**Progress Report – Update on Existing Action Plan for Improving Program Retention**

Directions to the Program: The following questions have been developed by CoARC to guide your analysis and action plan directed toward improving your outcomes on **Program Retention**. Your Threshold Level of Success results on this outcome have triggered an accreditation dialogue requiring this progress report. The referee is available to assist you with the preparation of this report and the identification of possible changes to improve your retention outcome.

Please refer to the CoARC website ([www.coarc.com](http://www.coarc.com)) for the current Thresholds.

**REMINDER**: Upon completion of this report, please forward a copy **electronically** to the Executive Office ([shelley@coarc.com](mailto:shelley@coarc.com)).

Program Name:

CoARC Program Number:

Your referee is:

Progress Report Due Date (see CoARC letter):

The date you submitted your original action plan on retention:

The name of the person completing this report:

Your relationship with the program (job title):

RETENTION CALCULATION GUIDELINES

The established threshold for Retention is 70%. The CoARC reviews this threshold over the most recent 3-year average reported. Programmatic retention: defined as the number of students formally enrolled\* in a respiratory care program and graduated from the program after completing all programmatic and graduation requirements, calculated as a percentage of the total number of students initially enrolled in that class.

The total number of students enrolled includes those who successfully completed the program as well as students who left the program for academic reasons (failure to achieve minimum grade requirements, ethical, professional or behavioral violations or violations of academic policies) that resulted in their expulsion from the program prior to graduation.

Students are not included in the retention definition who:

1. leave the program by the last day they are eligible for 100% tuition reimbursement within the first term of fundamental respiratory care core coursework;\*\*
2. Are in good academic standing who leave the program due to: financial, medical, or family reasons, military deployment, a change in their course of study, relocation to a different community, or reasons other than those described under academic reasons;
3. Are admitted to another educational program (same or different educational institution) prior to the scheduled graduation date of their RT class.

\*Programmatic enrollment begins when a student enrolls in the first core respiratory care course (non-survey, non-prereq) available only to students matriculated in the respiratory care program.  This may differ from the institutional definition of the enrollment or matriculation dates.

\*\*Fundamental respiratory care coursework is defined as: Professional coursework, focused on the preparation of the student as a competent Respiratory Therapist, as defined in CoARC Standard 3.01.

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| Was sub-threshold retention due to (check all that apply):  General Education Courses   RT Core Courses  Non-Academic  Other (specify): |
| **ANALYSIS** |
| The Retention outcome as identified in the CoARC letter requesting this progress report:  %  Has there been any change in the Retention outcome since the receipt of the CoARC letter requesting this Progress Report?  (Check one of the following boxes)    No  (if no, proceed to the action plan on the next page)  Yes  (if yes, complete the information below and then proceed to the action plan on the next page)  If you answered ‘Yes’ above, please provide an analysis of the new outcome:  **Update and submit your program’s Annual Report of Current Status [RCS] (available at https://rcs.coarc.com/Account/Login).**  **Include a copy of the updated RCS when submitting the Progress Report.** |
| **ACTION PLAN** |
| Has there been any change in the action plan since the submission of your last progress report? No  Yes  If you answered ‘Yes’, please provide a description of the changes to the action plan: |
| **RE-EVALUATION** |
| Date You Expect to Re-evaluate the Action Plan:    Rationale for choosing above date: |
| Is there any additional documentation submitted with this report? No  Yes  If Yes, please describe: |

If you have any questions concerning this progress report, please call the CoARC Executive Office at (817) 283-2835.

**REMINDER**: Upon completion of this report, please forward a copy **electronically** to the Executive Office ([shelley@coarc.com](mailto:lisa@coarc.com)).