

The Coalition Chronicle

Coalition for Baccalaureate and Graduate Respiratory Therapy Education

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Motivating Professional Involvement

By Lisa M. Endee, MPH, RRT, RRT-SDS, RPSGT, RST

Clinical Associate Professor

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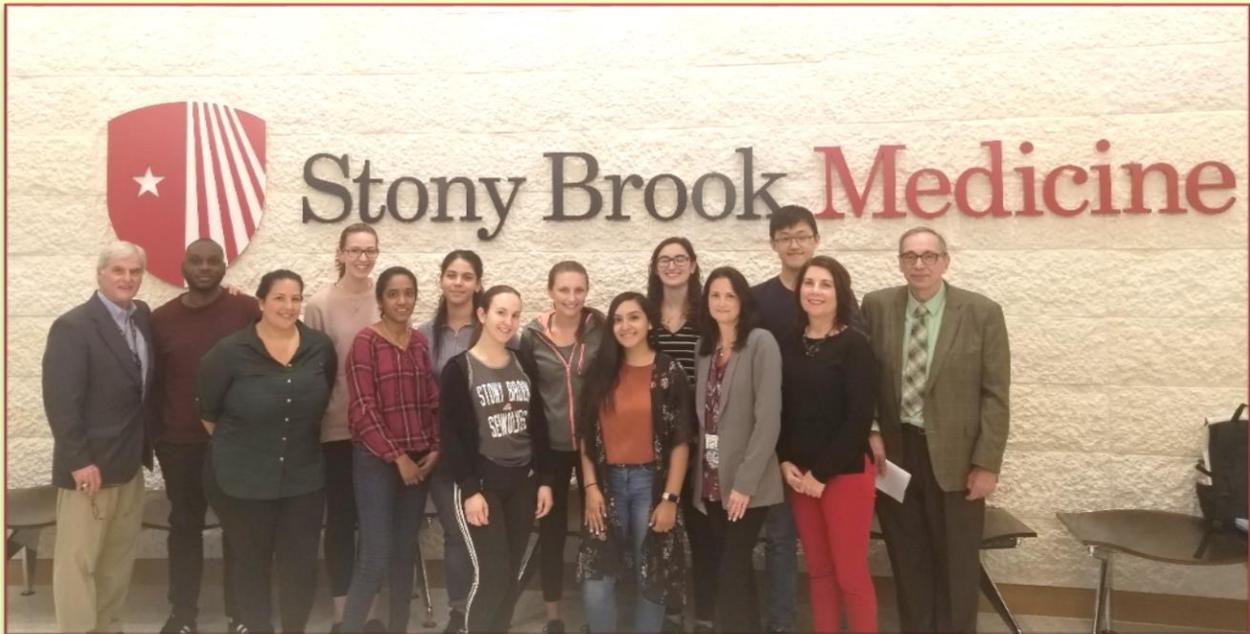
Clinical Associate Professor

Respiratory Care and Polysomnographic Technology Programs

School of Health Technology and Management

State University of New York at Stony Brook

Stony Brook University's Respiratory Care Program is motivating professional involvement with the help of support from the New York State Society for Respiratory Care (NYSSRC). This year, the NYSSRC Board of Directors approved a scholarship to be awarded to students



currently in respiratory care educational programs to motivate and reward professional growth. Stony Brook University School of Health Technology and Management's Respiratory Care program selected ten senior respiratory care students to receive this year's scholarship based on participation in professional activities above and beyond the program's graduation requirement.

In keeping with the mission of the NYSSRC, the selected students were awarded one year of free membership to the American Association for Respiratory Care (AARC).

Shown in the photo above are student awardees and Respiratory Care Program faculty (left to right) Stephen G. Smith, MPA, RT, RRT, Saheed Shoberu, Christina Zaccaria, Jennifer Rottkamp, Christeena Thomas, Yasmine Niera, Alina Gulak, Sarah Devereux, Natalie Hernandez, Carol Cimetta, Lisa M. Endee, MPH, RT, RRT-SDS, RPSGT, Kevin An, Ann Cuccia, MPH, RT, RRT, RRT-NPS, RPFT, AE-C, and James Ganetis, MS, RT, RRT, RRT-NPS (Interim Program Director). Ann Cuccia and Lisa M. Endee currently serve as NYSSRC Long Island Regional Directors and Stephen G. Smith serves as the NYSSRC Executive Board member and House of Delegate member to the AARC.

Interview with Dr. Lynda Goodfellow*

By Jeffrey Ward, MEd, RRT, FAARC

Mayo Clinic

Multidisciplinary Medical Simulation Center

Rochester, Minnesota



**Tell us about your early days as a respiratory therapist.
- What brought you into the profession?**

I was a PT major in college and on the waitlist for admission. I then received a letter asking me to apply to the respiratory therapy program. Because I was not feeling very good about PT at that moment, I thought I would call the local hospital and ask to speak to someone in respiratory therapy. I went on a tour of the department and hospital in my attempt to find out what this profession, respiratory therapy, was all about. I called another hospital near my hometown to ask for a tour during my next trip home. I met with two men on a Saturday morning who asked me why I was considering a career in RT. I was also questioned about my math and science courses and my grades in college. Finally, one of my “tour guides” made a statement to the other, “maybe she can handle this.” I’ve never forgotten this. Not only did this statement bring me into the profession but also lead me to strive to learn as much as I can and to always look for opportunities to learn more. As a result, in my early days, I worked at an academic medical center where the RTs worked with much autonomy. I learned a lot about respiratory therapy and critical care. The experiences of my first job as a respiratory therapist are fond memories. This clinical foundation was key to steering me to education.

Who were your mentors?

- What/how did they contribute to your career?

I’ve had three mentors who have had an invaluable influence on my career. First was Dr. Shelley Mishoe, who was on faculty at the Medical College of Georgia during my respiratory therapy

education. I found her teaching to be challenging and rigorous with her high expectations but was always fair. About fifteen years later, I was fortunate to have Shelley on my EdD dissertation committee as an outside content expert. Shelley will always be my favorite teacher! My second mentor, Dr. Joe Rau, was vastly influential to my early development as a faculty member. Joe was very methodical, but practical in his teaching and research. I learned from Joe the need to be “efficient” as I navigated my path up the academic ladder. His guidance in becoming a better teacher, researcher and administrator have greatly contributed to my success. The legacy of the RT program at Georgia State University is well known. When Joe retired and I took the departmental reigns from him, I remember thinking “don’t screw this up!” Thanks to Joe and his lasting influence, the department and RT program are thriving. And my third mentor was my major professor, Dr. Margaret Holt at the University of Georgia. She exhibited all the qualities one would expect at the doctoral level. Coming from the perspective of Adult Education, Margaret patterned a different way of “looking” at how learners learn in various contexts, in different settings and how this promotes or inhibits learning. I try to model my work with graduate students in the way Margaret molded me.

How did furthering your education contribute to your career path?

- What got you on your path as an educator?

When I began at Georgia State University, it took about two years for me to realize that if I wanted to stay long-term, then I needed more education. Plus, there were very smart people around me. If I were to be viewed as a peer by my colleagues, then I needed more education. Without the *terminal degree*, it is hard for me to imagine how my career could have taken the trajectory to where I am today. It simply would not have been possible.

What are some key lessons you have learned as: clinician, educator, writer and leader in the profession?

I discovered early as a clinician to always surround myself with people whom I can learn from. Also, as a clinician, I looked for those who worked at a high level of competency. These respiratory therapists were good clinicians in performing tasks, but I also witnessed their interactive skills with physicians while discussing a plan of care or a dialog on mechanical ventilation. Clearly, this was different and not just communication. This motivated me to work towards that level of competency. As an educator, the same key lesson applies: surround yourself with people who are smarter than you so that you can learn from them. One way that I know that my colleagues are intellectually curious is by the impromptu hallway conversations. Joe Rau was very good at this! As a writer, a good lesson to learn early is to read reviewer’s comments and feedback seriously, and to not take it personally. If it is not clear, then it is not clear. This is just a new opportunity to revise and improve on your work. So, do it and don’t let this prevent you from getting a manuscript published. And finally, as a leader in the profession, I have learned that those who serve in any leadership position treasure this profession just as I do. We may have some disagreements, but I always remind myself that they are just as vested as I am as a

respiratory therapist. This requires that we find a way to agree to be the best that we can and to move the profession forward. This necessitates the need for patience but also, the ability to make decisions when needed so that opportunities are not wasted. Strong leaders learn this lesson early.

What would you recommend to new graduate therapists just beginning their career?

For new graduates entering the profession of respiratory therapy, my best advice is to never allow your AARC and CoBGRTE membership to lapse, continue your education to the highest level, read the journal *Respiratory Care* cover-to-cover every month, and attend the AARC Annual Congress as often as you are able. I believe these to be the secrets to maintaining and renewing your connection to the profession.

**Lynda T. Goodfellow, EdD, RRT, AE-C, FAARC is Professor and Senior Associate Dean for Academic Affairs, Georgia State University and a candidate for AARC President Elect.*

Coalition for Baccalaureate and Graduate Respiratory Therapy Education President's Report

David C. Shelledey, PhD, RRT, RPFT, FAARC, FASAHP

August 16, 2019

This has been an extremely busy year highlighted by a number of important events and activities. The CoBGRTE Executive Committee (EC) has continued to meet monthly with a fixed agenda and robust discussions. The annual full Board of Directors (BOD) meeting was held July 22, 2019 in conjunction with the AARC Summer Forum in Fort Lauderdale, Florida. In addition, the CoBGRTE Executive Committee held meetings at Summer Forum with the AARC Executive Committee and a luncheon meeting with the CoARC Executive Committee to discuss opportunities for collaboration to advance the profession. Some of the collaborative activities and opportunities are highlighted below:

- Promotion of the continuing development of the APRT and the support of Advanced Practice Programs seeking accreditation. The CoBGRTE has developed a draft APRT curriculum which is located here:
 - APRT Model Curriculum: <http://www.cobgrte.org/specialarticles.html>
- Marketing and Recruitment for Programs.
 - Enrollment in many respiratory care programs is significantly less than capacity.

There is also anecdotal information regarding closures and planned closures of baccalaureate degree programs due to under enrollment and lack of institutional mission-match. Based on CoARC information, there have been seven baccalaureate degree program closures in the last five years.

- Promotion of degree advancement programs for current RRTs to obtain their BS and/or MS degrees.
- AARC Collaborative Effort to increase the number of baccalaureate programs and baccalaureate graduates.
 - Mentor list
 - Potential faculty list of MSRC Graduates
 - Liaison CAS
- PhD student support to address faculty shortages

As many of our members know, a new respiratory care accreditation agency, the JRC-RCP is being developed under the auspices of CAAHEP with a focus on associate degree programs. CoBGRTE vigorously objected to the development of this additional and unnecessary respiratory care accreditation agency, including sending letters to CAAHEP leadership, contacting CAAHEP board members and helping secure Association of Schools of Allied Health Professions (ASAHP) support in objecting to this new accreditation agency. Unfortunately, the CAAHEP approved the development of this new committee on accreditation at their annual business meeting this past spring. In response, at the CoBGRTE BOD meeting held in conjunction with the AARC Summer Forum, the BOD adopted the following position statement in support of the CoARC:

The Commission on Accreditation for Respiratory Care (CoARC) is the “Gold Standard” for respiratory care accreditation and all respiratory care educational programs should seek and obtain the CoARC’s accreditation.

CoBGRTE continues to follow the JRCRC/NN2/CAAHEP efforts closely.

CoBGRTE also coordinated an effort to send input from program directors regarding the proposed *CoARC 2020 Entry into Practice Standards for Accreditation* to request CoARC keep the BS degree as minimum entry level education for new programs going forward known as Standard 1.01. The CoBGRTE-CoARC relationship remains very positive, collegial, and supportive and Standard 1.01 will likely be retained.

The CoBGRTE Program Committee did an outstanding job in arranging for the annual CoBGRTE seminar held Saturday, July 21, followed by a Roundtable Discussion dinner and plans to offer another Roundtable Discussion event at the AARC Annual Meeting in New

Orleans in November. These are always fun events, so be sure to reserve a seat when the time and place is announced later this fall.

Through continuing to partner with the AARC Collaborative Committee to advance the BS degree, we learned that 24 states allow community colleges to offer BS degrees but only four of those states allow BS RT programs. CoBGRTE continues to work to help associate degree programs convert to the BS degree to include exploration of opportunities for existing associate degree programs to host satellite BS programs so they can offer BSRT degree programs in more areas of the US.

CoBGRTE leadership also reviewed the Draft *AARC Entry to Practice Issue Paper* published earlier this year and put together a team to provide input on this important topic to the AARC. This was done and submitted to AARC President Karen Schell. To summarize, *the CoBGRTE strongly supports entry to the profession for all respiratory therapists at the baccalaureate or graduate degree level and achievement of the RRT credential*. We look forward to hearing about AARC's progress on this issue paper later this year.

CoBGRTE continues to work on a White Paper advocating the value of MSRC programs, as well as partnering with the American College of Chest Physicians (ACCP) to advance respiratory care education and support the further development of the APRT. CoBGRTE leadership continues to participate in the ACCP Respiratory Care Liaison Group meetings at the annual CHEST conference and Jonathan Waugh, PhD, RRT, RPFT, FAARC serves as the CoBGRTE-ACCP liaison.

A highlight of last year's AARC Congress was the CoBGRTE booth in the Exhibit Hall and we've arranged to again have a booth this year in New Orleans. This is a great opportunity for people attending to learn about CoBGRTE and to provide information to interested attendees on all of the BS and Graduate RT programs available to them. Be on the lookout for information requests in order to make sure your program is represented at the booth for the AARC meeting this fall in New Orleans to be held November 9-12.

The Board of Directors election ballot will open September 1, and close September 30, 2019. We have a terrific slate of outstanding candidates for your consideration, so please be sure to vote. Biographical information and candidates' answer to specific questions related to CoBGRTE and the profession were published in the July 29th, 2019 issue of *The Coalition Chronicle*. New officers and newly elected board members will begin their term of office January 1, 2020. Members will also be asked to approve several Bylaws Amendments this fall which are described in this issue of *The Coalition Chronicle*.

Last but not least, be sure and continue to promote CoBGRTE membership among your faculty and students, as well as your clinical affiliates. CoBGRTE represents the very best of our profession, and we need your continuing support if we are to achieve our goal *to make respiratory care education better*.

Bylaws Amendment Proposed

David Shelledy, PhD, RRT, FAARC, FASAHP
Christy Kane, PhD, RRT, RRT-ACCS, RRT-NPS, FAARC

At the annual meeting of the CoBGRTE Board of Directors, the Board approved several changes in the CoBGRTE Bylaws. These proposed changes must now go to the full membership for their consideration. Specifically, amendments to the CoBGRTE Bylaws “shall be made by the approval of two-thirds of Active and Institutional Members present and voting at an annual or special membership meeting or by a special online ballot of Active and Institutional Members.” The proposed amendments are listed below along with the rationale for each suggested change. Language to be deleted is indicated by using a ~~strikethrough~~, while proposed new language is underlined.

Proposed Revision: ARTICLE II – PURPOSE

CoBGRTE, incorporated under the Maine Non-profit Corporation Act, is a non-profit, public benefit corporation organized and operated exclusively for educational purposes within the meaning of Section 501(c)(6) of the Internal Revenue Code. CoBGRTE is governed by a Board of Directors, hereinafter referred to as the Board. The mission, vision, values, strategic goals of the CoBGRTE are as follows:

Mission: to advance respiratory care education.

Vision: to become the global leader for respiratory care education.

Values: excellence, integrity, leadership, advocacy, inclusion, innovation, collaboration, diversity, and dedication to the profession.

Strategic Goals:

1. Transform the profession by advancing quality academic programs, professional knowledge, and faculty resources.
2. Increase the number of graduates from baccalaureate and graduate respiratory care educational programs.
3. Develop a center of academic excellence to provide faculty development and advance the art and science of respiratory care education.
4. Ensure that we have the resources to meet our mission and vision.

The objectives of the CoBGRTE are to:

- A. Maintain a current roster of baccalaureate and graduate respiratory care programs located in regionally accredited colleges or universities in the United States. ~~Respiratory therapy (RT) programs that award the baccalaureate and/or graduate degrees to students upon completion of the program.~~
- B. Provide a means of communication and collaboration among respiratory care educators.
~~RT faculty members in colleges and universities.~~

- C. Assist faculty members who are developing curricula for new baccalaureate and graduate RT programs.
- D. Conduct research related to RT education and the healthcare workforce.
- E. Engage in study and planning related to the development of new baccalaureate and graduate RT programs.
- F. Assist associate degree RT programs to develop consortia and transfer agreements with colleges offering baccalaureate and graduate degrees.
- G. Advocate for development and establishment of baccalaureate and master's degree programs for the education of entry-level respiratory therapists.
- H. Award scholarships to students enrolled in baccalaureate or graduate RT programs.

Justification for Article II Update: CoBGRTE has approved mission, vision, and value statements as well as strategic goals which should be added as a supplement to the current objectives. Minor changes in CoBGRTE objectives are needed to bring them into line with other published materials.

Proposed Revision: ARTICLE IV – BOARD OF DIRECTORS

SECTION 1. COMPOSITION AND RESPONSIBILITIES

A. The Board of Directors shall be at least ~~15~~ 16 active members in number. The Board shall consist of the President, Past-President, President-Elect, Vice-President for Research, Vice-President for External Affairs, Vice-President for Internal Affairs, Secretary, Treasurer, Medical Advisor, Chair of the Institutional Council, and at least seven additional directors.

Proposed Revision: ARTICLE V – STANDING COMMITTEES

SECTION 1. EXECUTIVE COMMITTEE

A. The Board shall elect at its first meeting following the annual membership meeting, an Executive Committee composed of the President, President-Elect, Vice-President for Research, Vice-President for External Affairs, Vice-President for Internal Affairs, Secretary, and Treasurer. All Executive Committee members shall serve for a two-year term. The Immediate–Past President shall serve as a member of the Executive Committee. In the event of a vacancy, the Board may elect a successor from the membership of the Board to fill the vacancy.

Justification for Article IV and V Change: We currently have 15 committees with 80 different charges. We need an executive officer charged with communicating, coordinating and monitoring committee charges, and goals to ensure reports are received on a regular basis, and that progress is made towards achieving committee charges. The AARC has long had such a position in place.

Please do not hesitate to contact David Shelledy (shelledy@uthscsa.edu) or Christy Kane (CKane@bellarmine.edu) if you have questions.

CoBGRTE 2019 Board of Directors Officer Election

Three officer positions (President-Elect, Vice President for Research, and Vice President for External Affairs) are open. CoBGRTE board members will be sent a link to the election ballot. Voting will be open September 1 – September 30, 2019. Each nominee was asked to answer the following questions (see below for answers).

- How can CoBGRTE assist in the further development of the profession of respiratory care?
- How can CoBGRTE support the expansion of baccalaureate and graduate respiratory care education?
- How can CoBGRTE better represent its membership?
- What additional programs, services, or activities should CoBGRTE seek to provide for its members?

2019 CoBGRTE Elections Committee

Christy Kane, PhD, RRT-NPS, RRT-ACCS, AE-C, FAARC, Chair, Bellarmine University

Tom Barnes, EdD, RRT, FAARC, Northeastern University

David Shelledy, PhD, RRT, FAARC, University of Texas Health Science Center at San Antonio

Jonathan Waugh, PhD, RRT, FAARC, Liberty University

Officer Candidates (for a two-year term of 2020-2022):

President-Elect



Gregg Marshall, RRT, RPSGT, RST

Dr. Marshall completed a bachelor of science degree in Biology from Baylor University, an associate in applied science degree in respiratory care from Texas State University, a master of science degree in healthcare administration from Texas State University, and a doctoral degree in education/curriculum & instruction in higher education from the University of Texas-Austin. Professor Marshall has served on the Texas State faculty since 1980 and as the Respiratory Care Department chair since 2003. He is currently also serving as Director of the Texas State Sleep Center with a 4-bedroom accredited sleep center on the Texas State Round Rock campus. He is nationally credentialed as a registered respiratory therapist (RRT), a registered polysomnographic technologist (RPSGT), a registered sleep technologist (RST), and licensed as a respiratory care practitioner (RCP) in the state of Texas. He is a 30+ year member of the American Association for Respiratory Care (AARC) and has served in leadership roles for the Coalition for Baccalaureate and Graduate Respiratory Therapy Education (CoBGRTE), the Texas Society for Respiratory Care (TSRC), the Texas Society for Sleep Professionals (TxSSP), the American Academy for Sleep Medicine, and the American Association for Sleep Technologists. He has authored multiple book chapters and peer-reviewed journal articles on respiratory care and sleep medicine topics and has presented at state, national, and international conferences. Marshall's primary areas of research include mechanical ventilation, oxygen delivery devices, circadian physiology, nasal cycling, and sleep disorders.

He enjoys collaborative interprofessional research with discipline researchers in nursing, physical therapy, social work, psychology, computer science and music.

How can CoBGRTE assist in the further development of the profession of respiratory care?

Since first hearing about CoBGRTE and the purpose/vision for the organization, I was immediately attracted to this group and pleased to be welcomed into membership. CoBGRTE's commitment to advance RC education and to serve the profession as a global leader is essential at this present time in our profession's development and history. CoBGRTE represents a collection of like-minded educators, administrators, therapists, and students that value baccalaureate and graduate education in both entry-level and post-professional levels. Advancing the profession acknowledging the tremendous technology and patient-care knowledge RRT's possess is firmly linked to advancing terminal degrees. Health professional colleagues in other areas of healthcare both appreciate and expect advanced degrees among healthcare professionals.

CoBGRTE largely represents a collection of talented, skilled, accomplished academics dedicated to advancing the profession in a reasonable manner in order to see the profession grow and expand with the changes in future healthcare practices. Academic centers of learning cannot simply continue to teach entry-level skills as they did in the past, they must rise to the occasion to provide their graduates with advanced leadership and research skills as stretch-goals for the profession. The respect and recognition that comes with advanced degrees is a cornerstone to CoBGRTE's strategic goals to transform the profession. The current RT manpower issue is a great concern within the profession and its agencies and CoBGRTE provides a wealth of academic experience from among its members who are dedicated to advanced degree development--whether it be the transition of an associate degree to the baccalaureate level or implementation of a graduate program. The resources for guidance and collegial support represent the very foundation of CoBGRTE. I can honestly say the experienced and accomplished members within CoBGRTE are some of the most rewarding and supportive friendships I have ever known.

How can CoBGRTE support the expansion of baccalaureate and graduate respiratory care education?

CoBGRTE's strategic goals identify its very purpose—to transform the profession by advancing quality academic programs, professional knowledge, and faculty resources. One of the most important roles CoBGRTE can plan within the profession is the development of faculty. The number of master-prepared and doctoral-prepared faculty is small and diminishing as compared to the 170,000+ respiratory therapists in the nation. The average age of the RT faculty member has been quoted as being 55 years of age signaling a “changing of the guard” ahead of us as a profession. Where will these new faculty members come from? Who is encouraging accomplished therapists to consider a profession transition to academia? The future and very survival of the profession is dependent upon the development of new faculty and encouraging therapists to consider the noble career of teaching.

The pressures facing faculty today are significant. Faculty hired on a tenure-track have a limited amount of time to accomplish a focused research agenda resulting in peer-reviewed publications and/or successful grantsmanship. Chairs/program directors are tasked with faculty development and mentoring new faculty in addition to their own teaching/research personal agendas. CoBGRTE is largely composed of educators with impressive experience in academia and research. CoBGRTE successfully serves as a center of academic excellence to provide faculty development and to prepare future faculty to take the profession forward in the decades to come. CoBGRTE has resources available to assist faculty members that are developing curricula for new baccalaureate and graduate programs. For example, CoBGRTE committees have studied associate degree programs in community colleges that are permitted to grant bachelor's degrees and efforts are underway to communicate with community college deans and chairs to suggest how their institutions could become part of the transformation of the profession while demonstrating excellence in degree advancement within their own institution.

How can CoBGRTE better represent its membership?

CoBGRTE has recently had the opportunity to “come to the table” with our profession’s primary tripartite agencies to further explain the mission, vision, values, strategic goals, and objectives of CoBGRTE. In these discussions, CoBGRTE has offered to be of assistance and at the disposal of our primary professional organizations in a supportive role. Our members are served through communication with the professional tripartite through these important engagements to solidify joint goals to advance the profession. In turn, CoBGRTE Committees and Executive Committee reports made back to CoBGRTE members keep information flowing and helps to prioritize efforts. The monthly publication of *The CoBGRTE Coalition Chronicle* is an excellent avenue of communication to spotlight various academic programs and healthcare facilities to assist members in making connections for the future.

Considerable thought is given to CoBGRTE Seminars held during Summer Forum each year to address topics that are helpful and instructive for attendees. The seminars offer continuing education credit and have served as an excellent opportunity to connect with colleagues across the country. Members are solicited for topics of interest to be considered in the future.

What additional programs, services, or activities should CoBGRTE seek to provide for its members?

As I study the activities of CoBGRTE, I believe the organization is doing a very commendable job representing the profession within the missions/goals/strategies set forth. I have never seen a more dedicated group of individuals constantly on the hunt for new ways to support its membership and to provide a network of outstanding and accomplished professionals. I am confident that each committee chair and the Board of Directors for CoBGRTE will continue to seek new areas that might provide additional support and encouragement to its constituents.

As a matter of resources, perhaps an area to consider would be the development and production of Webinars that could also be archived for future reference by members. Although AARC has an excellent webinar format and system, perhaps topics of particular interest to educators might be an attractive resource in the future. As we “ZOOM” into the future, we must remember to harness and take advantage of every technological advancement to reach our

members and support CoBGRTE's essential and primary goal to advance the profession through education and degree advancement.

Vice President for Research



Christopher Russian, PhD, RRT, RRT-NPS, RPSGT, RST

Dr. Russian began teaching in the Department of Respiratory Care at Texas State University in 1999 as a clinical instructor/lecturer and accepted a tenure-track assistant professor appointment in 2002. In 2008, Dr. Russian was tenured and promoted to associate professor and promoted to professor in 2016. He served as Director of Clinical Education for the Department of Respiratory Care for twelve years prior to accepting the title of Program Coordinator for the Master of Science in Respiratory Care. He is nationally credentialed in respiratory care, polysomnography technology, and neonatal-pediatrics. Dr. Russian holds a Bachelor of Science in Kinesiology, a Bachelor of Science in Respiratory Care, and a Master of Education in Physical Education, and a Ph.D. in Adult, Professional and Community Education. Dr. Russian teaches undergraduate and graduate courses in respiratory care and polysomnography. His research experience includes respiratory muscle testing and training, ventilator setting optimization, sleep assessment, learning styles and inter-rater reliability. Dr. Russian has published high quality, peer-reviewed journal articles, textbook chapters, abstracts, and serves as a reviewer for several peer-reviewed national journals. He regularly provides peer-reviewed presentations at state, national, and international conferences.

How can CoBGRTE assist in the further development of the profession of respiratory care?

Healthcare is fraught with uncertainty. Single-party payer or free-market competition, new ways to cut costs, healthcare provider shortages and reallocation of resources are upon us. In this age of uncertainty, administrators are forced to constantly evaluate the most efficient manner to utilize resources. CoBGRTE doesn't have a specific objective to "develop the profession by showing our value" but CoBGRTE is well positioned to impact the respiratory therapy profession through its primary efforts and mission. CoBGRTE must remain the leader in advocating for baccalaureate and graduate education and advancing the educational requirements for entry into practice. This is the fundamental role that can allow the profession to hold its place in healthcare and generate future opportunities for the profession. CoBGRTE must remain steadfast in advocating for the baccalaureate degree as entry into practice. CoBGRTE's role of assisting programs to transition to the baccalaureate degree, to develop consortiums between associate degree programs and baccalaureate degree programs, to assisting with the creation of additional baccalaureate programs will have a positive impact on the profession. Although we have the AARC advocating for us as a profession, they don't have a singular focus on baccalaureate and graduate education. CoBGRTE must maintain that unwavering focus.

How can CoBGRTE support the expansion of baccalaureate and graduate respiratory care education?

Expansion can be viewed in two ways. First, we can expand the number of seats available in the current baccalaureate and graduate respiratory therapy programs. This can be challenging because there are so many factors influencing the number of seats available. For entry into practice programs, the seats available are determined by the clinical site opportunities. If the program cannot place additional students into the available clinical sites, it will be a struggle to convince a program director or The CoARC to allow an increase in enrollment. However, this is a challenge that needs to be repeatedly tested. If all entry into practice programs could increase enrollment, with a goal of reaching 40 students, this would create a huge expansion of baccalaureate and graduate education. CoBGRTE can support this expansion by opening dialogue with program directors about the possibility of increasing student numbers. Program Directors may have anxiety about increasing student numbers because that will mean more faculty to hire, more clinical instructors, more work and a much costlier program. However, CoBGRTE can be a reassuring voice, by way of its dedicated members, that this transition is necessary and worthwhile. Second, we can expand respiratory therapy education by increasing the number of institutions that house a baccalaureate and graduate respiratory therapy program. We need individuals to approach four-year institutions with a proposal to start a new academic program in respiratory therapy. This is a huge task because clinical programs are very expensive. Academia, much like healthcare, is not too keen on starting programs that will cost much more than they generate. So, CoBGRTE can assist by determining the costs associated with four-year respiratory therapy programs, find programs that are able to generate positive revenue, and create a model that can be replicated into other institutions.

How can CoBGRTE better represent its membership?

I think CoBGRTE does a great job of providing a product to its members. The objectives of CoBGRTE are clear and the Board has been diligent about staying focused on those objectives. During the AARC Congress and Summer Forum, CoBGRTE offers a Round Table gathering and a CEU seminar for members and non-members. Also, CoBGRTE makes every effort to represent the members in front of The CoARC, NBRC, AARC, etc. I believe these efforts have to continue. We need CoBGRTE's voice in front of our other national/international organizations. Hopefully, they are viewing CoBGRTE favorably. Nevertheless, they need to know we aren't going away and we are passionate about advancing the profession. CoBGRTE should continue to produce materials that support the vision of baccalaureate and graduate education. This material needs to be in the hands of the members to assist our efforts to recruit additional members. The Coalition Chronicle is a great source of that information. Additional materials should be developed and distributed, through email or on the website, for members.

What additional programs, services, or activities should CoBGRTE seek to provide for its members?

We need more advertising for MSRC programs. We need the profession to view the MSRC as the preferred and most beneficial route when seeking a graduate degree. It is important BSRC graduates leave school and consider the MSRC first versus getting a degree in another field. The infancy of the MSRC is a huge obstacle before us. We have many non-MSRC graduate degree

holders, me being one of them. We don't want the future graduate degree student to overlook the benefits of the MSRC because history implies another degree is more beneficial. I think CoBGRTE does a great job in providing scholarships to students seeking a respiratory therapy degree. This is such a benefit to current and future students. Tuition is expensive and can be a deterrent to enrolling in an academic program. The opportunity to receive a scholarship to assist with tuition costs can make a difference for many students. Scholarship opportunities need to be expanded. CoBGRTE can seek to start or expand its fundraising abilities to generate additional money to be placed in scholarships for baccalaureate and especially graduate education.

Vice President for External Affairs



Douglas S. Gardenhire, EdD, RRT-NPS, FAARC

Dr. Gardenhire began his respiratory therapy career in 1991. During his time, he has served as a staff therapist/educator at several institutions throughout Kansas. He served as a domestic and international transport therapist at the University of Alabama Hospital's Critical Care Transport. In 1998 he started his career in respiratory therapy education serving as the Director of Clinical Education at Labette Community College in Parsons, Kansas. In 2001 he joined the respiratory therapy faculty at Georgia State University (GSU) in Atlanta, Georgia. In 2004 he assumed the role as Director of Clinical Education serving until 2015. In 2016 he was selected Chair of the Department of Respiratory Therapy at GSU.

During his 20 years in respiratory therapy education Dr. Gardenhire has authored numerous publications in aerosol pharmacology. He is author of *Rau's Respiratory Care Pharmacology*, lead author for the AARC's *Guide to Aerosol Delivery Devices for Respiratory Therapist*, chapter author on Airway Pharmacology for *Egan's Fundamentals of Respiratory Care*, as well as chapter author on *Airway Pharmacology and Delivery of Aerosol Drug Therapy* in *Respiratory Care Clinical Lab Competency Manual*. Dr. Gardenhire has garnered over \$400,000 of internal and external grants in respiratory therapy. His research interests continue to focus on respiratory care education and trends, pharmacology, and aerosol product evaluation. His teaching interests include pharmacology and distance education. He created the first fully online course for all majors at GSU which has served over 5000 students since its inception. In 2012 he was selected Educator of the Year by the AARC Education Section. He has served CoBGRTE on the APRT and Accreditation committees.

How can CoBGRTE assist in the further development of the profession of respiratory care?

CoBGRTE has been the advocate for baccalaureate and graduate education and should continue in this role. Additionally, CoBGRTE has and should continue to develop/expand graduate education. I believe CoBGRTE can do this by continuing to foster opportunities through workshops/education events for institution members to collaborate and expand education across the country. The sharing of resources to all members is essential to expanded development.

How can CoBGRTE support the expansion of baccalaureate and graduate respiratory care education?

The support that CoBGRTE and its members provide students through scholarship opportunities has been vital in the support of expansion. I believe investment in our future is the best use of funds. I would like to see the expansion of scholarships and the addition of grants for members and institutions that may need funding to assist in their expansion. State funding for higher education continues to be targeted, as college and university funding continues to shrink. I would support a small increase in institution/individual dues or redirection of funds to develop grant funding opportunities.

How can CoBGRTE better represent its membership?

The expansion of membership would allow for increased funding to position CoBGRTE as the leader in respiratory therapy. This funding, as discussed earlier, will allow for more opportunities to expand the footprint of CoBGRTE. In addition to grants and scholarship, the funding of a science journal would allow an additional avenue for members to spread their scholarship in teaching and learning as it pertains to respiratory therapy. Additionally, a standalone conference for members to share current trends and resources may be beneficial. If possible, smaller regional conferences could begin to decrease costs associated with travel expenses. These regional conferences may serve to compete with other conferences as conference costs continue to rise.

What additional programs, services, or activities should CoBGRTE seek to provide for its members?

CoBGRTE should be the leader in connecting ASRT with BSRT and graduate programs. Activities that assist in bringing educators together can only strengthen the profession as we transition to higher education levels. These activities may assist in garnering an increase in membership.

Professional Positions Posted at <http://www.cobgrte.org/professionalpositions.html>

*Texas State, *Boise State University, *University of North Carolina – Charlotte, *University of Arkansas for Medical Sciences, *Liberty University, *Norton Healthcare, *The University of Toledo, *University of Texas Health Sciences Center – San Antonio, *University of Hartford, *University of Virginia Health System, *Skyline College, *Canisius College, *Boston Children's Hospital, *Nova Southeastern University, *Northern Kentucky University.

CoBGRTE Round Table Discussion Dinner at Tarpon River Brewing and CoBGRTE Seminar at the Marriott Harbor Beach Resort and Spa

Fort Lauderdale, Florida
AARC Summer Forum July 2019
Dr. Chris Russian, Program Committee Chair

During the AARC Summer Forum, the program committee has two charges, arrange the continuing education seminar and plan the round table dinner & discussion. The program committee developed a two CRCE seminar on Sunday, July 21st with the round table dinner and



L-R, Chris Russian, Kim Clark, Richard Wettstein, CoBGRTE members at Seminar

discussion to follow. The seminar was well received, and the speakers and panelists were great. The program committee decided to carry the topics from the seminar over to the round table dinner. Given the make-up of the group – faculty, therapists, physicians, administrators, managers – the dinner offers a unique environment for the respiratory therapy profession community to gather, learn from each other, solve problems, and unwind. Tarpon River Brewing, located in the heart of downtown Fort Lauderdale, played host for the 2019 CoBGRTE Round Table Dinner and Discussion. As usual, the program committee searched for a location with a unique feel, a variety of food and beverage choices, and little bit of history. Tarpon River Brewing managed to capture all three criteria. The 11,000-square-foot tap room and restaurant is held in a warehouse space originally constructed as the Snyder Stables in the 1920's that helped pave the roads of Fort Lauderdale. The historical space includes a 1,000-square-foot house built within the infrastructure using reclaimed and restored barn wood. The staff placed us in the barrel-lined tasting room, and we filled the entire space. The menu features comfort food, chef-inspired appetizers, and a large variety of local brews. Booking a location for the dinner was a challenge this year. Therefore, we were limited in seating to 40 persons. We ended with a final count of 46 attendees, but we managed to find space for everyone. The room acoustics presented some challenges for our dinner discussion but, as usual, the group provided a lot of valuable written information on our table placards. As with all roundtable discussions, we use the dinner as an opportunity to chat about topics that are important to graduate and baccalaureate respiratory therapy education. The discussion topics focuses on 1) recruiting efforts for respiratory care programs and 2) ways to increase graduate education, and 3) topics for the next CoBGRTE program. Table 1 below presents the written statements generated during the discussion.

Table 1: Roundtable discussion comments

1. What are your recruiting efforts?

- On site visits at 4-year universities and community colleges (live/skype information sessions, social media posts).
- On-campus events for diversity affairs/ESTEM, etc. events.
- Presentations to high school/college services courses.
- Visiting A&P/chemistry/science courses on campus to entice students who do not know what RT is.
- Monthly meetings to address concerns/plans for enrichment.
- Teach an A&P college course at nearby campus.
- Work with school to send emails to PA/PT/etc, applicants.
- Open house
- University high school days, HOSA
- Keyword purchases for Google searches.
- Buy lunch regularly to inform/demo RT to college advisors.
- A social media presence (LinkedIn, Facebook, Instagram, YouTube, etc).
- Bring students to campus for simulation demonstration.
- Post information on bulletin boards in RC departments.
- Publicize scholarships opportunities for prospective students.
- Guest lectures at high schools, university orientation, career days, email blasts, word of mouth from current and past students.
- Alumni word of mouth support; stay in touch with alumni-quarterly newsletter.
- Health fairs and health occupation summer camps.
- Facebook Live “open house”
- Booths at state meetings.

2. How can we increase graduate RC education?

- Corporate-sponsored, state society, and graduate assistantships.
- Dean’s support, manager see the need; administrative support.
- For programs (an effective toolkit), students (recruit early and hold to standards)
- Satellite programs
- Increase the pool of eligible applicants (public recognition of RT).
- CAS system
- Increase awareness in the respiratory profession about the importance of continuing to enhance our educational experiences.
- Identify collaborative opportunities that decrease barriers for student’s advancement.
- Lobby for increase scope of licensure.
- Ensure job presentations are written as “masters” or “BS” required.
- Need buy-in from the employers to support the need for graduate degree.
- Must market the profession.

We also asked the dinner participants to comment on topics for the next Round Table Discussion. Table 2 contains those comments. However, if you have a topic you think needs to be discussed, feel free to contact me or anyone on the CoBGRTE Program committee. We are always interested in new ideas.

Table 2. Suggested topics for the next Round Table Dinner & Discussion

<p>Topics for next COBGRTE Program?</p> <ul style="list-style-type: none">▪ Cooperative collaboration of schools to launch a mostly online doctoral program, with a focus on education and clinical transitional research.▪ Working with AS/AAS programs to move to BSRT.▪ Enlisting Hollywood to help educate the public to who we are.▪ Supporting direct entry master's program▪ Slow to make an effective toolbox to aid programs on DA programs.▪ Establishing a satellite program in underserved areas.▪ Help BSRC programs convert to MS-entry level.▪ Methods for changing the mentality of managers/leaders.▪ What can COGRTE organization can do to build the respiratory program.▪ Navigating the process for promotion and tenure (get a Dean for this).▪ Work smarter not harder using your teaching as a lab (research).▪ Conversations to have with Dean and PROVOST when making significant changes to degree program.▪ Adding greater diversity to COBGRTE membership.▪ Benefits of consortia for BA and/or MS programs.

The dinner allows an opportunity to network, recruit new members and discuss topics critical to the advancement of the CoBGRTE mission. Visiting with our academic, clinical and managerial community across the country is an enjoyable and refreshing way to grow our professional expertise. We support one another and solve problems together. This is how we advance the profession. Although there are innumerable topics that could be discussed at these gatherings the program committee is pleased with the entries on the placards.

The seminar was well attended and another big hit. We were very pleased with the seminar presenters. Kim Clark, Megan Koster and TJ Wing have put together something amazing at their respective institutions and we were lucky to have them share their secrets to success. The first hour addressed Marketing and Recruiting Students. Suggestions include online marketing through a third-party vendor, in-person presence at conferences, community colleges, and local hospitals, and being present within your program. Other suggestions from the presenters included building a community-based brand, getting to know the audience you are targeting, send a clear, consistent message, navigating your platforms wisely, diversify your approach to marketing, and address and support student needs. The message that continued to bounce around my head was

“navigating your platforms wisely.” If we are going to reel in lots of applicants to our programs, we must set the hook. There are so many platforms to navigate and how can we possibly be experts in all of them. If you can’t afford to pay for the service, the entire department will need to share the responsibility. Kim was asked to also serve as a panelist for the second hour of the seminar, sitting alongside Rick Wettstein and myself. During this hour we discussed the need for graduate education in respiratory care. Although it seemed our time flew by, so we didn’t get a lot of time to discuss, we pointed out that two types of graduate programs exist, post professional and master’s entry. Both have their merits and reasons to exist. There is clearly a need for graduate education. The two most obvious needs include filling current and future academic positions and healthcare department managers/directors. But we are seeing additional opportunities for master’s prepared respiratory therapists. Such as grant/research coordinators, clinical specialists, clinical liaisons, consultants, research scientists, etc. We must continue to push the message that respiratory therapists wanting to remain in the field should get a graduate degree in the discipline. Nursing leadership sends that message. So, should we.

Overall, the seminar and dinner were a success. The dinner produced enthusiastic discussion and the seminar provided insight and met educational objectives. While the topics provide structure, it is the participation of the attendees that shape the output. The program committee works hard each year to produce events that the membership can enjoy. But we would not be successful without the strong support from the CoBGRTE Board of Directors.

As I look back at past program committee reports it is obvious that new topics are discussed but some topics persist as “wicked” challenges to our profession. I guess this means we will always have something to discuss. Please join us at the next CoBGRTE Round Table Dinner & Discussion in New Orleans, LA at the 2019 AARC International Congress.

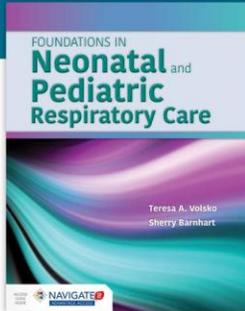
Kudos to the Program Committee: Jamy Chulak, Donna De De Gardner, Nick Henry, Megan Koster, Michele Pedicone, Bill Pruitt, Chris Russian, John Zamjahn

New Member Bonus

New/Renewal CoBGRTE members effective August 1, 2019 will have all of 2020 added as an additional benefit. Take advantage of the bonus at <http://cobgrte.org/membership.html>.

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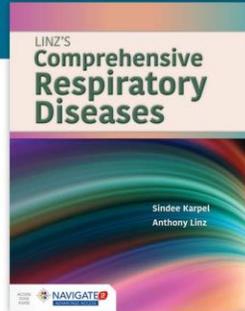
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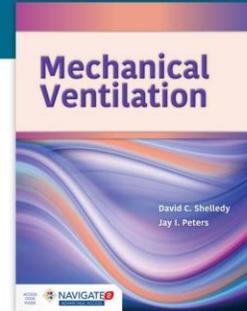
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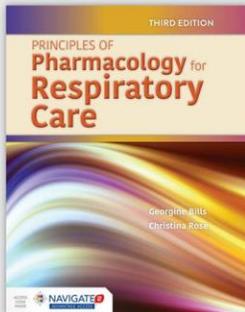
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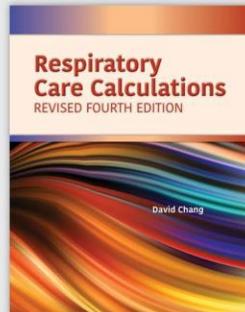
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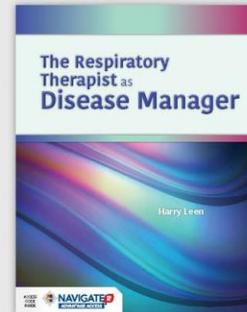
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If you haven't already decided to become a CoBGRTE member after visiting www.cobgrte.org, the following are 14 reasons why you should join the coalition.

Reasons Why You Should Become a CoBGRTE Member

1. Award scholarships to baccalaureate and graduate respiratory therapy students.
2. Assist in the development of ASRT to BSRT Bridge Programs.
3. Collectively work towards the day when all respiratory therapists enter the profession with a baccalaureate or graduate degree in respiratory care.
4. Support a national association, representing the 63 colleges/universities awarding baccalaureate and graduate degrees in respiratory care, to move forward the recommendations of the third 2015 conference.
5. Help start new baccalaureate and graduate RT programs thus leading to a higher quality of respiratory therapist entering the workforce.
6. Work to change the image of the RT profession from technical-vocational-associate degree education to professional education at the baccalaureate and graduate degree level.
7. Mentoring program for new graduates as well as new faculty members.
8. Join colleagues to collectively develop standards for baccalaureate and graduate respiratory therapist education.
9. Develop public relations programs to make potential students aware of baccalaureate and graduate respiratory therapist programs.
10. Help to publicize, among department directors/managers, the differences between respiratory therapists with associate, baccalaureate and graduate degrees.
11. Access to over 72 Spotlight articles on BSRT and RT graduate programs, and major medical centers.
12. Round table discussion dinners and Meet & Greet member receptions held in conjunction with the AARC Summer Forum and the International Congress.
13. Help to support maintaining a roster and web site for all baccalaureate and graduate respiratory therapist programs.
14. Collaborate with CoARC and AARC to improve respiratory therapy education.

Become a CoBGRTE member by completing the application on the Membership Page: <http://www.cobgrte.org/membership.html>

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