntary*

This status is conferred when an accredited program is no longer in compliance with the accreditation Standards. Specific circumstances warranting a withdrawal of accreditation are described in CoARC Policy 1.058. A program that has had its accreditation status withdrawn shall no longer be allowed to admit students. The CoARC requires a sponsor to formulate and complete a teach-out plan when the CoARC takes action to withdraw a program's accreditation (see CoARC Policy 1.13). For programs that receive a Withdrawal of Accreditation status, enrolled students who complete the program are considered graduates of a CoARC accredited program. *This action does not become final until after the program has exhausted its rights to seek reconsideration and to file an appeal (see CoARC Policy 1.06 – Reconsideration and Appeal).

Involuntary Withdrawal of Accreditation was not conferred in 2014.

Withdrawal Accreditation - Voluntary

This status is conferred when a sponsor notifies CoARC that it wants its program(s) to be removed from the accreditation process. Sponsoring institutions may notify the CoARC of Voluntary Withdrawal of Accreditation at any time for all activities of the program or for any program options. For programs that receive a Withdrawal of Accreditation - Voluntary status, enrolled students who complete the program are considered graduates of a CoARC accredited program (See CoARC Policy 1.06 for Reconsideration and Appeal Policy). The CoARC requires a sponsor to formulate and complete a teach-out plan when a program is placed on probation, requests inactive status, or when accreditation is withdrawn, either voluntarily or involuntarily (see CoARC Policy 1.13).

Program #	Program Name	Location	Effective
320390	Carrington College-Phoenix Westside (LOI 9/26/13)	Phoenix, AZ	7/25/2014
200200	Washington Adventist University	Takoma Park, MD	5/30/2014
200583	YTI Career Institute-Capital Region	Mechanicsburg, PA	5/31/2014
400352	Ivy Tech Community College-Central IN	Indianapolis, IN	5/11/2014
200250	Onondaga Community College	Syracuse, NY	8/1/2014
200273	York College of PA	York, PA	12/31/2014
200456	Kaplan College	Phoenix, AZ	6/3/2014
200429	West Kentucky Community & Tech College	Paducah, KY	6/30/2014
200225	West Virginia Northern Community College	Wheeling, WV	9/20/2014

Inactive Accreditation - Voluntary

Base programs and program options on Administrative Probation or with a status of Continuing Accreditation without any pending Progress Reports are eligible to request an inactive status for up to two years. No students may be enrolled or matriculated in the program while the program is on inactive status. Programs offering additional options may request voluntary inactive status for these program options without affecting the accreditation status of the base program. The date of the next scheduled site visit is not changed due to inactive status. During inactive status, programs must continue to submit documents (e.g., annual reports, progress reports) and pay fees that are due during that time, unless otherwise directed by the CoARC. The CoARC requires a sponsor to formulate and complete a teach-out plan when a program requests inactive status (see CoARC Policy 1.13).

Program #	Program Name	Location	Effective
200349	Berkshire Community College	Pittsfield, MA	9/2/2014
200113	Jackson State Community College	Jackson, TN	7/1/2014

Administrative Probation

Administrative Probation is conferred when a program or 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 of its students for the NBRC Examinations. 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, the program's failure to provide the requested material/fees etc. will result in the program's being placed on the next scheduled CoARC meeting agenda for consideration of Withhold or Withdrawal of Accreditation (see CoARC Accreditation Policy 1.055 and 1.058). If conferral of Administrative Probation was for failure to meet personnel requirements, the deficiency will be brought before the CoARC at its next meeting and may result in an immediate adverse accreditation decision (see CoARC Accreditation Policy 6.011).

Program #	Program Name (date Admin Pro Conferred)	Location	Reason	Date Admin Pro Removed
200571	Keiser University (3-5-2014)	Ft. Lauderdale, FL	Annual Fee	3/12/2014
200208	Texas Southern University (3-5-2014)	Houston, TX	Annual Fee	3/25/2014
200149	Del Mar College (3-5-2014)	Corpus Christi, TX	Annual Fee	3/25/2014
200429	West Kentucky Community & Tech C (3-26-2014)	Paducah, KY	Temp DCE	Vol. Withdrew 6/30/2014
200586	Simi Valley Adult School/Excelsior (4-29-2014)	Simi Valley, CA	Application	6/26/2014
200359	Seminole State College of Florida (5-9-2014)	Altamonte Springs, FL	DCE Vacancy	5/19/2014

Letter of Intent Applications Submitted

The first step in the accreditation process is the submission of a Letter of Intent (LOI) application that declares the sponsor's intention to start a new Respiratory Care program. The application, including supplementary materials, is reviewed by the CoARC Executive Office for completeness and subsequently by a Program Referee (a member of the CoARC Board who serves as the liaison between the program and the

Commission). Further details regarding the Letter of Intent application process can be found in CoARC Policy 2.02.

Program Name	Type	Location	Date Application Received
Carlow University	Base	Quincy, IL	3/14/2014
Carrington College-Phoenix Westside	Base	Phoenix, AZ	9/26/2013
Eastern Florida State College	Base	Cocoa, FL	9/19/2013
Central New Mexico Community College	SSPO	Albuquerque, NM	6/11/2014
Tyler Junior College	SSPO	Tyler, TX	6/13/2014

Site Visits Conducted

A site visit is the most complex aspect of the accreditation process. It is also the most visible function of the CoARC. Site visitation teams usually have two members, one of whom may (and in some cases, must) be a physician. Site visitors are trained to be objective on-site observers and gatherer of “the facts.” These are reported back to the CoARC Referee as a part of the processes of accreditation and reaccreditation. During one to two days at a campus, site visitors interact with all of the communities of interest, review pertinent documents, and, when appropriate, inspect program facilities. Through this process, the CoARC ensures that each program’s documentation supports its analysis and action plans related to its resources and outcomes. Further, the visit offers an opportunity to confirm the degree to which the program meets the Standards. Further details regarding the site visit process can be found at <http://www.coarc.com/32.html>. In 2014, there were a total of 16 site visits, listed below.

Program #	Program Name	Location	Dates of Site Visit in 2014
200051/300034	Shenandoah University	Winchester, VA	Nov 17-18
200107	Cuyahoga Community College	Parma, OH	Nov 24-25
200151	Jefferson Community & Technical College	Louisville, KY	Nov 24-25
200174	El Paso Community College	El Paso, TX	Oct 30-31
200296	Harrisburg Area Community College	Harrisburg, PA	July 21-22
200303	Midland College	Midland, TX	April 14-15
200321	Florida A&M University	Tallahassee, FL	March 3-4
200338/300032	Lone Star College	Kingwood, TX	Dec 1-2
200390	Carrington College - Phoenix Westside	Phoenix, AZ	Sept 29-30
200425	San Joaquin Valley College	Bakersfield, CA	Oct 9-10
200430	Bridge Valley Community & Technical College	Charleston, WV	Aug 21-22
200457	Kaskaskia College	Centralia, IL	Nov 20-21
200489	Southwestern Illinois College	Belleville, IL	Jan 30-31
200491	Northwest Arkansas Community College	Bentonville, AR	Dec 4-5
200586	Simi Valley Adult School/Excelsior	Simi Valley, CA	Aug 25-26
200615	Nova Southeastern University	Palm Beach Gardens, FL	Jan 13-14

Applications for Substantive Change

A substantive change is one that the CoARC has determined is potentially significant enough to program outcomes as to require the program to notify the CoARC prior to its occurrence (<http://www.coarc.com/42.html>.) The sponsor must report substantive change(s) to the CoARC for approval prior to the intended date of implementation, with the exception of either an adverse action by the sponsor's institutional accrediting agency or a change in the program's institutional accreditation status (see Accreditation Policy 1.07). While the decision to implement a substantive change is an institutional prerogative and/or responsibility, the CoARC is obligated to assess the potential of any substantive change to adversely affect the program's ability to meet the *Standards* and *Policies*.

Program #	Program Name	Location	Policy #	Date Approved
200422	University of Texas Health Science Ctr.	San Antonio, TX	9.10	1/9/2014
200315	Stanly Community College	Locust, NC	9.03/9.04	1/15/2014
200592	National Park Community College	Hot Springs, AR	9.04	1/22/2014
320390	Carrington College - Phoenix	Phoenix, AZ	9.11	1/30/2014
200390	Carrington College - Phoenix Westside	Phoenix, AZ	9.11	1/30/2014
200481	Lincoln Land Community College	Springfield, IL	9.01/9.04/9.10	2/28/2014
200435	Genesee Community College	Batavia, NY	9.11	3/19/2014
200354	Stark State College	North Canton, OH	9.04	3/19/2014
200344	Seattle Central College	Seattle, WA	9.02	3/27/2014
200435	Genesee Community College	Batavia, NY	9.04	4/10/2014
200541	Southern West Virginia Community College	Williamson, WV	9.04	4/17/2014
200540	Ivy Tech Community College-North Central	Goshen, IN	9.11	4/28/2014
200037	Quinsigamond Community College	Worcester, MA	9.11	4/28/2014
200458	Weatherford College	Weatherford, TX	9.04	5/14/2014
200385	Pittsburgh Career Institute	Pittsburgh, PA	9.01	5/30/2014
200286	University of Pittsburgh at Johnstown	Johnstown, PA	9.11	6/17/2014
200450	Collins Career Center	Chesapeake, OH	9.04	6/20/2014
200051	Shenandoah University	Winchester, VA	9.09	7/30/2014
200560	Platt College	Moore, OK	9.01	8/12/2014
200328	Illinois Central College	Peoria, IL	9.01	8/13/2014
200152	Valencia College	Orlando, FL	9.10	8/27/2014
200073	Kettering College	Kettering, OH	9.02/9.03/9.04	9/3/2014
200585	US Army Med Ed & Training Campus	Fort Sam Houston, TX	9.10	9/3/2014
200222	South Plains College - Lubbock Campus	Lubbock, TX	9.04	9/12/2014
200195	Tarrant County College	Fort Worth, TX	9.04	9/12/2014
200145	St. Petersburg College	Pinellas Park, FL	9.10	9/17/2014
200393	Northern Kentucky University	Highland Heights, KY	9.02/9.03/9.04/9.10	10/9/2014
200502	Ivy Tech Community College-Wabash Valley	Terre Haute, IN	9.03	10/27/2014
200315	Stanly Community College	Locust, NC	9.04	10/27/2014
200410	Fletcher Technical Community	Houma, LA	9.04	11/18/2014

	College			
200464	Ivy Tech Community College-Gary	Crown Point, IN	9.11	11/18/2014
200102	East LA College/Santa Monica	Monterey Park, CA	9.04	11/26/2014
200503	Rolla Technical Institute/Center	Rolla, MO	9.01	12/3/2014
200526	Columbus Technical College	Columbus, GA	9.04	12/15/2014
200287	Allegany College of Maryland	Cumberland, MD	9.04	12/19/2014

Changes in Program Information and Personnel

The CoARC Executive Office is responsible for maintaining accurate programmatic information. Programs are required to report changes in program name, address, and certain personnel to the CoARC in a timely manner. The following is a list of reported changes from January 1, 2012 through December 31, 2014:

Type of Change Reported		Number Reported in 2012	Number Reported in 2013	Number Reported in 2014
Change in Program Name		13	12	11
Change in Program Address		8	8	8
Change in Billing Contact		26	28	41
Change in President/CEO		62	72	78
Change in Dean		84	105	79
Change in Program Director	Permanent	47	53	46
	Temporary	3	7	3
	Acting	3	3	7
Change in Director of Clinical Education	Permanent	82	69	64
	Temporary	15	29	15
	Acting	3	5	6
Change in Medical Director	Permanent	35	30	34
	Temporary	3	0	0
Change in Co-Medical Director		2	6	4
Change in Primary Sleep Specialist Instructor		1	2	0
Total # of Changes Reported		387	429	396

Of the 53 permanent changes in Program Director in 2013, 13 were due to retirement, 11 to resignation, 17 to re-assignment and 8 were due to other reasons. Four did not provide a reason.

Of the 46 permanent changes in Program Director in 2014, 12 were due to retirement, 13 to resignation, 9 to re-assignment and 8 were due to other reasons. Four did not provide a reason.

2014 ANNUAL REPORT OF CURRENT STATUS (RCS)

Overview

The CoARC defines program outcomes as “performance indicators that reflect the extent to which the goals of the program are achieved and by which program effectiveness is documented. Examples include but are not limited to: program completion rates, job placement rates, certification pass rates, and graduate satisfaction” (2010 Standards, p.10). Outcomes measures used by the CoARC reflect metrics of program effectiveness and student achievement. The CoARC uses an outcomes-centered approach in its accreditation review process. This approach focuses on a specific set of outcomes which include the following: a) Graduate performance on the national credentialing examination for entry into practice; b) Programmatic retention/attrition; c) Graduate satisfaction with program; d) Employer satisfaction with program; and e) Job placement.

The CoARC believes that continuous assessment of the educational quality of a respiratory care program (inclusive of distance education modalities and program options), that is broad-based, systematic, and designed to promote achievement of program goals will maximize the academic success of the enrolled students in an accountable and cost-effective manner. The CoARC routinely monitors the program’s outcomes in relation to the CoARC thresholds via an Annual Report of Current Status (RCS). The CoARC provides definitions of each of the minimum performance criteria in its *Interpretive Guidelines* (p.23), its *Accreditation Policies & Procedures Manual* (p. 35), and on its website (<http://www.coarc.com/15.html>).

In May 2011, the CoARC launched its online Annual RCS system with a deadline for submission of July 1st, 2011. Prior to this date, in an effort to minimize reporting burdens to programs seeking and maintaining accreditation, the CoARC redesigned its reporting tool. The main focus of this redesign was to simplify and increase the accuracy of data entry for programs. To achieve this goal, the CoARC adopted a reporting system that is *driven by student data*. Programs can now capture and record cohort information that includes student status from start to finish. Once a cohort has been created, and students for that cohort have been entered into the reporting system, the program can update student status, such as graduation, attrition, credentials earned, and job placement. This student-specific information is then used to automatically generate aggregate programmatic outcomes data.

The outcomes continue be updated on an annual basis following the submission and verification of each program’s Annual RCS on July 1st. The CoARC works with programs throughout the data submission and validation phases to ensure that the performance data are accurate. With the 2015 RCS, the CoARC will add overall employer and graduate satisfaction, as well as on-time graduation rates, to the outcomes metrics reported to the public.

The CoARC completed the verification of the outcomes data from the 2014 Annual Report of Current Status (RCS) in September 2014. A total of 451 annual reports (426 base respiratory care programs, 18 satellite program options, and 7 sleep specialist program options) were used to generate the data in this section. These data are reported by respiratory care programs to the CoARC and reflect the aggregate data for the three-year time period being reported (January 1, 2011 through December 31, 2013 for the 2014 RCS reports accepted by the CoARC Executive Office). Note: The data do not reflect any changes made to the RCS data after the 2014 RCS report was accepted. Any such changes will be reported in the 2015 RCS reports due July 1, 2015.

Total Applications

Programs are required to report the number of applications each year. **Figure 8a** shows total number of RC applications from 2009 through 2013. The data shows total applications reaching a peak of 23,430 in 2011. However, total applications decreased by 12.9% between 2011 and 2013. The mean number of applications per program was 46 in 2013, 52 from 2010 through 2012, and 48 in 2009. The median number of applications per program was 34 in 2013, 38 in 2012, 40 in 2011, 38 in 2010, and 32 in 2009.

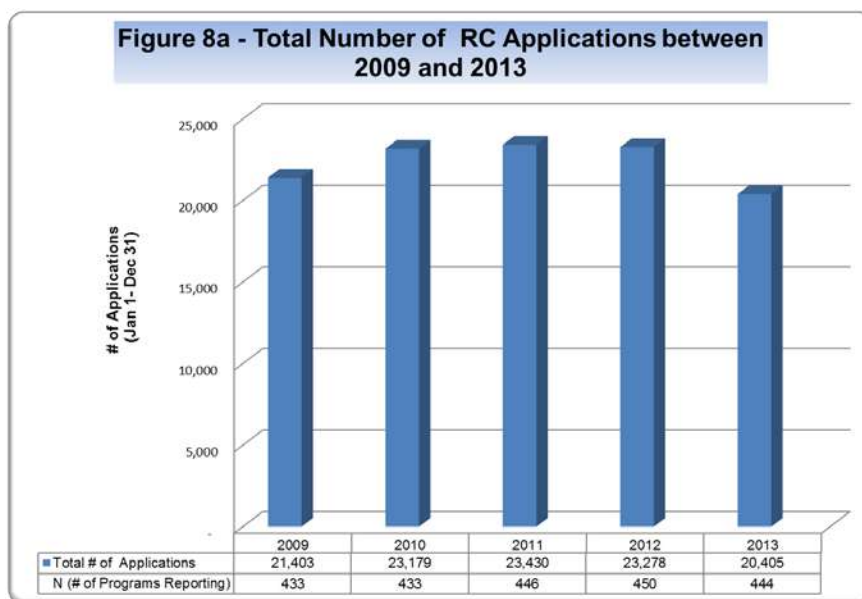
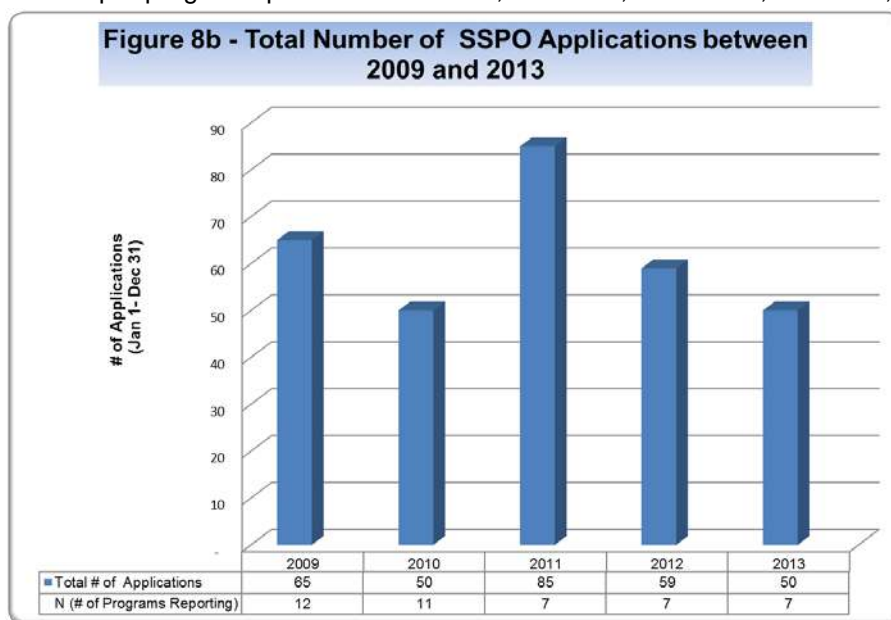


Figure 8b is the application data for sleep specialist program options (SSPOs). The mean number of applications per program option was 7 in 2013 and 2012, 10 in 2011, 5 in 2010, and 8 in 2009. The median number of applications per program option was 5 in 2013, 7 in 2012, 10 in 2011, 0 in 2010, and 6 in 2009.



Estimated RC Applications by Degree Offered

Table 9 –RC Applications by Degree Offered between 2009 and 2013

Degree Offered	2013 Applications (N=444)		2012 Applications (N=450)		2011 Applications (N=446)*		2010 Applications (N=433)*		2009 Applications (N=433)*	
	Total	Mean	Total	Mean	Total	Mean	Total	Mean	Total	Mean
Associate	18,336	48	20,947	54	21,348	55	21,342	55	19,702	51
Baccalaureate	2,003	33	2,257	40	2,075	36	1,837	32	1,701	29
Masters	66	22	74	25						

Table 9 shows the annual respiratory care applications in relation to the degree offered. There were 20,405 applications in 2013. The 380 programs offering associate degrees accounted for 90.0% of the total number of applications in 2013. This is a 12.5% decrease compared to 2012 for this category and a 6.9% decrease when compared to 2009. The mean number of applications per program for this category was 48 in 2013, 54 in 2012, 55 in 2011 and 2010, and 51 in 2009. The median number of applications per program for this category was 35 in 2013, 40 in 2012, 2011, and 2010, and 35 in 2009.

The 61 programs offering baccalaureate degrees accounted for 9.7% of the total number of applications in 2013. This is an 11.3% decrease when compared to 2012 for this category, but a 17.8% increase when compared to 2009. The mean number of applications per program for this category was 33 in 2013, 40 in 2012, 36 in 2011, 33 in 2010, and 29 in 2009. The median number of applications per program for this category was 30 in 2013 through 2010, and 29 in 2009.

The 3 programs offering master's degrees accounted for 0.3% of the total number of applications in 2013. This is a 10.8% decrease compared to 2012 for this category. The mean number of applications per program for this category was 22 in 2013 and 25 in 2012. The median number of applications per program for this category was 20 in 2013 and 30 in 2012. **Note: The programs that offered more than one degree type (i.e., Associate and Baccalaureate or Baccalaureate and Masters) were separated in 2013 and each degree offered was assigned a different CoARC number, so the data no longer report combined degrees as was the case in the 2012 and 2011 Reports on Accreditation.*

Estimated RC Applications by Institutional Type

Table 10 – RC Applications by Institutional Type between 2009 and 2013

Institutional Type	2013 Applications (N=444)		2012 Applications (N=450)		2011 Applications (N=446)		2010 Applications (N=433)		2009 Applications (N=433)	
	Total	Mean	Total	Mean	Total	Mean	Total	Mean	Total	Mean
Community or Junior College	12,088	48	13,867	55	13,969	55	14,180	56	12,828	51
Four-Year College or University	4,011	40	4,346	45	4,225	44	3,949	41	3,512	36
Technical or Vocational School	3,617	50	4,211	55	4,344	57	4,268	56	4,360	57
Academic HSC/ Medical Center	319	27	402	34	340	28	291	24	262	22
Career or Technical College	189	32	305	44	430	61	418	60	378	54
U.S. Military	181	91	147	74	122	61	73	37	63	32

Table 10 shows the annual applications for respiratory care programs by institutional type. The 251 programs offered in community or junior colleges accounted for 59.2% of the total number of applications in 2013. This is the largest category and is a 12.8% decrease compared to 2012 and a 5.8% decrease compared to 2009. The mean number of applications per program for this category was 48 in 2013, 55 in 2012 and 2011, 56 in 2010, and 51 in 2009. The median number of applications per program for this category was 36 in 2013, 41 in 2012, 40 in 2011, 42 in 2010, and 37 in 2009.

The 101 programs offered in four-year colleges or universities accounted for 19.7% of the total number of applications in 2013. This is a 7.7% decrease compared to 2012 but a 14.2% increase compared to 2009. The mean number of applications per program for this category was 40 in 2013, 45 in 2012, 44 in 2011, 41 in 2010, and 36 in 2009. The median number of applications per program for this category was 25 in 2013, 30 in 2012, 2011, and 2010, and 25 in 2009.

The 72 programs offered in technical or vocational schools accounted for 17.7% of the total number of applications in 2013. This is a 14.1% decrease compared to 2012 and a 17.0% decrease compared to 2009. The mean number of applications per program was 50 in 2013, 55 in 2012, 57 in 2011, 56 in 2010, and 57 in 2009. The median number of applications per program for this category was 37 in 2013, 40 in 2012 and 2011, 43 in 2010, and 33 in 2009.

The 12 programs offered in academic HSC/medical centers accounted for 1.6% of the total number of applications in 2013. This is a 20.6% decrease compared to 2012 but a 21.8% increase compared to 2009. The mean number of applications per program was 27 in 2013, 34 in 2012, 28 in 2011, 24 in 2010, and 22 in 2009. The median number of applications per program for this category was 30 in 2013, 29 in 2012, 23 in 2011, 17 in 2010, and 19 in 2009.

The 6 programs offered in career or technical colleges accounted for 0.9% of the total number of applications in 2013. This is a 38.0% decrease compared to 2012 and a 50.0% decrease compared to 2009. The mean number of applications per program was 32 in 2013, 3 in 2012, 61 in 2011, 60 in 2010, and 54 in 2009. The median number of applications per program for this category was 30 in 2013, 34 in 2012, 41 in 2011, 48 in 2010, and 41 in 2009.

The 2 programs offered in the U.S. military accounted for 0.9% of the total number of applications in 2013. This is a 23.1% increase compared to 2012 and a 187.3% increase compared to 2009. The mean and median number of applications per program was 91 in 2013, 74 in 2012, 61 in 2011, 37 in 2010, and 32 in 2009.

RC Applications by Institutional Control/Funding

Table 11 –RC Applications by Institutional Control/Funding between 2009 and 2013

Institutional Control/Funding	2013 Applications (N=444)		2012 Applications (N=450)		2011 Applications (N=446)		2010 Applications (N=433)		2009 Applications (N=433)	
	Total	Mean	Total	Mean	Total	Mean	Total	Mean	Total	Mean
Public/Not-For-Profit	15,471	44	17,938	52	17,743	51	17,718	51	16,051	46
Private/For-Profit (Proprietary)	3,677	65	3,570	63	3,579	63	3,614	63	3,674	64
Private/Not-For-Profit	1,076	33	1,623	42	1,986	51	1,774	45	1,615	41
Federal Government	181	91	147	74	122	61	73	37	63	32

Table 11 shows the annual applications to respiratory care programs in relation to the institutional control/funding. The 352 programs controlled/funded by public/not-for-profit institutions accounted for 75.8% of the total number of applications in 2013. This is the largest category and is a 13.8% decrease compared to 2012 and a 3.6% decrease compared to 2009. The mean number of applications per program for this category was 44 in 2013, 52 in 2012, 51 in 2011 and 2010, and 46 in 2009. The median number of applications per program for this category was 33 in 2013, 37 in 2012, 40 in 2011, 37 in 2010, and 32 in 2009.

The 57 programs controlled/funded by private/for-profit (proprietary) institutions accounted for 18.0% of the total number of applications in 2013. This is a 2.7% increase compared to 2012 and a .08% increase compared to 2009. The mean number of applications per program for this category was 65 in 2013, 63 in 2012, 2011 and 2010, and 64 in 2009. The median number of applications per program for this category was 45 in 2013, 48 in 2012, 55 in 2011, and 50 in 2010 and 2009.

The 33 programs controlled/funded by private/not-for-profit institutions accounted for 5.3% of the total number of applications in 2013. This is a 33.7% decrease compared to 2012 and a 33.4% decrease compared to 2009. The mean number of applications per program for this category was 33 in 2013, 42 in 2012, 51 in 2011, 45 in 2010, and 41 in 2009. The median number of applications per program for this category was 23 in 2013, 25 in 2012, 21 in 2011 and 2010, and 16 in 2009.

The 2 programs controlled/funded by the federal government accounted for 0.9% of the total number of applications in 2013. This is a 23.1% increase compared to 2012 and a 187.3% increase compared to 2009. The mean and median number of applications per program was 91 in 2013, 74 in 2012, 61 in 2011, 37 in 2010, and 32 in 2009.

Applications by State (including D.C.) and Degree

Table 12 provides data on applications to respiratory care programs for 2009-2013 by state and degree offered. As expected, California continues to have the largest (16.1% of total in 2013) number of applications.

Table 12 –Applications by State (including D.C.) and Degree between 2009 and 2013

State (# of programs in 2013)	Degree	2013 Applications (N=444)	2012 Applications (N=450)	2011 Applications (N=446)	2010 Applications (N=433)	2009 Applications (N=433)
AL (n=6)	Total	336	373	374	357	336
4	Associate	265	277	275	272	250
2	Baccalaureate	71	96	99	85	86
AR (n=12)	Total	239	294	259	210	169
9	Associate	234	235	188	171	116
3	Baccalaureate	5	59	71	39	53
AZ (n=7)	Total	512	621	760	651	697
7	Associate	512	621	760	651	697
0	Baccalaureate	0	0	0	0	0
CA (n=38)	Total	3,281	3,648	3,490	3,359	3,429
37	Associate	3,252	3,613	3,469	3,323	3,407
1	Baccalaureate	29	35	21	36	22
CO (n=4)	Total	154	140	156	170	173
4	Associate	154	140	156	170	173
0	Baccalaureate	0	0	0	0	0
CT (n=5)	Total	257	256	243	258	273
4	Associate	227	230	213	233	248
1	Baccalaureate	30	26	30	25	25
DC (n=1)	Total	18	N/A	26	23	20
1	Associate	18	N/A	26	23	20
0	Baccalaureate	0	0	0	0	0
DE (n=2)	Total	96	112	91	81	101
2	Associate	96	112	91	81	101
0	Baccalaureate	0	0	0	0	0
FL (n=25)	Total	1,251	1,437	1,658	1,667	1,261
23	Associate	1,221	1,407	1,628	1,637	1,246
2	Baccalaureate	30	30	30	30	15
GA (n=15)	Total	648	938	697	672	670
11	Associate	518	703	537	519	542
3	Baccalaureate	110	205	160	153	128
1	Masters	20	30	N/A	N/A	N/A
HI (n=1)	Total	N/A	40	48	37	30
1	Associate	N/A	40	48	37	30
0	Baccalaureate	0	0	0	0	0

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State (# of programs in 2013)	Degree	2013 Applications (N=444)	2012 Applications (N=450)	2011 Applications (N=446)	2010 Applications (N=433)	2009 Applications (N=433)
IA (n=6)	Total	260	320	259	229	236
6	Associate	260	320	259	229	236
0	Baccalaureate	0	0	0	0	0
ID (n=3)	Total	81	108	100	123	131
2	Associate	37	48	35	58	56
1	Baccalaureate	44	60	65	65	75
IL (n=14)	Total	581	617	704	753	660
12	Associate	501	591	639	688	622
1	Baccalaureate	36	26	65	65	38
1	Masters	44	44	5	N/A	N/A
IN (n=11)	Total	356	426	474	482	429
10	Associate	301	358	429	437	384
1	Baccalaureate	55	68	45	45	45
KS (n=9)	Total	217	236	248	248	178
8	Associate	202	217	230	227	166
1	Baccalaureate	15	19	18	21	12
KY (n=13)	Total	388	620	500	468	325
12	Associate	372	620	486	448	314
1	Baccalaureate	16	N/A	14	15	11
LA (n=11)	Total	254	276	263	284	180
9	Associate	226	250	230	263	160
2	Baccalaureate	28	26	33	21	20
MA (n=7)	Total	276	334	363	366	339
7	Associate	276	334	363	366	339
0	Baccalaureate	0	0	0	0	0
MD (n=8)	Total	360	386	325	322	304
6	Associate	235	266	245	272	249
2	Baccalaureate	125	120	80	50	55
ME (n=2)	Total	85	98	86	86	90
2	Associate	85	98	86	86	90
0	Baccalaureate	0	0	0	0	0
MI (n=13)	Total	476	561	697	1,008	923
13	Associate	476	561	697	1,008	923
0	Baccalaureate	0	0	0	0	0
MN (n=5)	Total	170	190	179	202	196
3	Associate	125	136	139	142	127
2	Baccalaureate	45	54	40	60	69

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State (# of programs in 2013)	Degree	2013 Applications (N=444)	2012 Applications (N=450)	2011 Applications (N=446)	2010 Applications (N=433)	2009 Applications (N=433)
MO (n=12)	Total	262	379	333	315	326
10	Associate	242	361	318	300	312
2	Baccalaureate	20	18	15	15	14
MS (n=8)	Total	395	649	670	753	705
8	Associate	395	649	670	753	705
0	Baccalaureate	0	0	0	0	0
MT (n=2)	Total	39	50	47	50	30
2	Associate	39	50	47	50	30
0	Baccalaureate	0	0	0	0	0
NC (n=14)	Total	795	834	880	1,024	935
14	Associate	795	834	880	1,024	935
0	Baccalaureate	0	0	0	0	0
ND (n=3)	Total	29	35	25	22	30
0	Associate	0	0	0	0	0
2	Baccalaureate	27	35	25	22	30
1	Masters	2	N/A	N/A	N/A	N/A
NE (n=4)	Total	121	110	137	129	144
3	Associate	106	100	122	119	134
1	Baccalaureate	15	10	15	10	10
NH (n=1)	Total	10	5	20	24	13
1	Associate	10	5	20	24	13
0	Baccalaureate	0	0	0	0	0
NJ (n=7)	Total	400	765	580	324	328
5	Associate	354	525	490	324	328
2	Baccalaureate	46	240	90	N/A	N/A
NM (n=6)	Total	148	140	163	180	150
6	Associate	148	140	163	180	150
0	Baccalaureate	0	0	0	0	0
NV (n=3)	Total	285	286	210	223	243
3	Associate	285	286	210	223	243
0	Baccalaureate	0	0	0	0	0
NY (n=14)	Total	897	896	844	766	771
11	Associate	759	752	729	634	661
3	Baccalaureate	138	144	115	132	110
OH (n=22)	Total	979	1,032	1,167	1,132	1,063
18	Associate	775	855	998	955	898
4	Baccalaureate	204	177	169	177	165

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State (# of programs in 2013)	Degree	2013 Applications (N=444)	2012 Applications (N=450)	2011 Applications (N=446)	2010 Applications (N=433)	2009 Applications (N=433)
OK (n=7)	Total	172	238	235	236	234
7	Associate	172	238	235	236	234
0	Baccalaureate	0	0	0	0	0
OR (n=4)	Total	155	237	182	185	223
3	Associate	134	207	152	160	193
1	Baccalaureate	21	30	30	25	30
PA (n=26)	Total	1,067	1,141	1,263	1,190	973
21	Associate	867	876	1,042	1,013	845
5	Baccalaureate	200	265	221	177	128
RI (n=2)	Total	87	91	30	41	26
2	Associate	87	91	30	41	26
0	Baccalaureate	0	0	0	0	0
SC (n=7)	Total	218	251	223	259	224
7	Associate	218	251	223	259	224
0	Baccalaureate	0	0	0	0	0
SD (n=2)	Total	30	31	35	20	16
2	Associate	30	31	35	20	16
0	Baccalaureate	0	0	0	0	0
TN (n=11)	Total	556	627	618	597	459
8	Associate	418	482	480	470	337
3	Baccalaureate	138	145	138	127	122
TX (n=36)	Total	1,578	1,388	1,489	1,410	1,417
31	Associate	1,312	1,205	1,271	1,199	1,202
5	Baccalaureate	266	183	218	211	215
UT (n=7)	Total	592	492	664	662	672
3	Associate	451	460	630	634	664
4	Baccalaureate	141	32	34	28	8
VA (n=8)	Total	520	507	536	426	286
5	Associate	440	445	465	344	212
3	Baccalaureate	80	62	71	82	74
VT (n=1)	Total	40	40	40	40	80
1	Associate	40	40	40	40	80
0	Baccalaureate	0	0	0	0	0
WA (n=5)	Total	214	229	245	253	216
4	Associate	164	229	245	253	216
1	Baccalaureate	50	0	0	0	0

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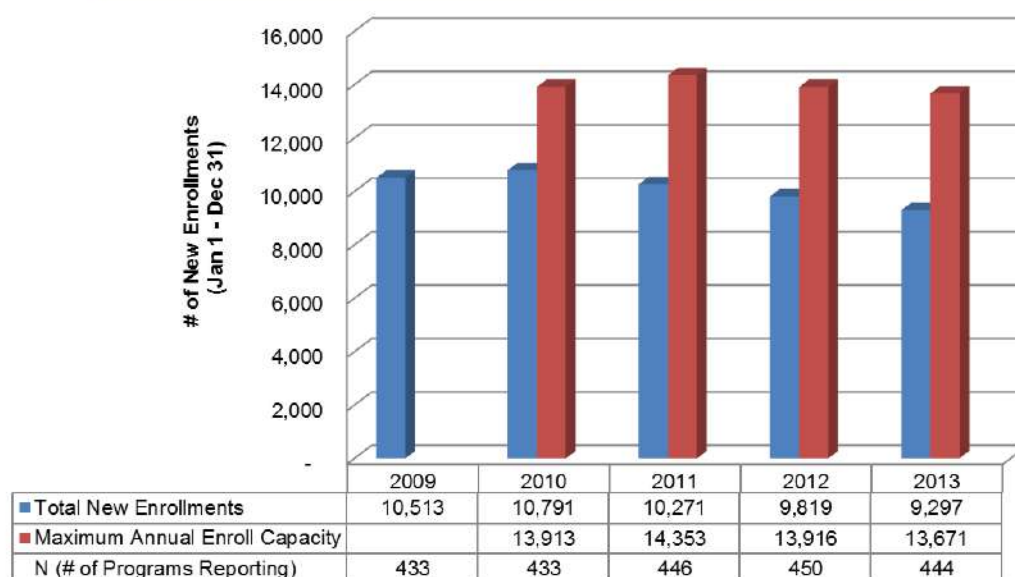


State (# of programs in 2013)	Degree	2013 Applications (N=444)	2012 Applications (N=450)	2011 Applications (N=446)	2010 Applications (N=433)	2009 Applications (N=433)
WI (n=7)	Total	330	352	442	443	376
7	Associate	330	352	442	443	376
0	Baccalaureate	0	0	0	0	0
WV (n=6)	Total	184	306	209	324	200
4	Associate	157	286	172	289	159
2	Baccalaureate	27	20	39	35	41
WY (n=1)	Total	15	20	20	14	13
1	Associate	15	20	20	14	13
0	Baccalaureate	0	0	0	0	0

Total New Enrollments

Programmatic enrollment is deemed by the CoARC to occur when a student enrolls in the first core respiratory care course; i.e. a non-survey course available only to students matriculated in the respiratory care program. This may be different than the enrollment or matriculation date determined by the institution. This definition is used for calculating programmatic attrition, on-time graduation rates, and maximum annual enrollment. **Figure 9** shows total new enrollments from 2009 through 2013. This does not include students enrolled in prior years. Enrollments for 2010 through 2013 are compared to the total maximum annual enrollment capacity³. The CoARC did not track maximum annual enrollment capacity prior to 2010. The data show new enrollments reaching 68.0% of capacity in 2013, 70.5% of capacity in 2012, 72% of capacity in 2011, and 78% of capacity in 2010. The mean maximum annual enrollment capacity per program was 31 in 2013 and 2012, and 32 in 2011 and 2010. The mean number of new enrollments per program was 21 in 2013, 22 in 2012, 23 in 2011, 24 in 2010, and 24 in 2009. The median number of new enrollments per program was 18 in 2013, 19 in 2012 and 2011, 20 in 2010, and 19 in 2009. There was a 5.3% decrease in new enrollments compared to 2012 and an 11.6% decrease compared to 2009.

Figure 9 - Total New RC Program and Satellite Enrollments and Maximum Annual Enrollment Capacities between 2009 and 2013



Not included in **Figure 9** are the enrollment data for the 7 sleep specialist program options. There were a total of 42 new enrollments in 2013 which is a 19.2% decrease compared to 2012 and a 28.8% decrease compared to 2009. In 2013, new enrollments reached 49.4% of maximum annual enrollment capacity. The mean number of new enrollments per program option was 6 in 2013, 7 in 2012 and 2011, 5 in 2010, and 8 in 2009. The median number of new enrollments per program option was 4 in 2013, 5 in 2012, 3 in 2011, 3 in 2010, and 5 in 2009.

³ The maximum annual enrollment capacity is defined as the maximum number of potential new students that can be enrolled in a calendar year (defined as January 1 through December 31). This number is established by the CoARC and can only be increased upon approval of a substantive change in enrollment (see CoARC Policy 9.10).

New RC Enrollments by Degree Offered

Table 13 – New RC Enrollments by Degree Offered between 2009 and 2013												
Degree Offered	2013 Max Annual Enroll Capacity		2013 New Enrollments (N=444)		2012 New Enrollments (N=450)		2011 New Enrollments (N=446)		2010 New Enrollments (N=433)		2009 New Enrollments (N=433)	
	Total	Mean	Total	Mean	Total	Mean	Total	Mean	Total	Mean	Total	Mean
Associate	12,208	32	8,273	22	8,872	23	9,290	24	9,787	25	9,588	25
Associate & Baccalaureate							51	17	34	15	41	10
Baccalaureate	1,377	23	993	16	920	16	852	17	891	17	819	16
Baccalaureate & Masters							78	26	69	23	75	25
Masters	86	29	31	10	27	9						

Table 13 shows the new annual enrollments in respiratory care in relation to the degree offered. The 380 programs offering associate degrees accounted for 89.0% of the 9,297 new enrollments in 2013. This is a 6.8% decrease compared to 2012 for this category and a 13.7% decrease compared to 2009. New enrollments reached 67.8% of maximum annual enrollment capacity in 2013 for associate degree programs. The mean number of new enrollments per program for this category was 22 in 2013, 23 in 2012, 24 in 2011 and 25 in 2010 and 2009. The median number of new enrollments per program for this category was 18 in 2013, 19 in 2012 and 2011, 20 in 2010, and 19 in 2009.

The 61 programs offering baccalaureate degrees accounted for 10.7% of the total number of new enrollments in 2013. This is a 7.9% increase in new enrollments when compared to 2012 for this category and a 21.2% increase compared to 2009. New enrollments reached 72.1% of maximum annual enrollment capacity in 2013 for baccalaureate degree programs. The mean number of new enrollments per program for this category was 16 in 2013, 16 in 2012, 17 in 2011 and 2010, and 16 in 2009. The median number of new enrollments per program for this category was 18 in 2013, 2012, and 2011, 19 in 2010, and 18 in 2009.

The 3 programs offering master's degrees accounted for 0.3% of the total number of new enrollments in 2013. This is a 14.8% increase compared to 2012. New enrollments reached 36.0% of maximum annual enrollment capacity in 2013 for programs that offer master's degrees. The mean number of new enrollments per program for this category was 10 in 2013 and 9 in 2012. The median number of new enrollments per program for this category was 10 in 2013 and 6 in 2012. **Note: The programs that offered more than one degree type (i.e., Associate and Baccalaureate or Baccalaureate and Masters) were separated in 2013 and each degree offered was assigned a different CoARC number, so the data no longer report combined degrees as was the case in the 2012 and 2011 Reports on Accreditation.*

New RC Enrollments by Institutional Type

Table14 – New RC Enrollments by Institutional Type between 2009 and 2013

Institutional Type	2013 Max Annual Enroll Capacity		2013 New Enrollments (N=444)		2012 New Enrollments (N=450)		2011 New Enrollments (N=446)		2010 New Enrollments (N=433)		2009 New Enrollments (N=433)	
	Total	Mean	Total	Mean	Total	Mean	Total	Mean	Total	Mean	Total	Mean
Community or Junior College	6,714	27	4,953	20	5,176	20	5,337	21	5,573	22	5,222	21
Four-Year College or University	2,935	29	1,995	20	1,861	19	1,912	20	1,950	21	1,914	20
Technical or Vocational School	3,372	47	1,923	27	2,303	30	2,517	33	2,781	37	2,930	39
Academic HSC/ Medical Center	239	20	151	13	184	15	198	17	193	16	172	14
Career or Technical College	214	36	116	19	144	21	181	20	212	24	209	23
U.S. Military	197	99	159	80	151	76	126	63	82	41	66	33

Table 14 shows the new annual enrollments in respiratory care programs in relation to the institutional type. The 251 programs offered in community or junior colleges is the largest category and accounted for 53.3% of the total number of enrollments in 2013. This is a 4.3% decrease compared to 2012 and a 5.2% decrease compared to 2009. New enrollments reached 73.8% of maximum annual enrollment capacity in 2013. The mean number of new enrollments per program was 20 in 2013 and 2012, 21 in 2011, 22 in 2010, and 21 in 2009. The median was 18 in 2013, 20 in 2012, 19 in 2011, and 20 in 2010 and 2009.

The 101 programs offered in four-year colleges or universities accounted for 21.5% of the total number of new enrollments in 2013. This is a 7.2% increase compared to 2012 and a 4.2% increase compared to 2009. New enrollments reached 68.0% of maximum annual enrollment capacity in 2013. The mean number of new enrollments per program was 20 in 2013, 19 in 2012, 20 in 2011, 21 in 2010, and 20 in 2009. The median was 16 in 2013, 17 in 2012, 16 in 2011, 17 in 2010, and 15 in 2009.

The 72 programs offered in technical or vocational schools accounted for 20.7% of the total number of new enrollments in 2013. This is a 16.5% decrease compared to 2012 and a 34.4% decrease compared to 2009. New enrollments reached 57.0% of maximum annual enrollment capacity in 2013. The mean number of new enrollments per program was 27 in 2013, 30 in 2012, 33 in 2011, 37 in 2010, and 39 in 2009. The median was 20 in 2013, 23 in 2012, 22 in 2011, 23 in 2010, and 21 in 2009.

The 12 programs offered in academic HSC/medical centers accounted for 1.6% of the total number of new enrollments in 2013. This is a 17.9% decrease compared to 2012 and a 12.2% decrease compared to 2009. New enrollments reached 63.2% of maximum annual enrollment capacity in 2013. The mean number of new enrollments per program was 13 in 2013, 15 in 2012, 17 in 2011, 16 in 2010, and 14 in 2009. The median was 10 in 2013, 16 in 2012 and 2011, 14 in 2010, and 12 in 2009.

The 6 programs offered in career or technical colleges accounted for 1.2% of the total number of new enrollments in 2013. This is a 19.4% decrease compared to 2012 and a 44.5% decrease compared to 2009. New enrollments reached 54.2% of maximum annual enrollment capacity in 2013. The mean number of new enrollments per program was 19 in 2013, 21 in 2012, 20 in 2011, 24 in 2010, and 23 in 2009. The median was 18 in 2013 and 2012, 20 in 2011, and 21 in 2010 and 2009.

The 2 programs offered in the U.S. military accounted for 1.7% of the total number of new enrollments in 2013. This is a 5.3% increase compared to 2012 and a 140.8% increase compared to 2009. New enrollments reached 80.7% of maximum annual enrollment capacity in 2013. The mean and median number of new enrollments per program was 80 in 2013, 76 in 2012, 63 in 2011, 41 in 2010, and 33 in 2009.

New RC Enrollments by Institutional Control/Funding

Table 15 – New RC Enrollments by Institutional Control/Funding between 2009 and 2013

Institutional Control/Funding	2013 Max Annual Enroll Capacity		2013 New Enrollments (N=444)		2012 New Enrollments (N=450)		2011 New Enrollments (N=446)		2010 New Enrollments (N=433)		2009 New Enrollments (N=433)	
	Total	Mean	Total	Mean	Total	Mean	Total	Mean	Total	Mean	Total	Mean
Public/Not-For-Profit	8,779	25	6,497	18	6,631	19	6,767	19	7,237	21	6,705	19
Private/For-Profit (Proprietary)	3,789	66	2,081	37	2,070	36	2,833	46	2,952	48	3,262	53
Private/Not-For-Profit	906	27	560	17	967	20	545	17	520	16	480	15
Federal Government	197	99	159	80	151	76	126	63	82	41	66	33

Table 15 shows the new annual enrollments in respiratory care programs in relation to the institutional control/funding. The 352 programs controlled/ funded by public/not-for-profit institutions is the largest category and accounted for 69.9% of the total number of new respiratory care enrollments in 2013. This is a 2.0% decrease compared to 2012 and a 3.1% decrease compared to 2009. New enrollments reached 74.0% of maximum annual enrollment capacity in 2013 for programs in this category. The mean number of new enrollments per program was 18 in 2013, 19 in 2012 and 2011, 21 in 2010, and 19 in 2009. The median was 18 in 2013, 19 in 2012 and 2011, 20 in 2010, and 19 in 2009.

The 57 programs controlled /funded by private/for-profit (proprietary) institutions accounted for 22.4% of the total number of new enrollments in 2013. This is a 0.53% increase compared to 2012 but a 36.2% decrease compared to 2009. New enrollments reached 54.9% of maximum annual enrollment capacity in 2013 for programs in this category. The mean number of new enrollments per program was 37 in 2013, 36 in 2012, 46 in 2011, 48 in 2010, and 53 in 2009. The median was 31 in 2013, 29 in 2012, 33 in 2011, 34 in 2010, and 33 in 2009.

The 33 programs controlled/funded by private/not-for-profit institutions accounted for 6.0% of the total number of new enrollments in 2013. This is a 42.1% decrease compared to 2012 and a 16.7% increase compared to 2009. New enrollments reached 61.8% of maximum annual enrollment capacity in 2013 for programs in this category. The mean number of new enrollments per program was 17 in 2013, 20 in 2012, 17 in 2011, 16 in 2010, and 15 in 2009. The median was 14 in 2013, 17 in 2012, 14 in 2011, 15 in 2010, and 11 in 2009.

The 2 programs controlled/funded by the federal government accounted for 1.7% of the total number of new enrollments in 2013. This is a 5.3% increase compared to 2012 and a 140.8% increase compared to 2009. New enrollments reached 80.7% of maximum annual enrollment capacity in 2013. The mean and median number of new enrollments per program was 80 in 2013, 76 in 2012, 63 in 2011, 41 in 2010, and 33 in 2009.

New RC Enrollments by State (including D.C.) and Degree

Table 16 provides data on new enrollments in respiratory care programs for 2009-2013 by state and degree offered. As expected, California had the largest (23.1% of total) enrollments of any state in 2013.

Table 16 – New RC Enrollments by State (including D.C.) and Degree between 2009 and 2013							
State (# of programs in 2013)	Degree	2013 Maximum Annual Enroll Capacity	New Enrollments 2013 (N=444)	New Enrollments 2012 (N=450)	2011 New Enrollments (N=446)	2010 New Enrollments (N=433)	2009 New Enrollments (N=433)
AL (n=6)	Total	216	147	151	145	142	154
4	Associate	150	100	82	85	80	95
2	Baccalaureate	66	47	69	60	62	59
AR (n=12)	Total	207	134	133	104	118	93
9	Associate	171	118	109	76	88	61
3	Baccalaureate	36	16	24	28	30	32
AZ (n=7)	Total	448	189	208	337	418	459
7	Associate	448	189	208	337	418	459
0	Baccalaureate	0	0	0	0	0	0
CA (n=38)	Total	2,152	1,497	1,751	1,861	1,744	1,714
37	Associate	2,130	1,488	1,731	1,853	1,725	1,706
1	Baccalaureate	22	9	20	8	19	8
CO (n=4)	Total	227	99	119	108	137	158
4	Associate	227	99	119	108	137	158
0	Baccalaureate	0	0	0	0	0	0
CT (n=5)	Total	118	76	92	86	104	90
4	Associate	100	59	73	69	88	80
1	Baccalaureate	18	17	18	17	16	10
DC (n=1)	Total	24	24	18	14	17	17
1	Associate	24	10	18	14	17	17
0	Baccalaureate	0	0	0	0	0	0
DE (n=2)	Total	35	24	34	35	28	31
2	Associate	35	24	34	35	28	31
0	Baccalaureate	0	0	0	0	0	0
FL (n=25)	Total	750	526	497	669	695	767
23	Associate	695	498	476	639	665	756
2	Baccalaureate	55	28	21	30	30	11
GA (n=15)	Total	390	260	270	272	292	275
11	Associate	245	167	189	184	208	197
3	Baccalaureate	95	83	75	44	43	34
1	Masters	50	10	6	0	0	0
HI (n=1)	Total	16	16	12	16	17	16
1	Associate	16	16	12	16	17	16
0	Baccalaureate	0	0	0	0	0	0

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State (# of programs in 2013)	Degree	2013 Maximum Annual Enroll Capacity	2013 New Enrollments (N=444)	2012 New Enrollments (N=450)	2011 New Enrollments (N=446)	2010 New Enrollments (N=433)	2009 New Enrollments (N=433)
IA (n=6)	Total	128	87	97	96	111	97
6	Associate	128	87	97	96	111	97
0	Baccalaureate	0	0	0	0	0	0
ID (n=3)	Total	80	50	56	43	74	70
2	Associate	55	28	32	43	74	70
1	Baccalaureate	25	22	24	0	0	0
IL (n=14)	Total	409	279	288	303	317	335
12	Associate	361	255	262	278	293	314
1	Baccalaureate	24	5	5	25	24	21
1	Masters	24	19	21	278	293	314
IN (n=11)	Total	235	211	206	222	232	213
10	Associate	205	181	176	193	202	183
1	Baccalaureate	30	30	30	29	30	30
KS (n=9)	Total	192	132	139	130	142	112
8	Associate	168	123	121	116	124	103
1	Baccalaureate	24	9	18	14	18	9
KY (n=13)	Total	262	207	236	230	220	171
12	Associate	247	192	216	216	205	160
1	Baccalaureate	15	15	20	14	15	11
LA (n=11)	Total	193	122	129	138	150	118
9	Associate	166	106	109	106	129	96
2	Baccalaureate	27	16	20	32	21	22
MA (n=7)	Total	124	113	107	101	125	118
7	Associate	124	113	107	101	125	118
0	Baccalaureate	0	0	0	0	0	0
MD (n=8)	Total	173	145	156	156	157	161
6	Associate	133	105	120	123	133	122
2	Baccalaureate	40	40	36	33	24	39
ME (n=2)	Total	34	33	31	32	37	34
2	Associate	34	33	31	32	37	34
0	Baccalaureate	0	0	0	0	0	0
MI (n=13)	Total	337	299	269	292	379	359
13	Associate	337	299	269	292	379	359
0	Baccalaureate	0	0	0	0	0	0
MN (n=5)	Total	123	90	97	100	99	91
3	Associate	83	57	68	74	75	64
2	Baccalaureate	40	33	29	26	24	27

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State (# of programs in 2013)	Degree	2013 Maximum Annual Enroll Capacity	2013 New Enrollments (N=444)	2012 New Enrollments (N=450)	2011 New Enrollments (N=446)	2010 New Enrollments (N=433)	2009 New Enrollments (N=433)
MO (n=12)	Total	417	160	189	208	241	243
10	Associate	393	149	175	193	228	230
2	Baccalaureate	24	11	14	15	13	13
MS (n=8)	Total	162	118	119	133	135	120
8	Associate	162	118	119	133	135	120
0	Baccalaureate	0	0	0	0	0	0
MT (n=2)	Total	31	25	27	21	28	18
2	Associate	31	25	27	21	28	18
0	Baccalaureate	0	0	0	0	0	0
NC (n=14)	Total	296	230	234	240	260	267
14	Associate	296	230	234	240	260	267
0	Baccalaureate	0	0	0	0	0	0
ND (n=3)	Total	36	23	23	19	16	22
0	Associate	0	0	0	0	0	0
2	Baccalaureate	24	21	23	10	12	12
1	Masters	12	2	0	0	0	0
NE (n=4)	Total	98	63	79	79	60	83
3	Associate	83	56	72	70	54	72
1	Baccalaureate	15	7	7	9	6	11
NH (n=1)	Total	16	10	5	12	11	13
1	Associate	16	10	5	12	11	13
0	Baccalaureate	0	0	0	0	0	0
NJ (n=7)	Total	274	136	142	133	152	128
5	Associate	202	119	129	107	125	112
2	Baccalaureate	72	17	13	26	27	16
NM (n=6)	Total	173	112	109	87	112	94
6	Associate	173	112	109	87	112	94
0	Baccalaureate	0	0	0	0	0	0
NV (n=3)	Total	187	104	105	143	168	137
3	Associate	187	104	105	143	168	137
0	Baccalaureate	0	0	0	0	0	0
NY (n=14)	Total	500	351	355	339	362	325
11	Associate	426	286	286	285	289	263
3	Baccalaureate	74	65	69	54	73	62
OH (n=22)	Total	588	435	473	488	510	505
18	Associate	496	358	386	399	423	423
4	Baccalaureate	92	77	87	89	87	82

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State (# of programs in 2013)	Degree	2013 Maximum Annual Enroll Capacity	2013 New Enrollments (N=444)	2012 New Enrollments (N=450)	2011 New Enrollments (N=446)	2010 New Enrollments (N=433)	2009 New Enrollments (N=433)
OK (n=7)	Total	157	98	110	107	121	120
7	Associate	157	98	110	107	121	120
0	Baccalaureate	0	0	0	0	0	0
OR (n=4)	Total	119	87	124	98	102	99
3	Associate	94	69	104	84	87	84
1	Baccalaureate	25	18	20	14	15	15
PA (n=26)	Total	695	423	404	459	483	423
21	Associate	592	328	325	374	403	350
5	Baccalaureate	103	95	79	25	17	15
RI (n=2)	Total	64	54	57	15	21	26
2	Associate	64	54	57	15	21	26
0	Baccalaureate	0	0	0	0	0	0
SC (n=7)	Total	161	128	133	140	132	132
7	Associate	161	128	133	140	132	132
0	Baccalaureate	0	0	0	0	0	0
SD (n=2)	Total	24	23	23	24	20	16
2	Associate	24	23	23	24	20	16
0	Baccalaureate	0	0	0	0	0	0
TN (n=11)	Total	340	214	242	233	245	207
8	Associate	286	158	192	176	194	157
3	Baccalaureate	54	56	50	57	51	50
TX (n=36)	Total	1,208	924	853	773	838	820
31	Associate	1,071	799	780	664	717	711
5	Baccalaureate	137	125	73	109	121	109
UT (n=7)	Total	530	323	368	396	333	476
3	Associate	426	274	340	351	281	440
4	Baccalaureate	104	49	28	45	52	36
VA (n=8)	Total	223	173	158	234	231	168
5	Associate	155	131	125	206	205	141
3	Baccalaureate	68	42	33	28	26	27
VT (n=1)	Total	27	9	19	18	20	19
1	Associate	27	9	19	18	20	19
0	Baccalaureate	0	0	0	0	0	0
WA (n=5)	Total	152	117	123	121	132	125
4	Associate	124	90	123	121	132	125
1	Baccalaureate	28	27	0	0	0	0

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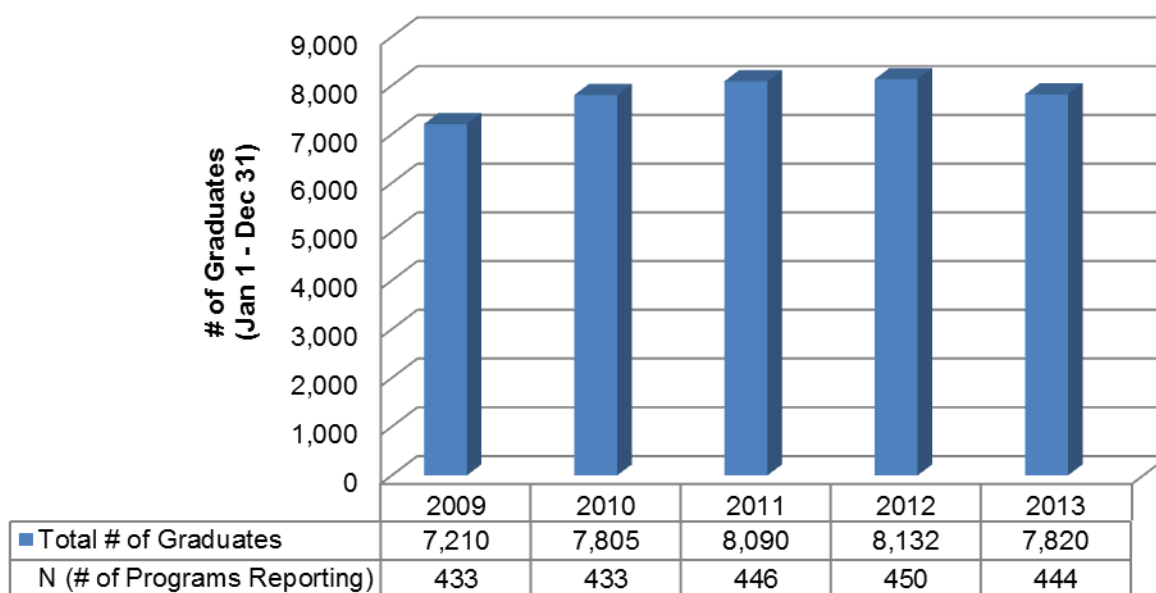
State (# of programs in 2013)	Degree	2013 Maximum Annual Enroll Capacity	2013 New Enrollments (N=444)	2012 New Enrollments (N=450)	2011 New Enrollments (N=446)	2010 New Enrollments (N=433)	2009 New Enrollments (N=433)
WI (n=7)	Total	156	128	133	153	146	136
7	Associate	156	128	133	153	146	136
0	Baccalaureate	0	0	0	0	0	0
WV (n=6)	Total	139	72	108	85	114	103
4	Associate	109	59	93	66	104	77
2	Baccalaureate	30	13	15	19	10	26
WY (n=1)	Total	15	11	12	15	13	9
1	Associate	15	11	12	15	13	9
0	Baccalaureate	0	0	0	0	0	0

Total Graduates

Figure 10 provides the total number of graduates during the time period reported (i.e., January 1, 2009 through December 31, 2013). Graduation numbers include those students that graduated on-time as well as students graduating after their expected graduation date.

There were 7,820 graduates in 2013. This is a 3.8% decrease compared to 2012 but an 8.5% increase compared to 2009. This is the first decrease in total graduates observed over the past 5 years. The mean number of graduates per program was 18 in 2013 through 2010, and 16 in 2009. The median number of graduates was 14 in 2013, 15 in 2012, 14 in 2011, 13 in 2010, and 14 in 2009.

Figure 10 - Total RC Program and Satellite Graduates between 2009 and 2013



Not included in **Figure 10** are the graduate data for the 7 sleep specialist program options. There were a total of 40 graduates in 2013. This is a 5.3% decrease compared to 2012 and no change compared to 2009. The mean number of graduates per program option was 6 in 2013, 5 in 2012, and 6 in 2011, 2010, and 2009. The median number of graduates was 5 in 2013, 3 in 2012, 5 in 2011, 3 in 2010, and 4 in 2009.

RC Graduates by Degree Offered

Table 17 – RC Graduates by Degree Offered between 2009 and 2013

Degree Offered	2013 Graduates (N=444)		2012 Graduates (N=450)		2011 Graduates (N=446)		2010 Graduates (N=433)		2009 Graduates (N=433)	
	Total	Mean	Total	Mean	Total	Mean	Total	Mean	Total	Mean
Associate	7,017	18	7,289	19	7,362	19	7,010	18	6,441	17
Associate & Baccalaureate					30	10	33	11	33	11
Baccalaureate	801	13	843	14	647	13	716	14	688	13
Baccalaureate & Masters					51	17	46	15	48	16
Masters	2	N/A	N/A	N/A						

Table 17 shows the number of respiratory care graduates in relation to the degree offered. There were 7,820 graduates in 2013. The 380 programs offering associate degrees is the largest category and accounted for 89.7% of the total number of graduates in 2013. This is a 3.7% decrease compared to 2012, but an 8.9% increase compared to 2009. The mean number of graduates per program for this category was 18 in 2013, 19 in 2012 and 2011, 18 in 2010, and 17 in 2009. The median number of graduates per program for this category was 14 in 2013, 15 in 2012, 14 in 2011, 13 in 2010, and 14 in 2009.

The 61 programs offering baccalaureate degrees accounted for 10.2% of the total number of graduates in 2013. This is a 5.0% decrease compared to 2012, but a 16.4% increase in graduates for this category compared to 2009. The mean number of graduates per program for this category was 13 in 2013, 14 in 2012, 13 in 2011, 14 in 2010, and 13 in 2009. The median number of graduates per program for this category was 14 in 2013, 15 in 2012, 11 in 2011 and 2010, and 12 in 2009.

The graduate data for the 3 programs offering master's degrees could not be tabulated for the 2013 RCS. **Note: The programs that offered more than one degree type (i.e., Associate and Baccalaureate or Baccalaureate and Masters) were separated in 2013 and each degree offered was assigned a different CoARC number, so the data no longer report combined degrees as was the case in the 2012 and 2011 Reports on Accreditation.*

RC Graduates by Institutional Type

Table 18 –RC Graduates by Institutional Type between 2009 and 2013

Institutional Type	2013 Graduates (N=444)		2012 Graduates (N=450)		2011 Graduates (N=446)		2010 Graduates (N=433)		2009 Graduates (N=433)	
	Total	Mean	Total	Mean	Total	Mean	Total	Mean	Total	Mean
Community or Junior College	3,953	16	4,151	16	4,088	16	4,082	16	3,940	16
Four-Year College or University	1,743	17	1,579	16	1,476	16	1,429	15	1,332	14
Technical or Vocational School	1,746	24	2,003	26	2,173	29	1,973	26	1,606	21
Academic HSC/Medical Center	134	11	152	13	111	9	118	10	122	10
Career or Technical College	115	19	151	22	179	20	178	20	192	21
U.S. Military	129	65	96	48	63	32	25	13	18	9

Table 18 shows the number of respiratory care graduates in relation to the institutional type. The 251 programs offered in community or junior colleges is the largest category and accounted for 50.5% of the total number of respiratory care graduates in 2013. This is a 4.8% decrease compared to 2012, but a 0.3% increase compared to 2009. The mean number of graduates per program for this category was 16 in 2013 through 2009.

The 101 programs offered in four-year colleges or universities accounted for 22.3% of the total number of graduates in 2013. This is a 10.4% increase compared to 2012 and a 30.9% increase compared to 2009. The mean number of graduates per program was 17 in 2013, 16 in 2012 and 2011, 15 in 2010, and 14 in 2009. The median was 14 in 2013, 13 in 2012, 11 in 2011 and 2010, and 12 in 2009.

The 72 programs offered in technical or vocational schools accounted for 22.3% of the total number of graduates in 2013. This is a 12.8% decrease compared to 2012, but an 8.7% increase compared to 2009. The mean number of graduates per program was 24 in 2013, 26 in 2012, 29 in 2011, 26 in 2010, and 21 in 2009. The median was 17 in 2013 and 2012, 19 in 2011, and 12 in 2010 and 2009.

The 12 programs offered in academic HSC/Medical Centers accounted for 1.7% of the total number of graduates in 2013. This is an 11.8% decrease compared to 2012, but a 9.8% increase compared to 2009. The mean number of graduates per program was 11 in 2013, 13 in 2012, 9 in 2011, and 10 in 2010 and 2009. The median was 12 in 2013 and 2012, 8 in 2011, 6 in 2010, and 8 in 2009.

The 6 programs offered in career or technical colleges accounted for 1.5% of the total number of graduates in 2013. This is a 23.8% decrease compared to 2012 and a 40.1% decrease compared to 2009. The mean number of graduates per program was 19 in 2013, 22 in 2012, 20 in 2011 and 2010, and 21 in 2009. The median was 13 in 2013 and 2012, 12 in 2011, and 11 in 2010 and 2009.

The 2 programs offered in the U.S. military accounted for 1.6% of the total number of graduates in 2013. This is a 34.4% increase compared to 2012 and a 616.7% increase compared to 2009. The mean and median number of graduates per program was 65 in 2013, 48 in 2012, 32 in 2011, 13 in 2010, and 9 in 2009.

RC Graduates by Institutional Control/Funding

Table 19 –RC Graduates by Institutional Control/Funding between 2009 and 2013

Institutional Control/Funding	2013 Graduates (N=444)		2012 Graduates (N=450)		2011 Graduates (N=446)		2010 Graduates (N=433)		2009 Graduates (N=433)	
	Total	Mean	Total	Mean	Total	Mean	Total	Mean	Total	Mean
Public/Not-For-Profit	5,223	15	5,440	15	5,300	15	5,228	15	5,126	15
Private/For-Profit (Proprietary)	1,968	35	1,796	32	2,370	38	2,190	35	1,717	28
Private/Not-For-Profit	500	15	800	21	357	11	362	11	349	11
Federal Government	129	65	96	48	63	32	25	13	18	9

Table 19 shows the number respiratory care graduates in relation to the institutional control/funding. The 352 programs controlled/ funded by public/not-for-profit institutions is the largest category and accounted for 66.8% of the total number of respiratory care graduates in 2012. This is a 4.0% decrease compared to 2012, but a 1.9% increase compared to 2009. The mean number of graduates per program was 15 in 2013 through 2009. The median was 14 in 2013, 10 in 2012 and 2011, 9 in 2010, and 7 in 2009.

The 57 programs controlled/funded by private/for-profit (proprietary) institutions accounted for 25.2% of the total number of respiratory care graduates in 2013. This is a 9.6% increase compared to 2012 and a 14.6% increase compared to 2009. The mean number of graduates per program was 35 in 2013, 32 in 2012, 38 in 2011, 35 in 2010, and 28 in 2009. The median was 25 in 2013, 26 in 2012, 30 in 2011, 18 in 2010, and 16 in 2009.

The 33 programs controlled/funded by private/not-for-profit institutions accounted for 6.4% of the total number of respiratory care graduates in 2013. This is a 37.5% decrease compared to 2012, but a 43.3% increase compared to 2009. The mean number of graduates per program was 15 in 2013, 21 in 2012 and 11 in 2011, 2010, and 2009. The median was 12 in 2013 and 2012, 9 in 2011, and 8 in 2010 and 2009.

The 2 programs controlled/ funded by the federal government accounted for 1.6% of the total number of graduates in 2013. This is a 34.4% increase compared to 2012 and a 616.7% increase compared to 2009. The mean and median number of graduates per program was 65 in 2013, 48 in 2012, 32 in 2011, 13 in 2010, and 9 in 2009.

RC Graduates by State (including D.C.) and Degree

Table 20 provides data on respiratory care graduates for 2009-2013 by state and degree offered. As expected, California graduated the largest number of graduates (17.8% of total) in 2013.

Table 20 –RC Graduates by State (including D.C.) and Degree between 2009 and 2013

State (# of programs in 2013)	Degree	2013 Graduates (N=444)	2012 Graduates (N=450)	2011 Graduates (N=446)	2010 Graduates (N=433)	2009 Graduates (N=433)
AL (n=6)	Total	129	104	129	124	112
4	Associate	87	59	80	79	77
2	Baccalaureate	42	45	49	45	35
AR (n=12)	Total	89	98	88	62	61
9	Associate	77	75	66	48	40
3	Baccalaureate	12	23	22	14	21
AZ (n=7)	Total	199	298	338	340	335
7	Associate	199	298	338	340	335
0	Baccalaureate	0	0	0	0	0
CA (n=38)	Total	1,395	1,476	1,284	1,277	1,015
37	Associate	1,382	1,463	1,277	1,269	1,004
1	Baccalaureate	13	13	7	8	11
CO (n=4)	Total	81	110	108	116	80
4	Associate	81	110	108	116	80
0	Baccalaureate	0	0	0	0	0
CT (n=5)	Total	79	81	64	64	63
4	Associate	68	66	53	50	57
1	Baccalaureate	11	15	11	14	6
DC (n=1)	Total	5	8	8	11	20
1	Associate	5	8	8	11	20
0	Baccalaureate	0	0	0	0	0
DE (n=2)	Total	23	27	26	25	15
2	Associate	23	27	26	25	15
0	Baccalaureate	0	0	0	0	0
FL (n=25)	Total	421	460	668	484	444
23	Associate	400	435	660	473	424
2	Baccalaureate	21	25	8	11	20
GA (n=15)	Total	213	231	237	238	193
11	Associate	143	159	176	166	120
3	Baccalaureate	70	72	27	37	37
1	Masters	N/A	0	34	35	36
HI (n=1)	Total	13	15	12	11	14
1	Associate	13	15	12	11	14
0	Baccalaureate	0	0	0	0	0

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State (# of programs in 2013)	Degree	2013 Graduates (N=444)	2012 Graduates (N=450)	2011 Graduates (N=446)	2010 Graduates (N=433)	2009 Graduates (N=433)
IA (n=6)	Total	69	79	73	66	69
6	Associate	69	79	73	66	69
0	Baccalaureate	0	0	0	0	0
ID (n=3)	Total	35	58	59	32	36
2	Associate	19	36	59	32	36
1	Baccalaureate	16	22	0	0	0
IL (n=14)	Total	230	248	227	245	252
12	Associate	209	227	219	245	252
1	Baccalaureate	21	21	8	0	0
1	Masters	N/A	0	8	0	0
IN (n=11)	Total	175	171	184	174	163
10	Associate	152	150	158	146	139
1	Baccalaureate	23	21	26	28	24
KS (n=9)	Total	118	109	92	83	110
8	Associate	102	95	85	73	103
1	Baccalaureate	16	14	7	10	7
KY (n=13)	Total	179	174	139	160	170
12	Associate	167	163	127	146	158
1	Baccalaureate	12	11	12	14	12
LA (n=11)	Total	95	113	112	87	88
9	Associate	77	98	101	71	70
2	Baccalaureate	18	15	11	16	18
MA (n=7)	Total	84	102	88	105	73
7	Associate	84	102	88	105	73
0	Baccalaureate	0	0	0	0	0
MD (n=8)	Total	122	122	127	109	96
6	Associate	91	100	91	86	69
2	Baccalaureate	31	22	36	23	27
ME (n=2)	Total	21	26	24	24	21
2	Associate	21	26	24	24	21
0	Baccalaureate	0	0	0	0	0
MI (n=13)	Total	204	244	273	278	236
13	Associate	204	244	273	278	236
0	Baccalaureate	0	0	0	0	0
MN (n=5)	Total	77	79	57	65	70
3	Associate	52	57	43	46	48
2	Baccalaureate	25	22	14	19	22
MO (n=12)	Total	156	154	173	173	135
10	Associate	146	143	159	161	122
2	Baccalaureate	10	11	14	12	13

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State (# of programs in 2013)	Degree	2013 Graduates (N=444)	2012 Graduates (N=450)	2011 Graduates (N=446)	2010 Graduates (N=433)	2009 Graduates (N=433)
MS (n=8)	Total	106	96	88	95	91
8	Associate	106	96	88	95	91
0	Baccalaureate	0	0	0	0	0
MT (n=2)	Total	18	18	25	18	14
2	Associate	18	18	25	18	14
0	Baccalaureate	0	0	0	0	0
NC (n=14)	Total	162	184	176	182	165
14	Associate	162	184	176	182	165
0	Baccalaureate	0	0	0	0	0
ND (n=3)	Total	18	14	18	22	23
0	Associate	0	0	0	0	0
2	Baccalaureate	16	14	9	11	11
1	Masters	2	0	9	11	12
NE (n=4)	Total	58	66	46	57	47
3	Associate	53	58	40	52	44
1	Baccalaureate	5	8	6	5	3
NH (n=1)	Total	11	9	10	11	11
1	Associate	11	9	10	11	11
0	Baccalaureate	0	0	0	0	0
NJ (n=7)	Total	131	109	116	93	106
5	Associate	115	109	97	77	87
2	Baccalaureate	16	0	19	16	19
NM (n=6)	Total	111	77	87	73	79
6	Associate	111	77	87	73	79
0	Baccalaureate	0	0	0	0	0
NV (n=3)	Total	79	80	128	107	110
3	Associate	79	80	128	107	110
0	Baccalaureate	0	0	0	0	0
NY (n=14)	Total	231	284	247	244	241
11	Associate	180	217	192	183	181
3	Baccalaureate	51	67	55	61	60
OH (n=22)	Total	377	375	386	383	385
18	Associate	303	298	305	306	311
4	Baccalaureate	74	77	81	77	74
OK (n=7)	Total	108	88	99	104	91
7	Associate	108	88	99	104	91
0	Baccalaureate	0	0	0	0	0

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State (# of programs in 2013)	Degree	2013 Graduates (N=444)	2012 Graduates (N=450)	2011 Graduates (N=446)	2010 Graduates (N=433)	2009 Graduates (N=433)
OR (n=4)	Total	83	85	92	64	61
3	Associate	69	74	92	49	45
1	Baccalaureate	14	11	0	15	16
PA (n=26)	Total	316	343	292	293	338
21	Associate	259	292	235	233	280
5	Baccalaureate	57	51	46	43	44
RI (n=2)	Total	32	15	24	15	20
2	Associate	32	15	24	15	20
0	Baccalaureate	0	0	0	0	0
SC (n=7)	Total	78	85	92	77	79
7	Associate	78	85	92	77	79
0	Baccalaureate	0	0	0	0	0
SD (n=2)	Total	15	20	15	13	21
2	Associate	15	20	15	13	21
0	Baccalaureate	0	0	0	0	0
TN (n=11)	Total	186	187	174	134	144
8	Associate	134	139	131	93	102
3	Baccalaureate	52	48	43	41	42
TX (n=36)	Total	681	650	680	632	697
31	Associate	596	553	591	540	603
5	Baccalaureate	85	97	89	92	94
UT (n=7)	Total	383	287	241	331	176
3	Associate	357	244	224	268	155
4	Baccalaureate	26	43	17	63	21
VA (n=8)	Total	124	127	131	146	126
5	Associate	93	94	112	126	97
3	Baccalaureate	31	33	19	20	29
VT (n=1)	Total	14	14	10	14	18
1	Associate	14	14	10	14	18
0	Baccalaureate	0	0	0	0	0
WA (n=5)	Total	102	101	94	114	84
4	Associate	83	101	94	114	84
1	Baccalaureate	19	0	0	0	0
WI (n=7)	Total	106	109	116	109	100
7	Associate	106	109	116	109	100
0	Baccalaureate	0	0	0	0	0
WV (n=6)	Total	67	88	88	87	78
4	Associate	53	73	68	77	60
2	Baccalaureate	14	15	20	10	18
WY (n=1)	Total	11	7	7	7	11
1	Associate	11	7	7	7	11
0	Baccalaureate	0	0	0	0	0

Programmatic Attrition

Programmatic attrition is defined by the CoARC as, “*Students formally enrolled in a respiratory care program that began fundamental (non-survey) respiratory care core coursework and have left for academic or non-academic reasons.*”⁴ Students who leave the program before the fifteenth calendar day from the beginning of the term when fundamental respiratory care core coursework commenced, and those students transferring to satellites, are not included in program attrition. Fundamental respiratory care core coursework is defined as ‘professional coursework progressing toward completion of the respiratory care program’, and the commencement of this coursework determines when students are formally admitted into the program. Programmatic enrollment, as defined by the CoARC, begins when the respiratory student enrolls in the first core respiratory care course; i.e. a non-survey course available only to students matriculated in the respiratory care program. This may be different than the enrollment or matriculation date determined by the institution. This definition is used by the CoARC for calculating programmatic attrition, on-time graduation rates and maximum annual enrollment. *Academic attrition* is due to failure to attain grades or acquire other programmatic competencies (e.g. ethics, professionalism, behavioral) or for violation of an academic policy that results in a student’s expulsion from the program. *Non-Academic* attrition is due to reasons other than those defined as Academic (financial hardship, medical, family, deployment, changing course of study, relocation, etc.).

Table 21 – RC Programmatic Attrition for 2011 RCS through 2014 RCS					
Reporting Years (# of programs submitting)	Mean (SD)	Maximum Value	Minimum Value	CoARC Threshold	# of Programs Above Threshold
2011 RCS Data from 1/1/08 to 12/31/10 (N=426)	17.0% (10.7)	52.0%	0%	40%	13
2012 RCS Data from 1/1/09 to 12/31/11 (N=434)	17.4% (10.7)	55.0%	0%	40%	8
2013 RCS Data from 1/1/10 to 12/31/12 (N=442)	19.1% (10.9)	50.9%	0%	40%	14
2014 RCS Data from 1/1/11 to 12/31/13 (N=436)	19.1% (11.4)	62.5%	0%	40%	12

2014 RCS data on programmatic attrition (**Table 21**) show a total of 436 programs reporting programmatic attrition rates. Eight programs did not have any attrition data to report for the 2014 RCS. The mean attrition rate was 19.1% with the highest rate of 52.5% (n=1) and the lowest rate of 0% (n=16). The median attrition rate for the 2014 RCS was 18.2%. A total of 12 programs (2.8% of total) reported attrition rates above the CoARC-established threshold of 40%. As per CoARC Standard 3.14, these programs began a dialogue with the CoARC to develop an appropriate plan of action (i.e., a progress report) for program improvement. When compared to the 2013 RCS data on programmatic attrition rates, the 2014 RCS data shows no change in the mean attrition rate. The number of programs reporting the highest attrition rate remained at 1. The number of programs reporting the lowest attrition (0%) decreased by 3.

⁴ The attrition definition in use at the time of the submission of the 2011 RCS was as follows: “*Students formally enrolled in a respiratory care program that began fundamental (non-survey) respiratory care core coursework and have left for academic or non-academic reasons.* Students who leave the program with a full tuition refund, and those students transferring to satellites are not included in program attrition. Programmatic enrollment, as defined by CoARC, begins at the point at which the respiratory student enrolls in the first core respiratory care course (non-survey) that is available only to students matriculated in the respiratory care program.”

Not included in **Table 21** are the attrition data for the 7 sleep specialist program options. There were a total of 7 program options reporting attrition data in the 2014 RCS. The mean attrition rate was 5.2% (8.5% for the 2013 RCS) with the highest rate of 16.7% (16.7% for the 2013 RCS) and the lowest rate of 0% (same for the 2013 RCS). The median attrition rate was 0%. Only one program option reported attrition rates above the CoARC-established threshold of 40%.

Attrition by Degree Offered, Institutional Type, and Institutional Control/Funding

Table 22 – RC Programmatic Attrition by Degree Offered for 2011 RCS through 2014 RCS

Degree Offered (N=436)	2014 RCS Mean Attrition (# of programs above CoARC threshold)	Degree Offered (N=442)	2013 RCS Mean Attrition (# of programs above CoARC threshold)	Degree Offered (N=434)	2012 RCS Mean Attrition (# of programs above CoARC threshold)	Degree Offered (N=426)	2011 RCS Mean Attrition (# of programs above CoARC threshold)
Associate (n=375)	20.1% (10)	Associate (n=382)	20.0% (12)	Associate only (n=377)	18.1% (8)	Associate only (n=366)	17.8% (13)
				Associate & Baccalaureate (n=3)	19.9%	Associate & Baccalaureate (n=9)	8.5%
Baccalaureate (n=58)	13.4% (2)	Baccalaureate (n=57)	13.5% (2)	Baccalaureate only (n=51)	12.0%	Baccalaureate only (n=49)	12.3%
Masters (n=3)	8.3%	Masters (n=3)	11.1%	Baccalaureate & Masters (n=3)	17.1%	Baccalaureate & Masters (n=2)	21.1%

Table 22 compares programmatic attrition data in relation to the degree offered for the 2011 through 2014 RCSs. RC Programs offering the associate degree had the highest mean attrition rate (20.1%) in the 2014 RCS while RC Programs offering the master's degree had the lowest (8.3%). For the 2014 RCS, the median attrition rate was 19.5% for associate degree programs, 12.2% for baccalaureate programs, and 0.0% for master's programs. (*Note: The programs that offered more than one degree type (i.e., Associate and Baccalaureate or Baccalaureate and Masters) were separated in 2013 and each degree offered was assigned a different CoARC number, so the data no longer report combined degrees as was the case in the 2012 and 2011 Reports on Accreditation.*)

For the 2014 RCS, 7 of the 12 programs above the CoARC threshold of 40% offered the AAS degree and the other three offered the AS degree. For the 2013 RCS, 5 of the 14 programs above the CoARC threshold of 40% offered the AAS degree and the other seven offered the AS degree. For the 2012 RCS, 4 of the 8 programs above the CoARC threshold of 40% offered the AAS degree and the other four offered the AS degree. For the 2011 RCS, 6 of the 13 programs above the CoARC threshold of 40% offered the AAS degree, 6 offered the AS degree, and 1 offered the AST degree.

Table 23 – RC Programmatic Attrition by Institutional Type for 2011 RCS through 2014 RCS

Institutional Type (N=436)	2014 RCS	Institutional Type (N=442)	2013 RCS	Institutional Type (N=434)	2012 RCS	Institutional Type (N=426)	2011 RCS
	Mean Attrition (# of programs above CoARC threshold)		Mean Attrition (# of programs above CoARC threshold)		Mean Attrition (# of programs above CoARC threshold)		Mean Attrition (# of programs above CoARC threshold)
Four-Year College or University (n=98)	14.6% (1)	Four-Year College or University (n=95)	15.1%	Four-Year College or University (n=93)	13.4%	Four-Year College or University (n=91)	13.3%
Career or Technical College (n=6)	17.6%	Career or Technical College (n=7)	16.6%	Career or Technical College (n=9)	16.1%	Career or Technical College (n=7)	12.7%
Community or Junior College (n=248)	20.6% (8)	Community or Junior College (n=252)	20.3% (9)	Community College or Junior College (n=247)	18.4% (6)	Community or Junior College (n=246)	18.1% (9)
Academic HSC/Medical Center (n=12)	23.4% (2)	Academic HSC/Medical Center (n=12)	20.6% (2)	Academic HSC/Medical Center (n=12)	19.7%	Academic HSC/Medical Center (n=12)	24.3% (1)
Technical or Vocational School (n=70)	19.6% (1)	Technical or Vocational School (n=74)	20.6% (3)	Technical or Vocational School (n=71)	19.1% (2)	Technical or Vocational School (n=68)	17.7% (3)
U.S. Military (n=2)	22.8%	U.S. Military (n=2)	10.2%	U.S. Military (n=2)	5.6%	U.S. Military (n=2)	1.6%

Table 23 compares programmatic attrition data in relation to institutional type for the 2011 RCS, through the 2014 RCS. RC Programs located in Four-Year Colleges or Universities and Technical or Vocational Schools had a decrease in mean attrition rate in the 2014 RCS compared to 2013 RCS data. RC Programs located in Academic HSC/Medical Centers continued to demonstrate the highest mean attrition rate (23.4%) in the 2014 RCS. RC Programs located Four-Year Colleges or Universities had the lowest mean attrition rate of 14.6% for the 2014 RCS. For the 2014 RCS, the median attrition rate was 13.2% for Four-Year Colleges or Universities, 18.1% for Career or Technical Colleges, 19.9% for Community Colleges or Junior Colleges, 23.3% for Academic HSC/Medical Centers, and 19.7% for Technical or Vocational Schools.

For the 2014 RCS, 8 of the 12 programs above the CoARC threshold of 40% were located at a Community or Junior College. Two programs were located at an Academic HSC/Medical Center. One program was located at a Technical/Vocational School and one was located at a Four-Year College/University. For the 2013 RCS, 9 of the 14 programs above the CoARC threshold of 40% were located at a Community or Junior College. Three programs were located at a Technical/Vocational School. The remaining 2 programs were located at an Academic HSC/Medical Center. For the 2012 RCS, 6 of the 8 programs above the CoARC threshold of 40% were located at a Community or Junior College. The remaining 2 programs were located at a Technical or Vocational School. For the 2011 RCS, 9 of the 13 programs above the CoARC threshold of 40% were located at a Community or Junior College. One program was located at an Academic HSC/Medical Center. The remaining 3 programs were located at a Technical or Vocational School.

Table 24 – RC Programmatic Attrition by Institutional Control for 2011 RC through 2014 RCS

Institutional Control (N=436)	2014 RCS	Institutional Control (N=442)	2013 RCS	Institutional Control (N=434)	2012 RCS	Institutional Control (N=426)	2011 RCS
	Mean Attrition (# of programs above CoARC threshold)		Mean Attrition (# of programs above CoARC threshold)		Mean Attrition (# of programs above CoARC threshold)		Mean Attrition (# of programs above CoARC threshold)
Public/Not-For-Profit (n=346)	19.6% (10)	Public/Not-For-Profit (n=348)	19.3% (11)	Public/Not-For-Profit (n=345)	17.4% (7)	Public/Not-For-Profit (n=340)	17.3% (12)
Private/For-Profit (Proprietary) (n=55)	19.2% (1)	Private/For-Profit (Proprietary) (n=54)	21.0% (3)	Private/For-Profit (Proprietary) (n=55)	19.7% (1)	Private/For-Profit (Proprietary) (n=52)	17.7% (1)
Private/Not-For-Profit (n=33)	14.4% (1)	Private/Not-For-Profit (n=38)	15.1%	Private/Not-For-Profit (n=32)	14.2%	Private/Not-For-Profit (n=32)	13.2%
Federal Government (n=2)	22.8%	Federal Government (n=2)	10.2%	Federal Government (n=2)	5.6%	Federal Government (n=2)	1.6%

Table 24 compares programmatic attrition data in relation to institutional control/funding for the 2011 through the 2014 RCS. RC programs in the public/not-for-profit sector and the federal government had an increase in mean attrition rate in the 2014 RCS compared to 2013 RCS data. RC programs controlled/funded by the federal government had the highest mean attrition rate, at 22.8% for the 2014 RCS. RC Programs controlled/funded by private/not-for-profit institutions had the lowest mean attrition rate at 14.4%. For the 2014 RCS, the median attrition rate was 18.8% for the public/not-for-profit sector, 18.4% for the private/for-profit (proprietary) sector, and 11.8% for the private/not-for-profit sector.

For the 2014 RCS, 10 of the 12 programs above the CoARC threshold of 40% were controlled and funded by Public/Not-For-Profit institutions. One program was controlled/funded by a Private/For-Profit (Proprietary) institution and one was controlled/funded by a Private/Not-For-Profit institution. For the 2013 RCS, 11 of the 14 programs above the CoARC threshold of 40% were controlled/funded by Public/Not-For-Profit institutions. The remaining three programs were controlled/funded by Private/For-Profit (Proprietary) institutions. For the 2012 RCS, 7 of the 8 programs above the CoARC threshold of 40% were controlled/funded by Public/Not-For-Profit institutions. The remaining program was controlled/funded by a Private/For-Profit (Proprietary) institution. For the 2011 RCS, 12 of the 13 programs above the CoARC threshold of 40% were controlled/funded by Public/Not-For-Profit institutions. The remaining program was controlled/funded by a Private/For-Profit (Proprietary) institution.

Attrition by Enrollment Size

The mean attrition for programs with annual enrollments of less than 20 students in 2013 was 18.7% (n=246). The median was 18.3% (SD=11.9). The mean attrition for programs with annual enrollments of 20 or greater students in 2013 was 19.7% (n=190). The median was 18.1% (SD = 10.7).

Positive (Job) Placement

Positive (job) placement is defined by the CoARC as “a graduate within the 3 year reporting period who is: a. employed utilizing skills as defined by the scope of practice within the respiratory care profession. (i.e. full- or part-time, or per diem), or b. enrolled full- or part-time in another degree program, or c. serving in the military.”⁵

Table 25 – RC Positive (Job) Placement for 2011 RCS through 2014 RCS					
Reporting Years (# of programs submitting)	Mean (SD)	Maximum Value	Minimum Value	CoARC Threshold	# of Programs Below Threshold
2011 RCS Data from 1/1/08 to 12/31/10 (N=399)	88.5% (12.7)	100%	0%	70%	21
2012 RCS Data from 1/1/09 to 12/31/11 (N=422)	86.2% (12.5)	100%	0%	70%	24
2013 RCS Data from 1/1/10 to 12/31/12 (N=422)	85.3% (11.7)	100%	13.8%	70%	41
2014 RCS Data from 1/1/11 to 12/31/13 (N=424)	84.6% (11.7)	100%	20.0%	70%	39

2014 RCS data on positive (job) placement (**Table 25**) show a total of 424 programs reporting positive placement rates. Twenty programs did not have any placement data to report for the 2014 RCS. The mean placement rate decreased to 84.6% with the highest rate of 100% (n = 36) and the lowest rate of 20.0% (n=1). The median placement rate for the 2014 RCS was 87.2%. A total of 39 programs (9.2% of total) reported placement rates below the CoARC established threshold of 70%. As per CoARC Standard 3.14, these programs began a dialogue with the CoARC to develop an appropriate plan of action (i.e., a progress report) for program improvement.

When compared to the 2013 RCS data on placement rates, the 2014 RCS data shows a 0.7% decrease in the mean placement rate. The number of programs reporting the lowest placement remained at 1, while the number of programs reporting the highest placement rate (100%) decreased from 64 (2011 RCS) to 42 (2012 RCS) to 35 (2013 RCS). The number of programs reporting placement rates below the CoARC-established threshold was 5.3% of total programs in the 2011 RCS, 5.7% in the 2012 RCS, and 9.7% in the 2013 RCS.

Not included in **Table 25** are the placement data for the 7 sleep specialist program options. There were a total of 7 program options reporting placement data in the 2014 RCS. The mean placement rate was 91.2% (median = 95.0%). The mean placement rate was 89.3% for the 2013 RCS and 96.5% for the 2012 RCS. The highest placement rate for the 2014 RCS was 100% (same for the 2013 and 2012 RCS) and the lowest rate of 66.7% (50.0% for the 2013 RCS and 90.9% for the 2012 RCS). Six of the 7 program options reported placement rates above the CoARC-established threshold of 70%.

⁵ This definition in use at the time of the submission of the 2011 RCS was as follows: “A graduate who within ten (10) months after graduation is: a. employed in respiratory care (i.e. full- or part-time, per diem, etc.), or b. enrolled full- or part-time in another degree program, or c. serving in the military, or d. employed in the polysomnography field (i.e. full- or part-time, per diem, etc. for graduates of the polysomnography option of programs offering the same).”

Placement by Degree Offered, Institutional Type, and Institutional Control/Funding

Table 26 – RC Positive (Job) Placement by Degree Offered for 2011 RCS though 2014 RCS

Degree Offered (N=424)	2014 RCS Mean Placement (# of programs below CoARC threshold)	Degree Offered (N=422)	2013 RCS Mean Placement (# of programs below CoARC threshold)	Degree Offered (N=422)	2012 RCS Mean Placement (# of programs below CoARC threshold)	Degree Offered (N=399)	2011 RCS Mean Placement (# of programs below CoARC threshold)
Associate (n=366)	83.5% (37)	Associate (n= 367)	84.2% (40)	Associate only (n=365)	85.2% (23)	Associate only (n=341)	87.7% (19)
				Associate & Baccalaureate (n=3)	94.4%	Associate & Baccalaureate (n=9)	96.9%
Baccalaureate (n=57)	91.7% (2)	Baccalaureate (n=55)	92.3% (1)	Baccalaureate only (n=51)	92.8% (1)	Baccalaureate only (n=48)	92.1% (2)
Masters (n=1)	100%	Masters (n=0)	N/A	Baccalaureate & Masters (n=3)	94.8%	Baccalaureate & Masters (n=1)	90.4%

Table 26 compares positive placement data in relation to the degree offered for the 2011 through 2014 RCSs. RC Programs offering a Baccalaureate degree and RC Programs offering Associate degree showed decreases in mean placement rates when compared to 2013 RCS data. RC Programs offering the Baccalaureate degree had the highest mean placement rate (91.7%) in this category for the 2014 RCS (not including the data from the one Master's degree program) while RC Programs offering the Associate degree continued to demonstrate the lowest mean placement rate at 83.5%. The median placement rate was 85.7% for associate degree programs and 94.7% for baccalaureate degree programs for the 2014 RCS. *Note: The programs that offered more than one degree type (i.e., Associate and Baccalaureate or Baccalaureate and Masters) were separated in 2013 and each degree offered was assigned a different CoARC number, so the data no longer report combined degrees as was the case in the 2012 and 2011 Reports on Accreditation.*

For the 2014 RCS, 37 of the 39 programs below the CoARC threshold of 70% offered the Associate degree (12 AAS degree programs and 25 AS degree programs). The remaining 2 programs offered the Baccalaureate degree. For the 2013 RCS, 40 of the 41 programs below the CoARC threshold of 70% offered the Associate degree (1 AOS degree program, 7 AAS degree programs and 32 AS degree programs). The remaining program offered the Baccalaureate degree. For the 2012 RCS, 23 of the 24 programs below the CoARC threshold of 70% offered the Associate degree (7 AAS degree programs and 16 AS degree programs). The remaining program offered the Baccalaureate degree. For the 2011 RCS, 19 of the 21 programs below the CoARC threshold of 70% offered the Associate degree (5 AAS degree programs, 13 AS degree programs, and 1 AOS degree program). The remaining 2 programs offered the Baccalaureate degree.

Table 27 – RC Positive (Job) Placement by Institutional Type for 2011 RCS through 2014 RCS

Institutional Type (N=424)	2014 RCS Mean Placement (# of programs below CoARC threshold)	Institutional Type (N=422)	2013 RCS Mean Placement (# of programs below CoARC threshold)	Institutional Type (N=422)	2012 RCS Mean Placement (# of programs below CoARC threshold)	Institutional Type (N=399)	2011 RCS Mean Placement (# of programs below CoARC threshold)
Four-Year College or University (n=95)	87.7% (9)	Four-Year College or University (n=90)	88.6% (4)	Four-Year College or University (n=93)	89.5% (3)	Four-Year College or University (n=87)	91.4% (4)
Career or Technical College (n=6)	87.7%	Career or Technical College (n=7)	85.5%	Career or Technical College (n=8)	84.8% (1)	Career or Technical College (n=6)	89.0%
Community or Junior College (n=242)	84.5% (20)	Community or Junior College (n=245)	85.8% (20)	Community or Junior College (n=241)	87.2% (11)	Community or Junior College (n=238)	88.6% (11)
Academic HSC/Medical Center (n=11)	95.7%	Academic HSC/Medical Center (n=11)	94.0%	Academic HSC/Medical Center (n=12)	98.3%	Academic HSC/Medical Center (n=10)	97.7%
Technical or Vocational School (n=68)	78.5% (10)	Technical or Vocational School (n=67)	76.9% (17)	Technical or Vocational School (n=66)	75.9% (9)	Technical or Vocational School (n=57)	81.5% (6)
U.S. Military (n=2)	94.8%	U.S. Military (n=2)	97.3%	U.S. Military (n=2)	93.7%	U.S. Military (n=1)	100%

Table 27 compares positive placement data in relation to institutional type for the 2011 RCS through 2014 RCS. RC Programs located in the U.S. Military had the highest mean placement rate (94.8%) in the 2014 RCS. RC Programs located in Technical or Vocational Schools continued to demonstrate the lowest mean placement rate at 78.5%. RC Programs located in Four-Year Colleges or Universities, Community or Junior Colleges, and the U.S. Military all had a decrease in mean placement rate when compared to the 2013 RCS data. For the 2014 RCS, the median placement rate was 90.5% for Four-Year Colleges or Universities, 90.3% for Career or Technical Colleges, 86.8% for Community or Junior Colleges, 97.8% for Academic HSC/Medical Centers, and 79.0% for Technical or Vocational Schools.

For the 2014 RCS, 20 of the 39 programs below the CoARC threshold of 70% were located at a Community or Junior College. Ten programs were located at a Technical or Vocational School. Nine programs were located at a Four-Year College or University. For the 2013 RCS, 20 of the 41 programs below the CoARC threshold of 70% were located at a Community or Junior College. Seventeen programs were located at a Technical or Vocational School. Four programs were located at a Four-Year College or University. For the 2012 RCS, 11 of the 24 programs below the CoARC threshold of 70% were located at a Community or Junior College. Nine programs were located at a Technical or Vocational School. Three programs were located at a Four-Year College or University. The remaining program was located at a Career/Technical College. For the 2011 RCS, 11 of the 21 programs below the CoARC threshold of 70% were located at a Community or Junior College. Six programs were located at a Technical or Vocational School. The remaining 4 programs were located at a Four-Year College or University.

Table 28 – RC Positive (Job) Placement by Institutional Control for 2011 RCS through 2014 RCS

Institutional Control (N=424)	2014 RCS	Institutional Control (N=422)	2013 RCS	Institutional Control (N=422)	2012 RCS	Institutional Control (N=399)	2011 RCS
	Mean Placement (# of programs below CoARC threshold)		Mean Placement (# of programs below CoARC threshold)		Mean Placement (# of programs below CoARC threshold)		Mean Placement (# of programs below CoARC threshold)
Public/Not-For-Profit (n=340)	85.8% (22)	Public/Not-For-Profit (n=339)	86.8% (20)	Public/Not-For-Profit (n=338)	87.8% (12)	Public/Not-For-Profit (n=330)	89.4% (14)
Private/For-Profit (Proprietary) (n=51)	75.1% (12)	Private/For-Profit (Proprietary) (n=47)	73.3% (16)	Private/For-Profit (Proprietary) (n=50)	73.7% (9)	Private/For-Profit (Proprietary) (n=41)	79.6% (5)
Private/Not-For-Profit (n=31)	86.4% (5)	Private/Not-For-Profit (n=34)	85.6% (5)	Private/Not-For-Profit (n=32)	88.7% (3)	Private/Not-For-Profit (n=27)	89.4% (2)
Federal Government (n=2)	94.8%	Federal Government (n=2)	97.3%	Federal Government (n=2)	93.7%	Federal Government (n=1)	100%

Table 28 compares positive placement data in relation to institutional control/funding for the 2011 RCS through the 2014 RCS. RC Programs controlled/funded by the private sector (proprietary and not-for-profit) had an increase in mean placement rate when compared to the 2013 RCS data. RC Programs controlled/funded by the federal government also continued to demonstrate the highest mean placement rate at 94.8%. RC Programs controlled/funded by private/for-profit (proprietary) institutions continued to demonstrate the lowest mean placement rate at 75.1%. For the 2014 RCS, the median placement rate was 88.1% for the public/not-for-profit sector, 72.7% for the private/for-profit (proprietary) sector, and 89.1% for the private/not-for-profit sector.

For the 2014 RCS, 22 of the 39 programs below the CoARC threshold of 70% were controlled /funded by Public/Not-For-Profit institutions. Twelve programs were controlled/funded by Private/For-Profit (Proprietary) institutions. The remaining 5 programs were controlled/funded by Private/Not-For-Profit institutions. For the 2013 RCS, 20 of the 41 programs below the CoARC threshold of 70% were controlled/funded by Public/Not-For-Profit institutions. Sixteen programs were controlled/funded by Private/For-Profit (Proprietary) institutions. The remaining 5 programs were controlled/funded by Private/Not-For-Profit institutions. For the 2012 RCS, 12 of the 24 programs below the CoARC threshold of 70% were controlled/funded by Public/Not-For-Profit institutions. Nine programs were controlled/funded by Private/For-Profit (Proprietary) institutions. The remaining 3 programs were controlled/funded by Private/Not-For-Profit institutions. For the 2011 RCS, 14 of the 21 programs below the CoARC threshold of 70% were controlled/funded by Public/Not-For-Profit institutions. Five programs were controlled/funded by Private/For-Profit (Proprietary) institutions. The remaining 2 programs were controlled/funded by Private/Not-For-Profit institutions.

Placement by Enrollment Size

The mean placement for programs with annual enrollments of less than 20 students in 2013 was 85.7% (n=236). The median was 88.3% (SD=11.9). The mean placement for programs with annual enrollments of 20 or greater students in 2013 was 83.2% (n=188). The median was 84.8% (SD=11.4).

CRT Credentialing Success

CRT Credentialing Success is defined by the CoARC as, “the percentage of graduates who obtain the CRT credential upon successful completion of the NBRC Entry-Level Examination (ELE) independent of the number of ELE exam attempts.” The calculation is derived by dividing the total # of CRTs (numerator) by the # of graduates (denominator) in a three year reporting period (e.g., 2011-13). Since the 2012 RCS, this calculation excludes graduates who have previously earned the CRT credential prior to matriculation into the program (i.e., advanced placement)⁶. This calculation includes baccalaureate and graduate students earning the CRT credential in CoARC-accredited programs approved to grant special certificates of completion for CRT/RRT eligibility under CoARC policy 13.0. Note: This metric is not the same as the NBRC CRT pass rate which measures the number of candidates passing the exam divided by the number of candidates attempting the exam. The Entry-Level Certified Respiratory Therapist Examination administered by the NBRC is designed to objectively measure the essential knowledge, skills, and abilities required of entry-level respiratory therapists. Individuals holding the CRT credential are eligible to practice respiratory care as defined by their state’s practice act.

Table 29 – CRT Credentialing Success for 2011 RCS through 2014 RCS					
Reporting Years (# of programs submitting)	Mean (SD)	Maximum Value	Minimum Value	CoARC Threshold	# of Programs Below Threshold
2011 RCS Data from 1/1/08 to 12/31/10 (N=399)	93.1% (8.6)	100%	27.3%	80%	20
2012 RCS Data from 1/1/09 to 12/31/11 N=422)	92.1% (9.6)	100%	39.4%	80%	32
2013 RCS Data from 1/1/10 to 12/31/12 (N=422)	91.8% (9.7)	100%	45.5%	80%	41
2014 RCS Data from 1/1/11 to 12/31/13 (N=424)	92.4% (8.7)	100%	52.6%	80%	39

2014 RCS data on CRT credentialing success (**Table 29**) show a total of 424 programs reporting credentialing success. Twenty programs did not have any CRT credentialing success data to report for the 2014 RCS. The mean CRT credentialing success was 92.4% with the highest rate of 100% (n=109) and the lowest rate of 42.6% (n=1). A total of 39 programs (9.2% of total) reported CRT credentialing success rates below the CoARC-established threshold of 80%. As per CoARC Standard 3.14, these programs began a dialogue with the CoARC to develop an appropriate plan of action (i.e., a progress report) for program improvement. The median CRT credentialing success rate for the 2014 RCS was 95.2%.

When compared to the 2013 RCS data on CRT credentialing success rates, the 2014 RCS data shows a 0.6% increase in the mean CRT credentialing success rate. The number of programs reporting the lowest CRT credentialing success remained at 1 with the lowest mean CRT credentialing success rate

⁶ The 2011 RCS CRT credentialing success calculation did not subtract the number of students enrolling in an RC program having already earned a CRT credential prior to enrollment.

increasing to 52.6%. The number of programs reporting the highest CRT credentialing success rate (100%) increased slightly from 104 (2013 RCS) to 109 (2014 RCS). The number of programs reporting CRT credentialing success rates below the CoARC-established threshold decreased from 9.7% of total programs reporting CRT credentialing success data in the 2013 RCS to 9.2% in the 2014 RCS.

CRT Credentialing Success by Degree Offered, Institutional Type, and Institutional Control/Funding

Table 30 –CRT Credentialing Success by Degree Offered for 2011 RCS though 2014 RCS							
Degree Offered (n=424)	2014 RCS	Degree Offered (n=422)	2013 RCS	Degree Offered (n=422)	2012 RCS	Degree Offered (n=399)	2011 RCS
	Mean CRT Success (# of programs below CoARC threshold)		Mean CRT Success (# of programs below CoARC threshold)		Mean CRT Success (# of programs below CoARC threshold)		Mean CRT Success (# of programs below CoARC threshold)
Associate (n=366)	91.8% (36)	Associate (n=367)	91.1% (39)	Associate only (n=365)	91.4% (31)	Associate only (n=341)	92.7% (19)
				Associate & Baccalaureate (n=3)	95.7%	Associate & Baccalaureate (n=9)	97.5%
Baccalaureate (n=57)	96.3% (3)	Baccalaureate (n=55)	96.3% (2)	Baccalaureate only (n=51)	96.1% (1)	Baccalaureate only (n=48)	95.3% (1)
Masters (n=1)	100%	Masters (n=0)	N/A	Baccalaureate & Masters (n=3)	98.3%	Baccalaureate & Masters (n=1)	97.1%

Table 30 compares CRT credentialing success data in relation to the degree offered for the 2011 RCS through the 2014 RCS. RC Programs offering baccalaureate degrees had the highest mean CRT credentialing success (96.3%) for the 2014 RCS. RC Programs offering the associate degree had the lowest mean CRT credentialing success (91.8%) for the 2014 RCS. The median CRT credentialing success rate was 94.5% for associate degree programs and 98.5% for baccalaureate degree programs for the 2014 RCS. *Note: The programs that offered more than one degree type (i.e., Associate and Baccalaureate or Baccalaureate and Masters) were separated in 2013 and each degree offered was assigned a different CoARC number, so the data no longer report combined degrees as was the case in the 2012 and 2011 Reports on Accreditation.*

For the 2014 RCS, 36 of the 39 programs below the CoARC threshold of 80% offered the Associate degree (14 AAS degree programs and 22 AS degree programs). The remaining 3 programs offered the Baccalaureate degree. For the 2013 RCS, 39 of the 41 programs below the CoARC threshold of 80% offered the Associate degree (13 AAS degree programs, 25 AS degree programs, and 1 AST degree program). The remaining 2 programs offered the Baccalaureate degree. For the 2012 RCS, 31 of the 32 programs below the CoARC threshold of 80% offered the Associate degree (11 AAS degree programs and 25 AS degree programs). The remaining program offered the Baccalaureate degree. For the 2011 RCS, 19 of the 20 programs below the CoARC threshold of 80% offered the Associate degree (3 AAS degree programs and 16 AS degree programs). The remaining program offered the Baccalaureate degree.

Table 31 – CRT Credentialing Success by Institutional Type for 2011 RCS through 2014 RCS

Institutional Type (N=424)	2014 RCS	Institutional Type (N=422)	2013 RCS	Institutional Type (N=422)	2012 RCS	Institutional Type (N=399)	2011 RCS
	Mean CRT Success (# of programs below CoARC threshold)		Mean CRT Success (# of programs below CoARC threshold)		Mean CRT Success (# of programs below CoARC threshold)		Mean CRT Success (# of programs below CoARC threshold)
Four-Year College or University (n=95)	94.0% (10)	Four-Year College or University (n=90)	94.4% (4)	Four-Year College or University (n=93)	95.0% (3)	Four-Year College or University (n=87)	95.0% (2)
Career or Technical College (n=6)	94.5%	Career or Technical College (n=7)	93.0%	Career or Technical College (n=8)	88.3% (1)	Career or Technical College (n=6)	91.8%
Community or Junior College (n=242)	93.0% (14)	Community or Junior College (n=245)	92.2% (20)	Community or Junior College (n=241)	92.7% (14)	Community or Junior College (n=238)	93.3% (11)
Academic HSC/Medical Center (n=11)	98.6%	Academic HSC/Medical Center (n=11)	97.6%	Academic HSC/Medical Center (n=12)	97.7%	Academic HSC/Medical Center (n=10)	98.4%
Technical or Vocational School (n=68)	87.1% (14)	Technical or Vocational School (n=67)	86.0% (16)	Technical or Vocational School (n=66)	85.2% (14)	Technical or Vocational School (n=57)	88.8% (7)
U.S. Military (n=2)	82.6% (1)	U.S. Military (n=2)	79.0% (1)	U.S. Military (n=2)	86.6%	U.S. Military (n=1)	86.8%

Table 31 compares CRT credentialing success data in relation to institutional type for the 2011 through 2014 RCSs. RC Programs located in Academic HSC/Medical Centers continued to demonstrate the highest mean CRT credentialing success at 98.6% or the 2014 RCS. RC Programs located in the U.S. Military had the lowest mean CRT credentialing success for the 2014 RCS. All categories with the exception of Four-Year Colleges or Universities, showed slight increases in mean CRT credentialing success when compared to the 2013 RCS. For the 2014 RCS, the median CRT credentialing success rate was 96.8% for Four-Year Colleges or Universities, 95.4% for Career or Technical Colleges, 95.2% for Community or Junior Colleges, 100% for Academic HSC/Medical Centers, and 90.6% for Technical or Vocational Schools.

For the 2013 RCS, 14 of the 39 programs below the CoARC threshold of 80% were located at a Community or Junior College. Fourteen programs were located at a Technical or Vocational School. Ten programs were located at a Four-Year College or University. The remaining program was located at a U.S. Military institution. For the 2013 RCS, 20 of the 41 programs below the CoARC threshold of 80% were located at a Community or Junior College. Sixteen programs were located at a Technical or Vocational School. Four programs were located at a Four-Year College or University. The remaining program was located at a U.S. Military institution. For the 2012 RCS, 14 of the 32 programs below the CoARC threshold of 80% were located at a Community or Junior College. Fourteen programs were located at a Technical or Vocational School. Three programs were located at a Four-Year College or University. The remaining program was located at a Career/Technical College. For the 2011 RCS, 11 of the 20 programs below the CoARC threshold of 80% were located at a Community or Junior College. Seven programs were located at a Technical or Vocational School. The remaining 2 programs were located at a Four-Year College or University.

Table 32 – CRT Credentialing Success by Institutional Control for 2011 RCS through 2014 RCS

Institutional Control (N=424)	2014 RCS Mean CRT Success (# of programs below CoARC threshold)	Institutional Control (N=422)	2013 RCS Mean CRT Success (# of programs below CoARC threshold)	Institutional Control (N=422)	2012 RCS Mean CRT Success (# of programs below CoARC threshold)	Institutional Control (N=399)	2011 RCS Mean CRT Success (# of programs below CoARC threshold)
Public/Not-For-Profit (n=340)	93.4% (19)	Public/Not-For-Profit (n=339)	92.7% (25)	Public/Not-For-Profit (n=338)	93.2% (17)	Public/Not-For-Profit (n=330)	93.8% (13)
Private/For-Profit (Proprietary) (n=51)	86.2% (12)	Private/For-Profit (Proprietary) (n=47)	86.0% (10)	Private/For-Profit (Proprietary) (n=50)	83.7% (13)	Private/For-Profit (Proprietary) (n=41)	88.0% (6)
Private/Not-For-Profit (n=31)	91.8% (7)	Private/Not-For-Profit (n=34)	91.1% (5)	Private/Not-For-Profit (n=32)	93.5% (2)	Private/Not-For-Profit (n=27)	93.1% (1)
Federal Government (n=2)	82.6% (1)	Federal Government (n=2)	79.0% (1)	Federal Government (n=2)	86.6%	Federal Government (n=1)	86.8%

Table 32 compares CRT credentialing success data in relation to institutional control/funding for the 2011 RCS through the 2014 RCS. Programs controlled/funded by Public/Not-For-Profit institutions continued to demonstrate the highest mean CRT credentialing success at 93.4% for the 2014 RCS. Programs controlled/funded by the Federal Government continued to demonstrate the lowest mean CRT credentialing success rate (82.6%) for the 2014 RCS. Each category had an increase in mean CRT credentialing success for the 2014 RCS. For the 2014 RCS, the median CRT credentialing success rate was 95.6% for the public/not-for-profit sector, 90.5% for the private/for-profit (proprietary) sector, and 95.1% for the private/not-for-profit sector.

For the 2014 RCS, 19 of the 39 programs below the CoARC threshold of 80% were controlled/funded by Public/Not-For-Profit institutions. Twelve programs were controlled/funded by Private/For-Profit (Proprietary) institutions. Seven programs were controlled/funded by Private/Not-For-Profit institutions. The remaining program was controlled/funded by the Federal Government. For the 2013 RCS, 25 of the 41 programs below the CoARC threshold of 80% were controlled/funded by Public/Not-For-Profit institutions. Ten programs were controlled/funded by Private/For-Profit (Proprietary) institutions. Five programs were controlled/funded by Private/Not-For-Profit institutions. The remaining program was controlled/funded by the Federal Government. For the 2012 RCS, 17 of the 32 programs below the CoARC threshold of 80% were controlled/funded by Public/Not-For-Profit institutions. Thirteen programs were controlled/funded by Private/For-Profit (Proprietary) institutions. The remaining 2 programs were controlled/funded by Private/Not-For-Profit institutions. For the 2011 RCS, 13 of the 20 programs below the CoARC threshold of 80% were controlled/funded by Public/Not-For-Profit institutions. Six programs were controlled/funded by Private/For-Profit (Proprietary) institutions. The remaining program was controlled/funded by a Private/Not-For-Profit institution.

CRT Credentialing Success by Enrollment Size

The mean CRT credentialing success for programs with annual enrollments of less than 20 students in 2013 was 92.3% (n=236). The median was 94.7% (SD = 8.7). The mean CRT credentialing success for programs with annual enrollments of 20 or greater students in 2013 was 92.5% (n=188). The median was 95.7% (SD = 8.8).

RRT Credentialing Success

RRT Credentialing Success is defined as “the percentage of graduates who obtain the RRT credential upon successful completion of the NBRC Written Registry Examination (WRE) and Clinical Simulation Examination (CSE) independent of the number of WRE or CSE exam attempts.” The calculation is derived by dividing the total # of RRTs (numerator) by the # of graduates (denominator) in a three year reporting period. Note: This metric is not the same as the NBRC RRT pass rate which measures the number of candidates passing the exam divided by the number of candidates attempting the exam. The Registered Respiratory Therapist (RRT) Examination administered by the NBRC is designed to objectively measure the essential knowledge, skills, and abilities required of advanced respiratory therapists. Currently, this credential is required by Ohio and California to enter practice. Graduates of CoARC-accredited programs can choose to forego the RRT examinations after earning the CRT credential. Programs are required to provide RRT outcomes data on the RCS; however, no accreditation actions are taken based on RRT credentialing success and no outcomes threshold is established by the CoARC. For more information related to this outcomes measure, download the CoARC’s March 13, 2010 position statement regarding exam-based outcomes measures available at www.coarc.com/27.html.

Table 33 – RRT Credentialing Success for 2011 RCS through 2014 RCS				
Reporting Years (# of programs submitting)	Mean (SD)	Maximum Value	Minimum Value	CoARC Threshold
2011 RCS Data from 1/1/08 to 12/31/10 (N=394)	61.2% (21.4)	100%	0%	N/A
2012 RCS Data from 1/1/09 to 12/31/11 (N=412)	62.2% (21.1)	100%	0%	N/A
2013 RCS Data from 1/1/10 to 12/31/12 (N=422)	63.4% (22.1)	100%	0%	N/A
2014 RCS Data from 1/1/11 to 12/31/13 (N=424)	67.9% (21.3)	100%	0%	N/A

2014 RCS data on RRT credentialing success (**Table 33**) show a total of 424 programs reporting credentialing success. Twenty programs did not have any RRT credentialing success data to report for the 2014 RCS. The mean RRT credentialing success was 67.9% with the highest rate of 100% (n=19) and the lowest rate of 0% (n=1). The median RRT credentialing success rate for the 2014 RCS was 21.3%.

When compared to the previous RCS data, the 2014 RCS data shows a considerable increase (4.5%) in the mean RRT credentialing success rate. The number of programs reporting the lowest RRT credentialing success decreased from 4 (2013 RCS) to 1 with the lowest mean RRT credentialing success rate remaining at 0%. The number of programs reporting the highest RRT credentialing success rate (100%) increased from 7 for the 2012 RCS, to 13 for the 2013 RCS, to 19 for the 2014 RCS.

RRT Credentialing Success by Degree Offered, Institutional Type, and Institutional Control/Funding

Table 34 –RRT Credentialing Success by Degree Offered for 2011 RCS though 2014 RCS

Degree Offered (N=424)	2014 RCS Mean RRT Success	Degree Offered (N=422)	2013 RCS Mean RRT Success	Degree Offered (N=412)	2012 RCS Mean RRT Success	Degree Offered (N=394)	2011 RCS Mean RRT Success
Associate (n= 366)	65.5%	Associate (n=367)	60.7%	Associate only (n=365)	59.7%	Associate only (n=336)	59.2%
				Associate & Baccalaureate (n=3)	58.3%	Associate & Baccalaureate (n=9)	69.1%
Baccalaureate (n=57)	82.3%	Baccalaureate (n=55)	81.1%	Baccalaureate only (n=51)	77.6%	Baccalaureate only (n=48)	73.1%
Masters (n=1)	100%	Masters (n=0)	N/A	Baccalaureate & Masters (n=3)	93.0%	Baccalaureate & Masters (n=1)	87.5%

Table 34 compares RRT credentialing success data in relation to the degree offered for the 2011 RCS through the 2014 RCS. For the 2014 RCS, RC programs offering Baccalaureate degrees had the highest mean RRT credentialing success (82.3%). RC programs offering Associate degrees had the lowest mean RRT credentialing success (65.5%). Both categories continued to demonstrate an increase in mean RRT credentialing success when compared to previous RCS data. The median RRT credentialing success rate was 68.3% for associate degree programs and 84.1% for baccalaureate degree programs for the 2014 RCS. *Note: The programs that offered more than one degree type (i.e., Associate and Baccalaureate or Baccalaureate and Masters) were separated in 2013 and each degree offered was assigned a different CoARC number, so the data no longer report combined degrees as was the case in the 2012 and 2011 Reports on Accreditation.*

Table 35 – RRT Credentialing Success by Institutional Type for 2011 RCS though 2014 RCS

Institutional Type (N=424)	2014 RCS Mean RRT Success	Institutional Type (N=422)	2013 RCS Mean RRT Success	Institutional Type (N=412)	2012 RCS Mean RRT Success	Institutional Type (N=394)	2011 RCS Mean RRT Success
Four-Year College or University (n= 95)	73.2%	Four-Year College or University (n=90)	69.8%	Four-Year College or University (n=90)	69.5%	Four-Year College or University (n=85)	67.7%
Career or Technical College (n=6)	63.3%	Career or Technical College (n=7)	59.5%	Career or Technical College (n=7)	62.8%	Career or Technical College (n=6)	58.6%
Community or Junior College (n=242)	67.8%	Community or Junior College (n=245)	63.3%	Community or Junior College (n=239)	61.0%	Community or Junior College (n=236)	60.1%
Academic HSC/Medical Center (n=11)	91.0%	Academic HSC/Medical Center (n=11)	88.8%	Academic HSC/Medical Center (n=12)	83.5%	Academic HSC/Medical Center (n=10)	81.7%
Technical or Vocational School (n=68)	58.2%	Technical or Vocational School (n=67)	52.1%	Technical or Vocational School (n=62)	53.0%	Technical or Vocational School (n=56)	52.7%
U.S. Military (n=2)	32.1%	U.S. Military (n=2)	26.4%	U.S. Military (n=2)	26.9%	U.S. Military (n=1)	52.6%

Table 35 compares RRT credentialing success data in relation to institutional type for the 2011 RCS through the 2014 RCS. RC programs located in Academic HSC/Medical Centers continued to demonstrate the highest mean RRT credentialing success at 91.0%. RC programs located at U.S. Military facilities continued to demonstrate the lowest mean RRT credentialing success at 32.1%. Increases in mean RRT credentialing success occurred for all categories when compared to 2013 RCS data. For the 2014 RCS, the median RRT credentialing success rate was 79.0% for Four-Year Colleges or Universities, 65.2% for Career or Technical Colleges, 70.3% for Community or Junior Colleges, 98.0% for Academic HSC/Medical Centers, and 59.0% for Technical or Vocational Schools.

Table 36 – RRT Credentialing Success by Institutional Control for 2011 RCS through 2014 RCS

Institutional Control (N=424)	2013 RCS Mean RRT Success	Institutional Control (N=422)	2013 RCS Mean RRT Success	Institutional Control (N=412)	2012 RCS Mean RRT Success	Institutional Control (N=394)	2011 RCS Mean RRT Success
Public/Not-For-Profit (n=340)	69.9%	Public/Not-For-Profit (n=339)	65.6%	Public/Not-For-Profit (n=333)	64.0%	Public/Not-For-Profit (n=327)	63.1%
Private/For-Profit (Proprietary) (n=51)	57.5%	Private/For-Profit (Proprietary) (n=47)	52.9%	Private/For-Profit (Proprietary) (n=47)	51.1%	Private/For-Profit (Proprietary) (n=41)	47.7%
Private/Not-For-Profit (n=31)	64.4%	Private/Not-For-Profit (n=34)	57.1%	Private/Not-For-Profit (n=30)	62.0%	Private/Not-For-Profit (n=25)	58.0%
Federal Government (n=2)	32.1%	Federal Government (n=2)	26.4%	Federal Government (n=2)	26.9%	Federal Government (n=1)	52.6%

Table 36 compares RRT credentialing success data in relation to institutional control/funding for the 2011 RCS through the 2014 RCS. For the 2014 RCS, RC Programs controlled/funded by public/not-for-profit institutions continued to demonstrate the highest mean RRT credentialing success (69.9%). RC Programs controlled/funded by the federal government continued to demonstrate the lowest mean RRT credentialing success rate (32.1%). Increases in mean RRT credentialing success occurred for RC programs in all categories when compared to 2013 RCS data. For the 2014 RCS, the median RRT credentialing success rate was 72.7% for the public/not-for-profit sector, 59.6% for the private/for-profit (proprietary) sector, and 73.0% for the private/not-for-profit sector.

RRT Credentialing Success by Enrollment Size

The mean RRT credentialing success for programs with annual enrollments of less than 20 students in 2013 was 65.5% (n=236). The median was 67.8% (SD = 22.1). The mean RRT credentialing success for programs with annual enrollments of 20 or greater students in 2013 was 70.9% (n=188). The median was 74.7% (SD = 19.9).

Programmatic Outcomes by State and Degree (including D.C.)

Table 37 provides data on mean programmatic attrition, positive placement, CRT credentialing success, and RRT credentialing success by state, including D.C., based on 2012, 2013, and 2014 RCS data.

Table 37 –Programmatic Outcomes by State, including D.C. for 2012 RCS though 2014 RCS

State (# programs for 2014 RCS)	Mean Programmatic Attrition			Mean Positive (Job) Placement			Mean CRT Credentialing Success			Mean RRT Credentialing Success		
	2012 RCS	2013 RCS	2014 RCS	2012 RCS	2013 RCS	2014 RCS	2012 RCS	2013 RCS	2014 RCS	2012 RCS	2013 RCS	2014 RCS
AL (n=6)	14.2%	18.7%	19.3%	89.5%	88.0%	82.5%	83.0%	83.3%	86.5%	36.1%	39.1%	46.2%
AR (n=11)	21.6%	26.5%	27.7%	89.2%	90.9%	87.7%	85.4%	90.6%	92.8%	55.3%	62.2%	66.8%
AZ (n=5)	18.0%	20.9%	13.4%	73.6%	73.8%	73.3%	87.0%	86.9%	88.5%	58.2%	63.8%	68.8%
CA (n=36)	12.7%	15.7%	16.2%	79.0%	73.5%	71.8%	90.2%	89.7%	90.4%	64.1%	65.6%	70.6%
CO (n=4)	13.5%	14.6%	17.9%	86.3%	81.0%	79.8%	93.0%	91.1%	93.1%	66.5%	71.3%	77.9%
CT (n=5)	26.0%	20.1%	16.0%	84.0%	82.1%	78.1%	90.6%	90.7%	89.4%	47.7%	53.8%	62.4%
DC (n=1)	25.0%	30.4%	20.5%	51.3%	51.9%	57.1%	94.9%	96.3%	85.7%	56.4%	63.0%	61.9%
DE (n=2)	11.4%	22.3%	29.7%	92.5%	89.9%	89.7%	97.2%	97.6%	97.7%	62.8%	75.8%	80.8%
FL (n=23)	18.2%	18.4%	19.2%	76.4%	77.8%	80.4%	85.1%	87.4%	89.2%	63.0%	67.0%	70.8%
GA (n=14)	15.1%	18.2%	19.1%	87.6%	87.0%	87.1%	90.0%	91.8%	92.6%	64.8%	71.9%	74.6%
HI (n=1)	8.2%	11.1%	13.6%	89.2%	89.5%	87.5%	100%	100%	100%	97.3%	100%	100%
IA (n=6)	22.8%	21.8%	21.2%	85.6%	87.8%	90.8%	90.4%	90.2%	92.2%	52.3%	54.5%	55.7%
ID (n=3)	14.1%	13.8%	16.2%	85.6%	82.9%	85.8%	90.4%	90.0%	88.1%	52.3%	60.8%	63.3%
IL (n=13)	15.4%	17.1%	18.3%	86.0%	86.2%	84.4%	93.5%	92.9%	93.2%	64.4%	65.6%	67.4%
IN (n=11)	16.9%	19.7%	19.3%	94.5%	94.5%	93.0%	98.0%	98.1%	97.6%	60.5%	67.4%	73.4%
KS (n=9)	15.3%	18.6%	17.1%	84.2%	85.8%	86.0%	91.7%	88.0%	89.7%	60.9%	59.8%	61.2%
KY (n=13)	19.3%	19.8%	21.0%	91.1%	89.3%	85.4%	91.3%	90.1%	95.2%	48.7%	51.7%	53.4%
LA (n=10)	15.2%	19.5%	18.5%	90.2%	83.6%	86.4%	94.2%	90.7%	93.9%	43.7%	45.6%	55.1%
MA (n=5)	15.7%	12.9%	18.9%	88.5%	89.7%	90.9%	93.8%	96.7%	96.1%	59.4%	60.9%	64.1%
MD (n=7)	16.7%	20.5%	23.5%	81.4%	75.3%	73.9%	92.8%	89.6%	89.2%	59.2%	62.3%	63.1%
ME (n=2)	20.8%	20.8%	25.6%	88.6%	85.2%	89.8%	96.8%	98.7%	97.2%	56.8%	64.9%	71.2%
MI (n=13)	19.2%	24.0%	19.8%	89.3%	88.0%	87.5%	93.9%	93.5%	92.0%	73.6%	74.8%	79.1%
MN (n=5)	16.4%	16.2%	20.2%	90.7%	92.1%	89.9%	96.0%	96.8%	97.2%	63.6%	64.1%	64.8%
MO (n=11)	20.6%	19.8%	20.8%	88.4%	87.5%	83.9%	96.4%	95.8%	93.2%	70.9%	70.4%	67.8%
MS (n=8)	20.4%	19.6%	16.5%	96.7%	92.3%	91.1%	94.7%	89.4%	91.8%	49.3%	45.7%	51.9%
MT (n=2)	18.1%	17.7%	16.9%	85.8%	83.7%	85.1%	96.7%	96.8%	96.0%	66.9%	72.2%	70.9%
NC (n=14)	23.1%	25.1%	25.0%	88.7%	86.9%	85.5%	94.0%	93.9%	94.5%	69.1%	72.0%	74.8%
ND (n=3)	10.3%	4.5%	3.2%	96.9%	100.0%	98.9%	96.9%	97.9%	97.1%	87.3%	83.3%	89.0%
NE (n=4)	19.1%	16.9%	17.9%	96.5%	93.9%	94.9%	94.4%	95.9%	99.0%	73.4%	70.6%	73.0%
NH (n=1)	5.6%	10.7%	10.7%	78.1%	93.9%	83.3%	90.6%	95.9%	86.7%	46.9%	50.0%	63.3%
NJ (n=7)	21.4%	15.5%	12.9%	87.7%	82.7%	80.6%	95.3%	94.3%	91.4%	62.5%	57.5%	71.1%

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State (# programs for 2014 RCS)	Mean Programmatic Attrition			Mean Positive (Job) Placement			Mean CRT Credentialing Success			Mean RRT Credentialing Success		
	2012 RCS	2013 RCS	2014 RCS	2012 RCS	2013 RCS	2014 RCS	2012 RCS	2013 RCS	2014 RCS	2012 RCS	2013 RCS	2014 RCS
NM (n=6)	15.2%	21.2%	22.3%	83.9%	79.9%	81.4%	86.2%	83.6%	86.9%	67.5%	61.6%	69.1%
NV (n=3)	28.1%	26.0%	25.3%	81.3%	79.3%	81.1%	92.8%	91.8%	94.0%	59.5%	62.0%	70.3%
NY (n=12)	18.4%	19.8%	18.8%	88.5%	81.7%	92.9%	92.5%	93.3%	94.0%	74.1%	78.3%	83.1%
OH (n=22)	17.6%	19.8%	20.4%	84.3%	83.7%	83.3%	92.9%	94.3%	94.8%	61.9%	64.1%	72.5%
OK (n=7)	9.3%	13.0%	13.2%	89.9%	89.8%	89.9%	91.9%	93.7%	94.5%	52.5%	51.5%	52.0%
OR (n=4)	9.6%	13.3%	12.5%	91.7%	88.2%	89.3%	96.4%	94.7%	95.8%	61.4%	65.3%	73.0%
PA (n=23)	18.8%	19.4%	18.5%	87.4%	91.3%	89.5%	93.7%	92.8%	92.7%	54.3%	51.7%	59.7%
RI (n=2)	14.5%	13.8%	14.9%	83.1%	79.6%	67.5%	89.8%	90.7%	88.0%	47.5%	50.0%	44.3%
SC (n=7)	28.6%	33.3%	33.3%	89.0%	92.0%	92.5%	97.0%	97.7%	97.0%	61.6%	67.4%	75.3%
SD (n=2)	16.7%	25.6%	25.8%	96.9%	89.9%	91.1%	96.9%	96.5%	100%	93.9%	86.4%	92.6%
TN (n=11)	18.8%	19.1%	20.9%	90.7%	91.3%	89.0%	93.6%	93.0%	93.6%	71.9%	72.5%	74.0%
TX (n=36)	16.7%	18.1%	16.9%	87.9%	87.9%	87.7%	92.2%	90.9%	90.9%	61.5%	63.7%	65.6%
UT (n=7)	9.3%	10.2%	11.4%	86.3%	87.3%	87.4%	91.8%	91.2%	88.3%	68.0%	69.7%	66.2%
VA (n=7)	27.8%	28.4%	27.9%	80.6%	82.3%	84.4%	94.1%	94.6%	86.2%	64.1%	69.2%	76.9%
VT (n=1)	28.1%	31.0%	27.7%	97.6%	97.4%	89.5%	97.6%	92.1%	89.5%	81.0%	81.6%	78.9%
WA (n=5)	15.7%	17.4%	15.4%	86.1%	86.1%	87.6%	94.3%	94.2%	96.0%	64.3%	71.6%	75.9%
WI (n=7)	19.6%	20.6%	20.1%	90.0%	90.2%	88.1%	96.9%	96.1%	95.1%	69.7%	70.3%	72.0%
WV (n=6)	8.7%	15.8%	15.0%	74.2%	83.4%	78.9%	79.4%	81.1%	78.1%	47.3%	41.7%	40.7%
WY (n=1)	18.9%	20.0%	34.2%	88.0%	85.7%	88.0%	96.0%	90.5%	92.0%	56.0%	71.4%	88.0%

PROGRAMMATIC DATA RELATED TO THE AARC 2015 AND BEYOND PROJECT

This intent of this section is to provide the CoARC's communities of interest with additional programmatic data related to the American Association for Respiratory Care's (AARC's) *2015 and Beyond* project. These data should be particularly useful in addressing the following issues: (1) Maintaining an adequate respiratory therapy workforce; (2) Increasing access to baccalaureate degrees for respiratory therapy students enrolled in associate degree granting programs; and (3) The development of consortia and cooperative agreements for associate degree programs that wish to align with bachelor degree granting institutions.

Baccalaureate Degree Eligibility Categories

Table 38 – Baccalaureate Degree Eligibility- Number of Programs for 2013 (N=441), and 2014 (N=438)		
Baccalaureate Degree Eligibility Category	# of Programs as of 12/31/13	# of Programs as of 12/31/14
I. Sponsoring institution offers a baccalaureate degree RC program	60	64
II. Sponsoring institution offers baccalaureate degrees in other disciplines	86	86
III. Sponsoring institution located in a state that authorizes community colleges to award bachelor's degrees under certain circumstances ⁷	77	86
IV. Sponsoring institution cannot offer a baccalaureate degree	218	202

Table 38 assigns RC programs and satellite options (as of December 31, 2014 and December 31, 2013) to one of four baccalaureate degree eligibility categories. Category I contains sponsoring institutions that offer an Entry into Respiratory Care Professional Practice baccalaureate degree upon graduation. As of 12/31/2014, 64 of the 438 (14.6% of total) RC programs and satellites fall under Category I.

Category II contains sponsoring institutions offering an Entry into Respiratory Care Professional Practice associate degree upon graduation that also offer baccalaureate degrees in other disciplines. Sponsoring institutions in this category can offer both the Entry into Respiratory Care Professional Practice associate degree and Entry into Respiratory Care Professional Practice baccalaureate degree or can transition their associate degree to a baccalaureate degree. As of 12/31/2014, eighty-six of the 438 (19.6% of total) RC programs and satellites fall under Category II. As mentioned earlier in this report, 49 of the RC programs and satellites in this category are currently associate degree programs located at a 4-Year College or University.

Category III includes sponsoring institutions offering an Entry into Respiratory Care Professional Practice associate degree upon graduation, that are located in a state that authorizes community colleges to award bachelor's degrees under certain circumstances. According to the Community College Baccalaureate Association, 19 states have legislation allowing community colleges to award bachelor's degrees. The 86 sponsoring institutions in this category may have the capability of offering both the Entry into Respiratory Care Professional Practice associate degree and Entry into Respiratory Care Professional Practice baccalaureate degree or may be able to transition their associate degree to a baccalaureate degree. However, the extent of

⁷ Source: Community College Baccalaureate Association <http://www.accbd.org/resources/baccalaureate-conferring-locations/?ct=US>

this capability varies greatly from state to state as the number and types of community college baccalaureate degrees are restricted by state legislation. As of 12/31/2014, eighty-six of the 438 (19.6% of total) RC programs and satellites fall under Category III.

Category IV includes sponsoring institutions offering an Entry into Respiratory Care Professional Practice associate degree upon graduation that do not have the authority to award a baccalaureate degree. Sponsoring institutions in this category may be capable of articulating with, or participating in a consortial partnership with, a 4-year degree-granting institution. As of 12/31/2014, two-hundred two of the 438 (46.1% of total) RC programs and satellites fall under Category IV.

Baccalaureate Degree Eligibility – Enrollment Capacity and Graduation Rates

Baccalaureate Degree Eligibility Category	Maximum Enrollment Capacity as of 12/31/13	Total Graduates as of 12/31/13	Maximum Enrollment Capacity as of 12/31/14	Total Graduates as of 12/31/14
I. Sponsoring institution currently offers a baccalaureate degree RC program	1,395	813	1,478	790
II. Sponsoring institution offers baccalaureate degrees in other disciplines	3,339	1,841	3,308	1,954
III. Sponsoring institution located in a state that authorizes community colleges to award bachelor's degrees under certain circumstances ⁷	2,006	1,145	2,183	1,272
IV. Sponsoring institution cannot offer a baccalaureate degree	7,159	4,129	6,477	3,691

Table 39 provides an assessment of the maximum annual enrollment capacity and the total number of graduates (as of December 31, 2013 and December 31, 2014) based on RC programs and satellite options (as of December 31, 2013 and December 31, 2014) assigned to each of the four baccalaureate degree eligibility categories

As of December 31, 2014, the 64 programs in Category I produced 790 graduates (10.3% of the total of the 7,707 graduates from all 4 categories), which was 53.5% of maximum enrollment capacity for this category. The 86 programs in Category II produced 1,954 graduates (25.4% of the total of the 7,707 graduates from all 4 categories), which was 59.1% of maximum enrollment capacity for this category. Given the graduation rates for the past two years, the number of baccalaureate degree graduates has the potential to increase by approximately 247% (or to about 2,700 graduates per year) if sponsoring institutions in Category II were to convert their associate degree RC program to a baccalaureate degree.

The 86 programs in Category III produced 1,272 graduates (16.5% the total of the 7,707 graduates from all 4 categories), which was 58.3% of maximum enrollment capacity for this category. The 202 programs in Category IV produced 3,691 graduates (47.9% of the total of the 7,707 graduates from all 4 categories), which was 57.0% of maximum enrollment capacity for this category.

Baccalaureate Degree Eligibility by State (including District of Columbia)

Table 40 provides a comparison of baccalaureate degree eligibility categories by state, excluding Alaska which does not have any accredited RC programs. The data includes the number of programs in each state, the number of programs in each of the four categories, and the maximum annual enrollment capacity for each category. Twenty-eight states contain programs that fall under Category I. Thirty-two states contain programs that fall under Category II. Twelve states, including the District of Columbia, do not contain a program in either Category I or II. Eleven states, including the District of Columbia, contain programs that only fall under Category IV. One state (Hawaii) is comprised of only a Category III program.

Table 40 – Baccalaureate Degree Eligibility by State and District of Columbia

# of Programs as of 12/31/14 (N=438)	Category I		Category II		Category III		Category IV	
	# of Programs as of 12/31/14	Max Enroll Capacity	# of Programs as of 12/31/14	Max Enroll Capacity	# of Programs as of 12/31/14	Max Enroll Capacity	# of Programs as of 12/31/14	Max Enroll Capacity
Alabama (n=6)	2	66	1	50	0	0	3	100
Arkansas (n=12)	3	36	0	0	8	147	1	24
Arizona (n=6)	0	0	2	141	0	0	4	232
California (n=38)	1	22	5	370	2	49	30	1,711
Colorado (n=4)	0	0	1	72	1	35	2	120
Connecticut (n=5)	1	18	1	40	0	0	3	60
Dist of Columbia (n=1)	0	0	0	0	0	0	1	24
Delaware (n=2)	0	0	0	0	0	0	2	35
Florida (n=26)	2	55	18	511	2	49	4	150
Georgia (n=15)	4	145	3	95	0	0	8	150
Hawaii (n=1)	0	0	0	0	1	16	0	0
Iowa (n=6)	0	0	0	0	0	0	6	128
Idaho (n=3)	1	25	2	55	0	0	0	0
Illinois (n=15)	2	48	3	96	0	0	10	275
Indiana (n=11)	1	30	1	16	9	189	0	0
Kansas (n=9)	1	24	2	38	0	0	6	130
Kentucky (n=13)	1	15	1	16	0	0	11	231
Louisiana (n=10)	2	27	2	50	5	76	1	20
Massachusetts (n=6)	0	0	0	0	0	0	6	124
Maryland (n=6)	1	40	1	20	0	0	5	113
Maine (n=2)	0	0	0	0	0	0	2	34
Michigan (n=13)	0	0	3	84	9	213	1	40
Minnesota (n=5)	2	40	0	0	3	83	0	0
Missouri (n=12)	2	24	3	104	0	0	7	289
Mississippi (n=8)	0	0	0	0	0	0	8	162
Montana (n=2)	0	0	1	16	0	0	1	15
North Carolina (n=14)	0	0	0	0	0	0	14	296
North Dakota (n=3)	3	36	0	0	0	0	0	0

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# of Programs as of 12/31/14 (N=438)	Category I		Category II		Category III		Category IV	
	# of Programs as of 12/31/14	Max Enroll Capacity	# of Programs as of 12/31/14	Max Enroll Capacity	# of Programs as of 12/31/14	Max Enroll Capacity	# of Programs as of 12/31/14	Max Enroll Capacity
Nebraska (n=4)	1	15	1	24	0	0	2	59
New Hampshire (n=1)	0	0	0	0	0	0	1	16
New Jersey (n=7)	2	72	2	72	0	0	3	130
New Mexico (n=6)	0	0	1	72	5	101	0	0
Nevada (n=3)	0	0	2	115	0	0	1	72
New York (n=13)	3	74	1	30	9	356	0	0
Ohio (n=22)	4	92	6	153	0	0	12	343
Oklahoma (n=7)	0	0	1	25	3	62	3	70
Oregon (n=4)	1	25	0	0	0	0	3	94
Pennsylvania (n=25)	6	118	8	173	0	0	11	391
Rhode Island (n=2)	0	0	1	40	0	0	1	24
South Carolina (n=7)	0	0	0	0	0	0	7	161
South Dakota (n=2)	0	0	2	24	0	0	0	0
Tennessee (n=11)	3	54	1	30	0	0	7	256
Texas (n=36)	5	137	6	295	23	664	2	72
Utah (n=7)	4	104	3	426	0	0	0	0
Virginia (n=8)	3	78	0	0	0	0	5	155
Vermont (n=1)	0	0	1	27	0	0	0	0
Washington (n=5)	1	28	1	48	3	76	0	0
Wisconsin (n=7)	0	0	0	0	0	0	7	156
West Virginia (n=5)	2	30	0	0	3	67	0	0
Wyoming (n=1)	0	0	0	0	0	0	1	15

RC Program Consortia

In its accreditation *Standards* (p.8), the CoARC defines a consortium as “a legally binding contractual partnership of two or more sponsoring institutions (at least one of which is a duly accredited degree-granting institution of higher education) that come together to offer a program. Consortia must be structured to recognize and perform the responsibilities and functions of a sponsoring institution.” CoARC Standard 1.02 (p. 12) states that “the responsibilities of the consortium and of each member must be clearly documented in a formal affiliation agreement or memorandum of understanding, which delineates instruction, supervision of students, resources, reporting, governance and lines of authority.” **Table 41** provides a listing of 41 consortium programs as of December 31, 2014 according to the CoARC’s database.

Table 41 – RC Program Consortia as of December 31, 2014				
Program #	Consortium Name	City	State	Degree
200014	Millersville University	Millersville	PA	BS
200019	Mansfield University	Mansfield	PA	AS
200039	Indiana Respiratory Therapy Ed Consortium	Indianapolis	IN	BS
200078	Indiana University of PA/Western PA Hospital	Pittsburgh	PA	BS
200088	Delaware Co CC/Crozer-Chester Med Ctr.	Upland	PA	AAS
200090	Norwalk Community College	Norwalk	CT	AS
200102	East Los Angeles College/Santa Monica	Monterey Park	CA	AS
200133/220133	St. Alexius Medical Center/University of Mary	Bismarck	ND	BS/MS
200143	CHI Health/Midland University	Omaha	NE	BS
200172	Mayo Clinic College of Med/Mayo School	Rochester	MN	BS
200260	Cincinnati State Tech-Community College	Cincinnati	OH	AS
200299	Delaware Technical and Community College	Wilmington	DE	AAS
200313	West Chester University/Bryn Mawr Hospital	Bryn Mawr	PA	BS
200341/210341	Rutgers & State University of NJ	Stratford	NJ	AAS/BS
200347/210347	Rutgers & State University of NJ	Newark	NJ	AS/BS
200367	North Dakota State University/Sanford	Fargo	ND	BS
200392	Bossier Parish Community College	Bossier City	LA	AAS
200397	Frederick Community College	Mt. Airy	MD	AAS
200430	Bridge Valley Community & Tech College	Charleston	WV	AS
200431	Pickens Technical College	Aurora	CO	AS
200432	Missouri Southern State University	Joplin	MO	AS
200450	Collins Career Center	Chesapeake	OH	AS
200454	Francis Tuttle	Oklahoma City	OK	AS
200461	Northeast Kentucky Consortium	Morehead	KY	AAS
200463	Autry Technology Ctr./Northern OK College	Enid	OK	AAS
200489	Southwestern Illinois College	Belleville	IL	AAS
200497	Cape Girardeau Career & Technology Center	Cape Girardeau	MO	AS

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200503	Rolla Technical Center	Rolla	MO	AAS
200504	University of Rio Grande/Rio Grande CC	Rio Grande	OH	AS
200506	Marshall University/St. Mary's Med Ctr.	Huntington	WV	BS
200513	Arkansas State University-Mountain Home	Mountain Home	AR	AAS
200531	Great Plains Technology Center	Lawton	OK	AAS
200569	Ivy Tech E. IN Resp. Care Ed. Consortium	New Castle	IN	AS
200585	US Army Med Ed & Training Campus	Fort Sam Houston	TX	AAS
200586	Simi Valley Adult School/Excelsior	Simi Valley	CA	AS
200595	Missouri State University-West Plains	West Plains	MO	AAS
200600	Sullivan Respiratory Care Consortium	Loch Sheldrake	NY	AAS
300025	Monroe City Hall Annex	West Monroe	LA	AAS

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