

STUDENT PROGRAM HANDBOOK 2025-2028 BACHELOR OF SCIENCE RESPIRATORY CARE (BSRC) PROGRAM



https://skylinecollege.edu/respiratorycarebachelors/

Welcome to the Bachelor of Science in Respiratory Care (BSRC) Program

We are pleased to welcome you to the Bachelor of Science in Respiratory Care Program at Skyline College. The field of respiratory care is a dynamic and evolving discipline—demanding both clinical expertise and professional resilience. By enrolling in this program, you are taking a significant step forward in your professional journey, building upon your prior training and experience as a licensed respiratory care practitioner.

Our curriculum is grounded in a project-based learning model designed to enhance your critical thinking, leadership, and applied skills. The program prepares graduates for a wide range of professional pathways, including healthcare leadership, education, case management, clinical research, field supervision, and advanced academic study. Through this learning experience, you will be equipped to expand your scope of practice, cultivate professional confidence, and contribute meaningfully to the advancement of the respiratory care profession.

This handbook serves as a foundational resource outlining the structure, philosophy, and academic policies of the BSRC Program. It complements the Skyline College Student Guide Handbook and provides essential information regarding expectations, responsibilities, and available support throughout your academic journey. We strongly encourage you to review both documents thoroughly to ensure a clear understanding of the guidelines that will shape your success.

Your growth in this program will be shaped by your commitment, mindset, and engagement with the material. As you progress through the curriculum and continue your development as a Registered Respiratory Care Practitioner, your role as a leader, advocate, and contributor to healthcare excellence will become increasingly vital. Whether leading clinical teams, managing departments, or innovating within your community, your efforts will help elevate the practice of respiratory care and positively impact the lives of those you serve.

We are dedicated to supporting your academic and professional development. We look forward to witnessing your continued success and contributions to the field of respiratory care.

Welcome to the program.

Anrey Bartoszynski- M.Ed., BSRT, RRT-ACCS, RCP *Respiratory Care Professor/*

Respiratory Care Program Lead Skyline College, San Bruno, CA <u>bartoszynskia@smccd.edu</u> Office: (650) 738-74457

TABLE of CONTENTS

Welcome to the Bachelor of Science in Respiratory Care (BSRC) Program	1
TABLE of CONTENTS	
Why get your BSRC, and why at Skyline?	3
Meet the Program's Faculty, Administrative, and Support Team	5
Bachelor of Science in Respiratory Care (BSRC) Program Overview	8
Accreditation	10
Minimum Eligibility Requirements to Enter the BSRC Program	11
Minimum Requirements for the BSRC Program Completion	12
Program Tracks	
College Mission & Program Goals	
New Continuing Education Requirements for California Licensed Respiratory Care Practitioners	20
Baccalaureate Respiratory Care Courses	22
Professional Organizations	28
Counseling, Financial Aid, and Campus Resources	
Skyline College Respiratory Care Practitioner Program Code of Conduct	32
Assignments, Projects, and Participation	36
Returning B.S. Degree Student Policy	36
Etiquette & Netiquette	37
Student Relationships	
Guidelines for Using Artificial Intelligence (AI) as a Student	
Academic Integrity and Self-Plagiarism	

Why get your BSRC, and why at Skyline?

The Bachelor of Science in Respiratory Care program allows current students, recent graduates, and licensed Respiratory Care Practitioners (RCP) a pathway to complete a four-year degree. The program provides needed skills to enhance RCPs performance and professional advancement in today's healthcare environment. Increasingly, Respiratory Care Practitioners are taking on responsibilities, formerly conducted by physicians, requiring a distinguished level of critical thinking and analytical skills.	The Baccalaureate Degree Advancement in Respiratory Care at Skyline College is designed to equip respiratory care professionals with the advanced knowledge and skills necessary to pursue leadership and management positions, engage in health-related research, provide advanced-level patient care, and contribute to the field as educators. The program is fully accredited by the Commission on Accreditation for Respiratory Care (CoARC) . (Program Number: 510016)
Offered entirely online, the Bachelor of Science in Re	spiratory Care (BSRC) Program is structured to

Offered entirely online, the **Bachelor of Science in Respiratory Care (BSRC) Program** is structured to support the needs of working professionals. It promotes academic independence while providing structured guidance from experienced and dedicated faculty.

- 1. The American Association for Respiratory Care (AARC) has collaborated with key stakeholders to initiate an effort to mandate that all respiratory therapists entering practice in **2030** and beyond possess at least a bachelor's degree and hold the National Board for Respiratory Care's (NBRC) Registered Respiratory Therapist (RRT) credential.
 - a. <u>https://www.aarc.org/wp-content/uploads/2019/09/issue-paper-entry-to-respiratory-therapy-practi</u> <u>ce-2030.pdf</u>
- 2. Per The Respiratory Care Board (RCB) of California (October 2023):
 - a. The RCB believes the opportunity for additional access to baccalaureate degree programs for California RCPs will help fill a void in training California's advanced respiratory care workforce and contribute to improved quality of healthcare for the public.
 - b. Expansion of degrees in respiratory care beyond the associate degree level in California is supported by the RCB.
- 3. The Bachelor of Science in Respiratory Care program here at Skyline allows graduates of AS degree Respiratory Care programs and licensed Respiratory Care Practitioners (RCP) a pathway to complete their four-year degree without having to transfer to a four-year college or university.
 - a. Our bachelor degree curriculum provides an advanced scope of practice with emphasis on advanced cardiopulmonary pathophysiology, advanced respiratory case management, advanced respiratory neonatal/pediatrics, health education in respiratory care, research methodology,

quantitative principles, respiratory care sleep medicine, and respiratory care leadership and management.

b. There are approximately 35 programs in California with only a handful offering an educational pathway to <u>baccalaureate</u> degrees. Skyline College being one of them (<u>Skyline CoARC</u> <u>Accreditation</u>).

c. We are Affordable, Flexible, and High-Quality.

i. The Skyline College BSRC Program has been established since baccalaureate Programs in Community Colleges have been approved.

~The lower portion of this page is intentionally left blank~

Meet the Program's Faculty, Administrative, and Support Team

Respiratory Care Program Lead	Anrey Bartoszynski- <i>M.Ed., BSRT, RRT-ACCS, RCP</i> Respiratory Care Professor/ Respiratory Care Program Lead Skyline College, San Bruno, CA STEM Division, Bldg 7-215 <u>bartoszynskia@smccd.edu</u> Office: (650) 738-4457
BS	RC Faculty and Course Assignments
Assigned Course(s)	Name and Contact
 RPTH B10 RPTH B30 RPTH B52 RPTH B90 	Anrey Bartoszynski-M.Ed, BSRC, RRT, RRT-ACCS, RCP bartoszynskia@smccd.edu
• RPTH B15	Kimberly Trotter- MA, RPSGT trotterk@smccd.edu
• RPTH B20	Krystal Craddock- MSRC, RRT, RRT-ACCS, RRT-NPS, AE-C, CCM, FAARC <u>craddockk@smccd.edu</u>
• RPTH B40	Gregory Burns- MAS, BSRC, RRT, RCP burnsgregory@smccd.edu
• RPTH B50	Gregory Burns- MAS, BSRC, RRT, RCP <u>burnsgregory@smccd.edu</u> (From Spring 2025) Katie Sabato- MS, BASc, RRT, RRT-NPS, RCP <u>sabatok@smccd.edu</u> (Retired Spring 2024)
• RPTH B60	Uzoma Nwamuo- MSHCA, BSRT, RRT, RRT-NPS, RCP <u>nwamuou@smccd.edu</u>
• SOCI B10	Tricia Murajda, MA murajdat@smccd.edu
COUN B10	Lorraine DeMello, A.A., B.A., M.A. <u>demellol@smccd.edu</u>

• SOSC B10	Jesse Raskin, JD raskinj@smccd.edu
• COMM B10	Brielle Erike, M.A. erikeb@smccd.edu
P	rogram Support, Staff, and Admin
Title	Name and Contact
Skyline College, Acting President	Newin Paul C. Orante, Ed.D., Acting President oranten@smccd.edu
Skyline College, Interim Vice President of Instruction	Kristy Lisle, Ph.D. lislek@smccd.edu
Dean of STEM Division	Jessica Hurless, M.A. hurlessj@smccd.edu
Allied Health Program Services Coordinator	Shruti Narade ranades@smccd.edu
Academic Support & Learning Technologies Division, Skyline Instructional Designer, (CTTL - Center for Transformative Teaching and Learning)	Andrea Fuentes, M.B.A., M.A. fuentesandrea@smccd.edu (Spring 2025 to Present) Bianca Rowden-Quince, Ed.D. rowdenquinceb@smccd.edu (From 2015 to 2024)
Coordinator of Institutional Effectiveness (Learning Outcomes Coordinator)	Karen Wong, B.A., M.A. wongk@smccd.edu
Skyline Library Academic Support and Learning Technologies — Learning Commons.	Annie Costa, Adjunct Librarian <u>costaa@smccd.edu</u> Ame Maloney, Adjunct Librarian <u>maloneya@smccd.edu</u>
BSRC Program Academic Counselor	Lorraine DeMello demellol@smccd.edu

6

Instructional Aide II,	John Chew, B.A., M.A.
Writing-Reading Center, &	<u>chewj@smccd.edu</u>
English Language Learning	Monique Ubungen
Support	ubungenm@smccd.edu

7

~The lower portion of this page is intentionally left blank~

Bachelor of Science in Respiratory Care (BSRC) Program Overview

Program Structure and Enrollment

The BSRC Program at Skyline College is a **fully online degree program (100% online)** designed for licensed respiratory care practitioners seeking academic and professional advancement. Students benefit from a flexible, affordable, and accredited pathway to earning their bachelor's degree while balancing work, family, and life responsibilities.

Affordability

- Program Cost:
 - \$46 per unit for lower-division coursework
 - \$130 per unit for upper-division coursework
 - Additional costs for books and supplies
 - Most course materials in the BSRC Program—such as articles, textbooks, and other resources—are provided by the instructor as part of our transition to Zero Textbook Cost (ZTC) and use of Open Educational Resources (OER). These materials will be accessible through each course's Canvas shell. Please refer to your instructor's syllabus for specific details regarding required materials.
- Tuition is free for San Mateo County residents; (eligibility and fees are subject to change each academic year based on district policies).
 - Financial aid is also available—students are encouraged to contact Skyline College Financial Aid Services for more information at <u>https://skylinecollege.edu/financialaid/</u>.

Program Format

- Total of 13 courses in the BSRC program
- Course Length:
 - Most courses are 9 weeks in duration
 - The Capstone Project (RPTH B90) is a full-semester course

- Flexible Scheduling Options:
 - Students may choose between accelerated and relaxed tracks
 - Options include taking one course at a time (slower pace) or two courses simultaneously (faster pace)
 - Program completion ranges from 2 to 3 years, depending on chosen pace

Note: Students are required to notify the BSRC Program Lead promptly if they plan to:

- Change tracks
- Drop a course
- Pause program participation This ensures accurate advising and administrative updates.
- Academic Breaks:
 - Winter and Summer breaks are observed
- **Track Options**: Skyline BSRC currently offers **four track options** to accommodate student schedules (details available in the Program Tracks section)

Application Periods & Orientation

- Fall Entry:
 - Application Period: January 15 June 1
 - Bachelors Asynchronous Online Orientation: First week of July through the end of July
- Spring Entry:
 - Application Period: July 1 November 1
 - Online Orientation: First week of December through the end of December

Once Orientation is completed, students will receive enrollment instructions and next steps from the Program Services Coordinator to ensure a smooth transition into the program.

Accreditation

Program Accreditation

The **Bachelor of Science in Respiratory Care (BSRC)** program at Skyline College (Program Number: **510016)** currently holds *Provisional Accreditation* for a Degree Advancement (DA) Additional Track from the Commission on Accreditation for Respiratory Care (CoARC).

This status reflects that the program has submitted a satisfactory Provisional Accreditation Self-Study Report (PSSR), fulfilled all required documentation, and successfully completed the initial on-site visit. CoARC utilizes an outcomes-based accreditation model, focusing on whether programs meet established standards and effectively achieve their educational goals.

Upcoming Site Visit

As part of the ongoing accreditation process, the BSRC program at Skyline College is scheduled for its next CoARC site visit in **June 2025**. This visit will evaluate the program's continued compliance with accreditation standards and support its transition toward continuing accreditation status.

Institutional Accreditation

In addition to CoARC accreditation, Skyline College is accredited by:

- Accrediting Commission for Community and Junior Colleges (ACCJC), part of the Western Association of Schools and Colleges (WASC)
- Recognized by the Council for Higher Education Accreditation (CHEA)

State Accreditation

The **California Community Colleges Chancellor's Office (CCCCO)** and the **Academic Affairs Division** have also formally approved Skyline College to offer the Bachelor's Degree in Respiratory Therapy.

Academic Counseling and Degree Planning

Each student enrolled in the BSRC Program is highly encouraged to meet regularly with an academic counselor to develop and maintain their degree map accordingly. These meetings are essential for ensuring that students stay on track toward successful program completion, make informed decisions about course sequencing, and align their educational goals with graduation and career timelines.

Regular check-ins with a counselor and the program director can also help identify opportunities for support, clarify program completion requirements, and provide guidance on academic progress throughout the program.

Minimum Eligibility Requirements to Enter the BSRC Program

Who is eligible to apply?

- Students currently enrolled in the AS Respiratory Care Program at Skyline College who intend to continue into the BS Respiratory Care Program
 - OR
- Recent graduates from other programs who have completed an accredited Respiratory Care program equivalent to an AS in Respiratory Care and are eligible for California licensure OR
- Licensed Respiratory Care Practitioners who have completed an accredited Respiratory Care program equivalent to an AS in Respiratory Care and are eligible for California licensure

AND

- Completion of a minimum of 30 units from the CSU General Education (GE) pattern, including the "Golden Four", and/or the Cal-GETC pattern (for candidates starting in Fall 2025).
 - A1 Oral Communication
 - A2 Written Communication
 - A3 Critical Thinking
 - **B4** Mathematics/Quantitative Reasoning

OR completion of the Intersegmental General Education Transfer Curriculum (IGETC) for CSU or UC, Cal-GETC.

NOTE: A Pathway To Skyline College's Respiratory Care Baccalaureate Degree For Students Who Have Already Achieved An Associate's Degree From A Commission On Accreditation For Respiratory Care (CoARC) Approved College.

Students who wish to pursue a Bachelor's of Science (BS) degree in Respiratory Care at Skyline College, who have already been awarded an Associate's Degree within the last 3 years from a <u>CoARC accredited college or university</u> in the United States, will be exempt from the Bachelor's Degree <u>lower division major coursework requirements</u> with the exception of three prerequisite courses (RPTH 450: Respiratory Diseases II, RPTH 485: Clinical Medicine Seminar and Professional Development, and RPTH 490: Neonatal and Pediatric Respiratory Care). The evaluation of these three prerequisite courses will be done individually by Transcript Evaluation Services*.

For more information, visit the District Transcript Evaluation Service website.

* Skyline College Respiratory Care faculty have created a crosswalk to assist in the individual evaluation of prerequisite courses.

Minimum Requirements for the BSRC Program Completion

(120 semester units)

Associates Degree Level

Lower Division Coursework

• Completion of lower division Respiratory Care major coursework (or equivalent) as part of an accredited AS Degree.

• *Note: Coursework completed at another institution will be evaluated for equivalency.*

Lower Division General Education Requirements					
<u>Students with Catalog Rights Prior to Fall</u>	<u>Students with Catalog Rights from Fall</u>				
<u>2025</u>	<u>2025 to Present</u>				
California State University General Education	California General Education Transfer Curriculum				
(CSU-GE) Requirement Mapping	(Cal-GETC) Mapping				
 Area A – English Language Communication and Critical Thinking Area B – Scientific Inquiry and Quantitative Reasoning Area C – Arts and Humanities Area D – Social Sciences Area E – Lifelong Learning and Self-Development Area F – Ethnic Studies 	 AREA 1: English Communication AREA 2: Mathematics Concepts and Quantitative Reasoning AREA 3: Arts and Humanities AREA 4: Social and Behavioral Sciences AREA 5: Physical and Biological Sciences AREA 6: Ethnic Studies 				

Students with an AS Degree in Respiratory Care from a COARC accredited college will meet the Skyline College local GE requirements (via the Associate to Associate Pathway policy); however, to graduate they will need to complete the Cal-GETC general education pattern. The notes in Columns C and D identify the Cal-GETC Area requirements they will likely need to complete after their transcript is evaluated and before they can graduate with a BS Degree.

GE Area Requirement	Skyline GE	Cal-GETC (2025-26 catalog rights and later)	Cal-GETC Remaining units
	English Composition	English Composition	
	1 course - 3 units	1 course - 3 units	
1 - English Communication	Oral Communication and Critical Thinking	Critical Thinking and Composition	Student would either need to
Communication	1 course – 3 units	1 course – 3 units	complete an Oral Comm course or a Critical Thinking and Composition
		Oral Communication	course, depending on what they
		1 course – 3 units	transferred in.
2 - Mathematical Concepts and Quantitative Reasoning	1 course – 3 units	1 course – 3 units	
	Arts and Humanities	Arts	
	1 course - 3 units	1 course - 3 units	Student would either need to
3 – Arts and Humanities		Humanities	complete an Arts or Humanities course, depending on what they
		1 course - 3 units	transferred in.
4 - Social and Behavioral Sciences	1 course – 3 units	2 courses from 2 disciplines – 6 units	Student would need to complete a second Social and Behavioral Science course from a different discipline than the first course that was transferred in.
	Natural Sciences (Physical or Life Sciences)	Physical Science	
	1 course - 3 units	1 course - 3 units	
5 – Physical and Biological Sciences		Biological Science	Student would either need to
Liological Colonoco		1 course - 3 units	complete a Biological or Physical Science course, depending on what
			they transferred in.
		Laboratory for Phys/Bio Science - 1 unit	At least one science course is required to have a lab.
6 – Ethnic Studies	1 course – 3 units	1 course – 3 units	Most students will have to take this course because it will be uncommon for a transfer course, unless it's from another CCC, to meet the requirements of this Area.
7 - Kinesiology Activity, Personal Development and Wellness	3 units (minimum of 1 unit from 7A Activity)	Not required	Not required for Cal-GETC

Bachelor's Degree Level

Upper Division Major Coursework (40 units)

 RPTH B10 – Advanced Cardiopulmonary Respiratory Care (3 units) RPTH B15 – Sleep Medicine and Respiratory Care (3 units) RPTH B20 – Advanced Respiratory Case Management (3 units) RPTH B30 – Principles of Health Education (3 units) RPTH B40 – Health Care Research Design and Methodology (3 units) RPTH B50 – Respiratory Care Leadership and Management I (3 units) RPTH B52 – Respiratory Care Leadership and Management II (3 units) RPTH B60 – Advanced Neonatal/Pediatric Respiratory Care (3 units) RPTH B60 – Advanced Neonatal/Pediatric Respiratory Care (3 units) 	BS Program Upper Division Respiratory Care Courses	BSRC Program Upper Division General Education Courses
• KPTH B90 – Respiratory Care Capstone	 Respiratory Care Courses RPTH B10 – Advanced Cardiopulmonary Respiratory Care (3 units) RPTH B15 – Sleep Medicine and Respiratory Care (3 units) RPTH B20 – Advanced Respiratory Case Management (3 units) RPTH B30 – Principles of Health Education (3 units) RPTH B40 – Health Care Research Design and Methodology (3 units) RPTH B50 – Respiratory Care Leadership and Management I (3 units) RPTH B52 – Respiratory Care Leadership and Management II (3 units) RPTH B60 – Advanced Neonatal/Pediatric 	 General Education Courses COMM B10 – Health Communication (3 units) SOSC B10 – Public Health Policy (3 units) COUN B10 – Multicultural Human Relations (3 units) SOCI B10 – Intersectionality and Citizenship

According to the California Community Colleges Chancellor's Office General Baccalaureate Degree Standards (p.74)

All baccalaureate degrees offered by a California community college must meet the minimum requirements outlined in this section. These requirements are designed to ensure that the baccalaureate degrees are equivalent to or exceed the standards of those offered by other regionally accredited community colleges or universities throughout the United States.

Each degree program must include the following:

- 1. A combination of lower-division and upper-division coursework totaling a minimum of **120 semester units** or 180 quarter units that are applicable to a baccalaureate degree, as defined within these guidelines. This includes a minimum of 60 semester units or 90 quarter units at the associate level.
- 2. At least 36 semester units or 54 quarter units of lower-division general education.
- Completion of a minimum of 40 semester units or 60 quarter units of upper-division coursework.
 a. Within that 40 upper-division semester units, at least 9 semester units or 13.5 quarter units of upper-division general education coursework.
- General education requirements must be integrated and distributed across both lower- and upper-division courses.

Resources:

Skyline General Education Webpage:

• <u>https://skylinecollege.edu/transfercenter/generaleducation.php</u>

California Community Colleges Chancellor's Office | Program and Course Handbook

• <u>https://www.cccco.edu/-/media/CCCCO-Website/docs/curriculum/program-course-approval-handbook-8th-e</u> <u>dition.pdf</u>

Summary BSRC Program Completion Minimum Requirements:

- 36 semester units of lower-division general education (AS Degree Level)
- AS Degree Level Respiratory Care Major Coursework Completion from a CoARC Accredited Institution
- 40 semester units of upper-division coursework (BS Degree Level)-- 9 units must be Upper Division General Education Courses

• Total: <u>120 semester units</u>

Important: This course list should be used as a **general guide only**. Students should consult with the **Skyline College Counseling Department** to confirm specific graduation requirements based on individual catalog rights.

(The lower portion of this page has been intentionally left blank)

Program Tracks

<u>Fall Entry</u>

Fall Semester Entry - TRACK 1 (2.0 Years)					
Semester	Term	Months		Course Information	
	1st Half	August to October	RPTH B10	Advanced Cardiopulmonary	
Fall Year 1		August to October	SOCI B10	Intersectionality and Citizenship	
Fall fear 1	2nd Half	October to December	RPTH B30	Principles of Health Education	
	2110 Hall	October to December	COUN B10	Multicultural Human Relations	
	1st Half	January to March	RPTH B50	Respiratory Care Leadership and Management I	
Enring Voor 1		January to March	RPTH B15	Sleep Medicine and Respiratory Care	
Spring Year 1	2nd Half	March to May	RPTH B52	Respiratory Care Leadership and Management II	
2		March to May	RPTH B20	Advanced Respiratory Case Management	
	1st Half	August to October	RPTH B40	Health Care Research Design and Methodology	
Fall Year 2		August to october	RPTH B60	Advanced Neonatal and Pediatric Respiratory Care	
	2nd Half	October to December	COMM B10	Health Communication	
			SOSC B10	Public Health Policy	
Spring Year 2	Full Semester	January to May	RPTH B90	Capstone Project	

Fall Semester Entry - TRACK 2 (3.0 Years)						
Semester	Term	Months		Course Information		
Fall Year 1	1st Half	August to October	RPTH B10	Advanced Cardiopulmonary		
	2nd Half	October to December	RPTH B30	Principles of Health Education		
Spring Voor 1	1st Half	January to March	RPTH B50	Respiratory Care Leadership and Management I		
Spring Year 1	2nd Half	March to May	RPTH B52	Respiratory Care Leadership and Management II		
Fall Year 2	1st Half	August to October	SOCI B10	Intersectionality and Citizenship		
Fall fear Z	2nd Half	October to December	COUN B10	Multicultural Human Relations		
Spring Voor 2	1st Half	January to March	RPTH B15	Sleep Medicine and Respiratory Care		
Spring Year 2	2nd Half	March to May	RPTH B20	Advanced Respiratory Case Management		
	1st Half	August to Ostabor	RPTH B40	Health Care Research Design and Methodology		
Fall Year 3		August to October	RPTH B60	Advanced Neonatal and Pediatric Respiratory Care		
		COMM B10	Health Communication			
	2nd Half	d Half October to December	SOSC B10	Public Health Policy		
Spring Year 3	Full Semester	January to May	RPTH B90	Capstone Project		

Spring Entry

Spring Semester Entry - TRACK 1 (3.0 Years)					
Semester	Term	Months		Course Information	
Enring Voor 1	1st Half	January to March	RPTH B50	Respiratory Care Leadership and Management I	
Spring Year 1	2nd Half	March to May	RPTH B52	Respiratory Care Leadership and Management II	
	1st Half	August to Ostobor	RPTH B10	Advanced Cardiopulmonary	
Fell Veer 1		August to October	RPTH B40	Health Care Research Design and Methodology	
Fall Year 1 —	2nd Half	October to December	COMM B10	Health Communication	
			RPTH B30	Principles of Health Education	
	1st Half	January to March	RPTH B15	Sleep Medicine and Respiratory Care	
Spring Year 2	2nd Half	March to May	RPTH B20	Advanced Respiratory Case Management	
Fall Year 2	1st Half	August to October	RPTH B60	Advanced Neonatal and Pediatric Respiratory Care	
Fall fear Z	2nd Half	October to December	SOSC B10	Public Health Policy	
Spring Year 3	Full Semester	January to May	RPTH B90	Capstone Project	
Fall Voor 2	1st Half	August to October	SOCI B10	Intersectionality and Citizenship	
Fall Year 3	2nd Half	October to December	COUN B10	Multicultural Human Relations	

Spring Semester Entry -TRACK 2 (2.5 Years)					
Semester	Term	Months		Course Information	
Spring Year 1	1st Half	January to March	RPTH B50	Respiratory Care Leadership and Management I	
Spring rear I	2nd Half	March to May	RPTH B52	Respiratory Care Leadership and Management II	
	1st Half	August to Ostobor	RPTH B40	Health Care Research Design and Methodology	
Fell Veer 1		August to October	RPTH B60	Advanced Neonatal and Pediatric Respiratory Care	
Fall Year 1	2nd Half	October to December		Health Communication	
				Public Health Policy	
Caring Veen 2	1st Half	January to March	RPTH B15	Sleep Medicine and Respiratory Care	
Spring Year 2	2nd Half	March to May	RPTH B20	Advanced Respiratory Case Management	
5-11-24-24-2	1 at Light	August to Ostabar	RPTH B10	Advanced Cardiopulmonary	
	1st Half August to October	August to October	SOCI B10	Intersectionality and Citizenship	
Fall Year 2	2nd Half	October to December		Principles of Health Education	
				Multicultural Human Relations	
Spring Year 2.5	Full Semester	January to May	RPTH B90	Capstone Project	

College Mission & Program Goals

Mission Statement

• To empower and transform a global community of learners.

Vision Statement

• Skyline College inspires a global and diverse community of learners to achieve intellectual, cultural, social, economic, and personal fulfillment.

Values Statement

• Education is the foundation of our democratic society.

Program Goal

To provide graduates of entry-level respiratory care professional practice degree programs with additional knowledge, skills, and attributes in leadership, management, education, research, and/or advanced clinical practice. These enhancements will enable them to meet their current professional goals and prepare them for practice as advanced-degree respiratory therapists.

Program Student Learning Outcomes (PSLOs)

Upon completion of the degree requirements, students will be able to:

- Demonstrate the ability to evaluate, assess and apply interventions in areas of respiratory care including sleep medicine, neonatal and pediatric care, adult critical care, and respiratory case management.
- Demonstrate the use of evidence-based-practice and respiratory driven protocols which enhance the critical thinking of the RCP and provide safe patient care.
- Develop and apply transformational leadership principles in healthcare that foster an environment of inclusion in decision making. Employing effective strategies to address various business aspects of healthcare particularly value efficacy and continuous quality improvement.
- Develop and apply effective professional oral and written communication skills and tools that empower autonomy to be an effective member of the healthcare team.

Outcomes Measurements and Evaluation Tools

Program Outcomes

The program assesses and reports annually the following items:

Commission on Accreditation for Respiratory Care (CoARC) Degree Advancement (DA) Annual Reporting:

- Overall Employer Satisfaction
- Overall Graduate Satisfaction
- Overall Personnel-Program Satisfaction
- Overall Student-Program Satisfaction
- CoARC DA Annual Resource Assessment Matrix Report
- CoARC DA Annual Expected Student Learning Outcomes (ESLOs) Report
- Recruitment and Enrollment
- Attrition/Retention Rates

Professional Outcomes

Professional advancement outcomes are measured by:

- Achievement of NBRC advanced credentials (NPS, ACCS, RPFT, SDS, AE-C)
- Advancement to a graduate degree (e.g., MSRC, MHA, MBA, M.Ed., etc.)
- Promotion to leadership roles, research positions, or academic appointments
- Securing positions in healthcare education or at medical institutions

Textbooks and Supplies

Learning will take place in a fully online, asynchronous environment through Canvas, Skyline College's learning management system (LMS).

As part of our ongoing efforts to make the program more affordable, we are actively transitioning most BSRC courses to Zero Textbook Cost (ZTC) status and utilizing Open Educational Resources (OER). While this initiative is still in progress, most course materials—including textbooks, articles, and other instructional resources—will be provided at no cost by the instructor and made available within each course's Canvas shell or through Skyline's Library eBooks.

However, some courses may still require textbooks, which can be purchased through the Skyline College Bookstore or online. These textbooks are carefully selected and will serve as valuable resources throughout your academic and professional journey.

Estimated Textbook Costs: Expect to spend approximately \$150 to \$300 per term on required materials, if applicable.

Technology and Devices

A PC, Mac, or tablet with videoconferencing capability is recommended for engaging effectively in office hours, virtual meetings, and course-related activities. For optimal performance in accessing applications, participating in meetings, and completing assignments, a laptop or desktop computer is highly recommended.

Canvas is compatible with Windows, Mac, Linux, iOS, Android, and any device with a supported web browser. More information can be found here: <u>Skyline Online Education</u>

Additionally, Microsoft Office Suite is required to complete assignments and projects. Students can access a discounted version through the San Mateo Community College District via the following link: <u>CollegeBuys</u>

<u>New Continuing Education Requirements for California Licensed</u> <u>Respiratory Care Practitioners</u>

Continuing Education Requirements (Effective January 1, 2024)

The Respiratory Care Board of California (RCB) has adopted new continuing education (CE) requirements aligned with its most recent workforce study and strategic plan. Currently, respiratory care practitioners (RCPs) must complete 30 hours of CE every renewal cycle, with two-thirds (20 hours) directly related to the clinical practice of respiratory care.

New CE Framework

• A total of **30 hours of CE** is required every two-year renewal cycle.

• At least 25 of the 30 required CE hours must be completed in the following content areas:

1. RCP Leadership

- A minimum of **10 hours** must be directly related to RCP leadership.
- 2. Respiratory Care Clinical Practice
 - A minimum of **15 hours** must be directly related to the clinical practice of respiratory care.

New CE Format

• A minimum of **15 of the 30 required CE hours** must be earned from **live courses or meetings**.

Resource:

- <u>Respiratory Care Board Continuing Education Guidebook link:</u>
 - <u>https://rcb.ca.gov/licensees/forms/new_ce_booklet.pdf</u>

(The lower portion of this page has been intentionally left blank)

Baccalaureate Respiratory Care Courses

Summary of Program Curriculum and Course Student Learning Outcomes

Course Title/Units/Hours and Prerequisite	Course Description	Course Student Learning Outcomes (SLOs)
RPTH B10 – Advanced Cardiopulmonary Care (3 units) Hours/semester: 48-54 lecture. Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program	Provides an analytical framework through which students will expand their knowledge of respiratory diseases, diagnostic procedures, and symptom management. Includes detailed assessment of cardiopulmonary and neuro respiratory diseases, performance of diagnostic testing, medical interventions, and analysis of treatment benefits.	 Evaluate and apply advanced cardiopulmonary diagnostic procedures and medical interventions performed by respiratory care practitioners. Analyze disease-specific treatment options in cardiopulmonary and neuro respiratory care and recommend modifications based on evidence- based practice. Create a care plan for a patient with a cardiopulmonary or a neuro respiratory disease process. Practice interprofessional communication and collaboration in the care of patients with an advanced cardiopulmonary disease.
RPTH B15 – Sleep Medicine and Respiratory Care (3 units) Hours/semester: 48-54 lecture. Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program	Prepares students to apply polysomnography to diagnose sleep disorders. Students will gain knowledge and skills related to the normal development of sleep patterns and demonstrate the ability to identify specific sleep disorders as well as score sleep stages and respiratory patterns. Emphasis is placed on pediatric and adult assessment, monitoring, and sleep disorders.	 Interpret and analyze patient sleep disorders and their characteristics. Identify and apply appropriate tools and strategies for recording physiologic data during sleep studies including the montage and equipment selection, and mechanical and physiologic calibrations. Apply management strategies to titrate continuous positive airway pressure, bilevel positive airway pressure, adaptive servo ventilation, noninvasive positive-pressure ventilation, and supplemental oxygen to achieve optimal outcomes.

		20
RPTH B20 – Advanced Respiratory Case Management (3 units) Hours/semester: 48-54 lecture. Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program	Applied case management in Respiratory Care highlighting facilitation, integration, coordination and transition of patients through the continuum of care. Students effectively apply strategies for collaboration between the case manager, the client, the payer and appropriate service personnel, in order to optimize the outcome while maintaining client privacy and confidentiality, health, and safety through advocacy and adherence to ethical, legal, accreditation, certification and regulator standards or guidelines.	 Analyze patient case management plans created by the healthcare delivery team to coordinate resources and services necessary to accomplish client goals. Identify and apply strategies for assessing, planning, implementing, coordinating, monitoring, and evaluating options and services to promote quality and cost-effective outcomes. Apply professional practice principles such as confidentiality, legal and regulatory requirements, risk management, interpersonal communication, conflict resolution, and negotiation strategies in the context of the case management process.
RPTH B30 – Principles of Health Education (3 units) <i>Hours/semester: 48-54 lecture.</i> <i>Prerequisite: Admission to the</i> <i>Bachelor of Science in</i> <i>Respiratory Care Program</i>	Provides an analytical framework to teach adult learning theory and prepare the student to teach effectively in healthcare and classroom settings. Topics include learning styles, curriculum development, effective teaching techniques, and assessment of learning.	 Apply child and adult learning theory to the creation and delivery of health care related curriculum. Develop a lesson plan that includes outcomes, objectives, content, skills and abilities. Develop an effective assessment tool for assessing lesson plan outcomes.
RPTH B40 – Health Care Research Design and Methodology (3 units) <i>Hours/semester: 48-54 lecture.</i> <i>Prerequisite: Admission to the</i> <i>Bachelor of Science in</i> <i>Respiratory Care Program</i>	Analysis of research design and methodology in health care and health sciences. Emphasis will include research evaluation and interpretation of results, design methodology, the planning and approval process, data collection and analysis, and communication and presentation of the	 Critically review, analyze, and interpret published research. Develop research design, conduct or review a study, critically assess and perform analysis of quality measurement.

	results.	
RPTH B50 – Respiratory Care Leadership and Management I (3 units) Hours/semester: 48-54 lecture. Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program	Leadership and management theories in effective practices in the healthcare setting. Organizational structure of current healthcare models are discussed. Emphasis is placed on development of skills in leadership, communication, time management, problem solving, motivation and other critical competencies. Specific attention is focused on the role of leadership, along with specific functions and operations, in a Respiratory Care Department.	 Articulate a working foundation of leadership practices and theories for leading people and health organizations. Integrate behaviors and actions of successful leaders and develop an individual current or future leadership style. Apply management strategies to various operational procedures and functions of the Respiratory Care department and other related departments.
RPTH B52 – Respiratory Care Leadership and Management II (3 units) Hours/semester: 48-54 lecture. Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program	Application of advanced level of skills learned in Respiratory Care Leadership and Management I through case based model approach in various aspects of providing respiratory health care management. Students will identify and apply strategic models to analyze problems, formulate solutions, and make sound decisions.	 Make inferences and draw conclusions relative to leadership and management skills within the healthcare organization or industry. Integrate the tenets of various theoretical constructs and strategic models to make decisions, solve problems, and develop plans. Distinguish the difference between leadership and management and use that knowledge to make strategic decisions and enhance organizational efficiencies and effectiveness through the development and implementation of plans. Critically reflect on the application of theoretical constructs and strategic methodologies that support peak performance in teams
RPTH B60 – Advanced Neonatal and Pediatric Respiratory Care	Advanced concepts of neonatal and pediatric	1. Differentiate approaches to care between neonatal/pediatric and

24

(3 units) Hours/semester 24.0-27.0 Lecture hours; Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program	respiratory care. Emphasis placed on neonatal and pediatric pathophysiology and on specific therapeutic needs of neonates and children. Students will demonstrate competence in assessment skills, formulation of treatment plans, and application of specific respiratory care modalities for neonatal and pediatric patients.	 adult patients. 2. Distinguish and apply appropriate advanced medical treatments and modalities which can be utilized to appropriately care for neonatal and pediatric patients.
RPTH B90 – Respiratory Care Capstone Project (4 units) <i>Hours/semester: 128.0 Field</i> <i>Experience Hours. Prerequisite:</i> <i>RPTH B10, with a minimum</i> <i>grade of C and RPTH B20 with</i> <i>a minimum grade of C and</i> <i>RPTH B30 with a minimum</i> <i>grade of C and RPTH B40 with</i> <i>a minimum grade of C and</i> <i>RPTH B50 with a minimum</i> <i>grade of C.</i>	Capstone course in Respiratory Care focused in areas of advanced cardiopulmonary respiratory care, leadership and management, case management, research, education, or other special areas of interest. Students will identify and complete a project applying knowledge and skills learned in the program. Projects will be developed in collaboration with faculty and community members and are aligned with student areas of interest. Transfer credit: CSU.	 Draw on multiple evidence-based practice sources of analysis, research, and critical thinking across the curriculum to develop addressing a problem and completing a project. Develop a project plan for addressing the research question, issues, problem or need. Evaluate project methods, findings, and outcomes. Present orally and in writing the full breadth of knowledge gained through the Respiratory Care program, focusing on one or more subject areas: cardiopulmonary pathophysiology, case management, health education, respiratory care leadership and management.

25

What is a Capstone Project?

• The capstone project serves as a culminating experience for students, enabling them to demonstrate the cumulative knowledge and skills acquired throughout their academic program. It provides an opportunity for students to integrate and apply what they have learned to real-world projects or problems, aligning with their areas of interest. Through the capstone project, students will identify and complete a project that requires them to conduct research, analyze data, propose solutions, and present

their findings to faculty, peers, or external stakeholders. These projects are developed collaboratively with faculty and community members. Ultimately, the purpose of the capstone project is to showcase students' readiness for professional or academic advancement by demonstrating their ability to tackle complex challenges and produce meaningful outcomes.		
	Upper General Education Courses	
COUN B10 – Multicultural Human Relations (3 units) Hours/semester: 48-54 lecture. Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program	Designed to engage students in an evolving process of developing greater self and cultural awareness that will help inform how we work with communities specific to various professional settings. Examination of various intersectionalities such as ethnicity, gender, class, sexual orientation, and generational identity and the effects that the dynamics of power and privilege have on systemic oppression. Also utilizes a psychosocial perspective to explore various theoretical frameworks that strive for greater cultural competency throughout their professional development.	 Analyze multiple identities through the lens of intersectionality such as ethnicity, gender, class, sexual orientation, and generational identity. Utilize tools and strategies for intercultural communication and conflict resolution to appropriately work with communities specific to various professional settings Transform theories to practice when addressing systems of oppression that are underlying in their professional settings
COMM B10 – HEALTH COMMUNICATION (3 units) <i>Hours/semester: 48-54</i> <i>lecture. Prerequisite:</i> <i>Admission to the Bachelor of</i> <i>Science in Respiratory Care</i> <i>Program</i>	Critical exploration of health communication concepts, theories, research methods, cases, and other practices applied in addressing real-world health issues, administration, and decision-making. Addresses health communication approaches in the planning, implementation, and evaluation of health promotion and behavior change campaigns.	 Analyze and discuss the theories, models, and organizational issues and strategies in healthcare. Examine and assess health promotion materials and behavior change campaigns. Research, design and cohesively present a team health promotion.
SOCI B10 – Intersectionality and Citizenship (3 units)	Exploration of the intersection of identities: race, ethnicity,	1. Recognize and demonstrate a

. <u></u>		27
Hours/semester: 48-54 lecture. Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program	socioeconomic class, gender, and citizenship status. Students will explore and analyze how race and ethnicity are socially constructed and intersect with identities such as class and gender. Provides students theoretical frameworks for assessing these constructs and their consequences.	 knowledge of sociological perspectives and theories relating to the social constructs of race and ethnicity in the United States. 2. Appraise the constructs of race and ethnicity in the context of intersectionality (the intersection of identities of race, ethnicity, gender, socioeconomic class, citizenship status). 3. Assess and articulate theories and concepts on race and ethnicity through written and verbal presentation. 4. Evaluate current social issues and debates regarding race and ethnicity through the use of the sociological imagination.
SOSC B10 – Public Health Policy (3 units) Hours/semester: 48-54 lecture. Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program	Exploration of health policy and management core topics in the study of health and health care delivery. An interdisciplinary approach will be used that emphasizes diverse perspectives on health care policy in the U.S. Students will develop an understanding of fundamental ideas and problems in the areas of health and medical care.	 Appraise healthcare policy and programs from sociological, political, economic, legal, and ethical perspectives. Summarize and discuss contemporary health policy problems and issues. Develop and evaluate possible solutions to important healthcare problems.

Course Rubrics and Program Grading Threshold

Each course within the Bachelor of Science in Respiratory Care (BSRC) program includes its own specific rubrics tailored to the course content, outcomes, and assignments. These rubrics are developed by the instructor of record based on the course's unique specialty area and are available within each course's Canvas shell. Students are encouraged to review the rubric for each assignment to understand how their work will be evaluated and to support their academic success.

To successfully complete a course in the BSRC program, students must achieve a minimum final grade of 70%. This threshold reflects the program's academic standards and ensures that students demonstrate the required level of competency for progression and graduation.

Professional Organizations

Professions and their members are represented by organizations that work for the benefit of the profession. Respiratory Care is no exception. Professional organizations exist at the national and state level. The organizations are affiliated and have chapters in each locality.

The organization's main goals are to promote the profession both from within and outside, to provide educational and professional conferences, disseminate information through scientific and professional journals and promote within government the interests of respiratory care professionals.

All students in the program are expected to maintain student membership in these organizations. The mailing addresses for these organizations are:

American Association for Respiratory Care (AARC)	California Society for Respiratory Care
9425 N. MacArthur Blvd. Suite 100	(CSRC)
Irving, TX 75063-4706	3868 Howe St. #1
USA	Oakland, CA 94611
Phone (972) 243-2272	Email: office@csrc.org
Fax (972) 484-2720	Toll Free: 888/730-CSRC (2772)
E-mail: info@aarc.org	

Students are also encouraged to request the following free publications.

- RT Magazine
 - <u>http://www.rtmagazine.com/</u>

Credentialing and Licensure

In California, two entities are involved in your ability to practice as a Respiratory Care Practitioner: the State of California Respiratory Care Board (RCB) and a peer organization, The National Board for Respiratory Care (NBRC). The state credential is a Registered Respiratory Care Practitioner (RCP), and the national credential is a Certified & Registered Respiratory Therapist (CRT & RRT). To qualify for state licensure, you are required to obtain the higher competency credential, RRT.

The NBRC also provides for competency credentials in the following areas:

- Adult Critical Care Specialist
- Certified and Registered Pulmonary Function Technologist
- Neonatal/Pediatric Specialist
- Sleep Disorder Specialist
- Asthma Educator- Certified
- Chronic Obstructive Pulmonary Disease Educator

Addresses for the two credentialing organizations are:

<u>California Licensing Board (</u> RCB) Respiratory Care Board of California	National Credentialing Board National Board for Respiratory Care (NBRC)
3750 Rosin Court, Suite 100	
Sacramento, CA 95834	NBRC Executive Office
	10801 Mastin Street, Suite 300
Toll Free: (866) 375-0386	Overland Park, KS 66210
Phone: (916) 999-2190	
Fax: (916) 263-7311	Toll Free: 888.341.4811
	Phone: 913.895.4900
Email: <u>rcbinfo@dca.ca.gov</u>	Fax: 913.712.9283
• The Respiratory Care Board is open Monday - Friday from 8am - 5pm, with the exception of <u>State Holidays</u> .	Email: <u>info@nbrc.org</u>

Counseling, Financial Aid, and Campus Resources

COUNSELING

The Skyline counseling department is available for academic or personal guidance. This department should be used for all class registration, questions on academic requirements and personal guidance. The school also employs a professional psychologist. Students in demanding programs sometimes need professional help to handle stress. Do not hesitate to contact your counselor early. Do not hesitate to talk to the program director or other faculty members.

The counselor assigned to the BSRC program is:

- Lorraine DeMello
- demellol@smccd.edu
- 650-738-4424

FINANCIAL AID

Due to the academic demands of the respiratory care program, work life balance can still be difficult even with the flexible schedule options. The college does recognize that many students may have financial obligations necessitating work. If you are challenged with finances, there are grants and loans that may be available to you. To assess qualification for financial aid support, **please contact the Financial Aid Office**.

Scholarships also exist for respiratory care students. Here is a partial list:

- The Respiratory Care Therapy Scholarship Fund
- Skyline College Respiratory Care Scholarship Fund
- Lambda Beta Society
- American Association for Respiratory Care
- Breathe California Bay Area
- California Society for Respiratory Care
- California Thoracic Society
- Kaiser Scholarship Foundation and Loan Program
- Grove Scholars Program
- Rotary Club of Palo Alto, Robert Smithwick Vocational Scholarships

Please contact the program director for more information regarding scholarships.

CAMPUS RESOURCES

- As Skyline Students you have the option to utilize SparkPoint services and resources to achieve financial stability.
- SparkPoint services and resources are bundled and sequenced to make the most of what we have to offer, and they are integrated with the network of Student Services provided by Skyline College.
- This site provides information about SparkPoint Services -- contact SparkPoint if you have any additional questions!

• SparkPoint at Skyline College

Address: Building 1, Floor 2 Room 1-214 San Bruno, CA 94066 Phone#: 650-738-7035



• Other Sparkpoint Services: https://skylinecollege.edu/sparkpoint/

- This includes but not limited to:
 - Public benefits support
 - Student food grants
 - Free groceries
 - Tax services
 - Grove Scholars Program
 - Legal clinic and more

<u>Office Hours</u> Monday - Thursday: 8:00am - 4:30pm Friday: 8:00am - 1:00pm

Skyline College Respiratory Care Practitioner Program Code of Conduct

Professional Conduct Policy for Respiratory Care Students

All students enrolled in the Associate of Science in Respiratory Care (ASRC) and/or the Bachelor of Science in Respiratory Care (BSRC) programs at Skyline College are expected to uphold the highest standards of professionalism, integrity, and ethical behavior. These expectations are in accordance with the Skyline College Student Code of Conduct, the Due Process Policy, and the policies of the San Mateo County Community College District.

Due to the professional responsibilities and leadership roles respiratory care practitioners fulfill, students must consistently demonstrate behavior aligned with the standards of the respiratory care profession.

ASRC Program – Clinical and In-Person Expectations

Students enrolled in the **ASRC program**, which includes in-person classroom instruction, simulation labs, and clinical rotations at affiliated healthcare facilities, are expected to demonstrate professionalism in all academic and clinical settings.

Professional conduct is expected in the following environments:

- On-campus classrooms and labs
- Simulated clinical environments
- Hospitals and clinical agencies affiliated with the program
- Allied health and instructor offices

ASRC students must:

- Interact with peers, faculty, clinical instructors, and staff with respect and courtesy
- Uphold patient confidentiality, dignity, and rights during clinical rotations
- Adhere to all rules and protocols established by clinical sites
- Dress and behave in a manner that reflects professionalism and readiness for patient care
- Represent Skyline College and the respiratory care profession with integrity in every clinical encounter

BSRC Program – Online Professionalism Expectations

Students enrolled in the **BSRC program**, which is delivered **100% online**, are expected to demonstrate the same high standards of professionalism and respect in all virtual learning environments.

Professional conduct is expected at all times, including but not limited to the following situations:

- Online class discussions and forums
- Group projects and collaborations
- Virtual meetings or office hours with faculty or peers

BSRC students must:

- Communicate clearly, respectfully, and professionally in all online interactions
- Meet academic integrity standards, including proper citation and independent work
- Engage fully and responsibly in online learning, demonstrating accountability and leadership
- Represent themselves and the program with honesty and professionalism in all communications

Consequences of Academic Dishonesty:

Academic and student disciplinary sanctions may be applied in cases of academic dishonesty. Depending on the seriousness of the infraction, you may:

- Receive a failing grade on a test, paper, or examination which may result in a lower course grade or failure in the course.
- Have your course grade lowered, or possibly fail the course.

Under the standards of Academic Sanctions and Disciplinary Sanctions, you may be subject to:

- A warning
- Temporary exclusion from an activity or class
- Censure
- Disciplinary probation
- Suspension
- Expulsion

The Dean of Enrollment Services/Disciplinary Officer maintains a record of students who have engaged in academic dishonesty. This information is used to identify and discipline students who have been reported for academic dishonesty more than once.

Student Appeals:

In all instances, a student who has been subject to an academic or disciplinary sanction has the right to appeal the decision of the professor or administrator in accordance with established College due process procedures. Refer to Student Grievance and Appeals Policy in the Student Handbook.

Commitment to Professionalism

Whether in-person through the **ASRC program** or online through the **BSRC program**, students are representatives of **Skyline College** and the **respiratory care profession**. Demonstrating professionalism is not only an academic requirement—it is a foundational expectation for those who seek to enter or advance within the field as **respiratory care practitioners**.

As students progress in their education—whether advancing their degree, obtaining higher credentials, pursuing leadership roles, engaging in research or academia, contributing to legislative advocacy, leading community initiatives, or participating in outreach and public health improvement projects—the **community expects them to uphold the highest standards of professionalism**. This includes integrity, accountability, cultural humility, and a strong commitment to improving the quality of life for the individuals and populations they serve.

Students are expected to reflect the core values of the respiratory care profession and Skyline College, both during their time in the program and as they continue to grow as practitioners, educators, advocates, and leaders.

Failure to meet these professional standards may result in disciplinary action, in accordance with the policies of Skyline College and the Respiratory Care Program.

Types of Violations May Include But Not Limited to:

1. Field Violations

- 1. Theft of the College or Hospital/Clinical Agency property
- 2. Violation of Patient/Client confidentiality (HIPAA)
- 3. Leaving the clinical agency or simulated lab without reporting off as instructed (i.e. Patient Abandonment)
- 4. Tape recording, using electronic listening or copying or data collection devices to record medical information about clients/patients or their families, improper use of information including information contained in hand written notes, PDA or other data collection methods obtained for use to prepare or care for assigned patients.
- 5. Photocopying any document without his/her knowledge or consent;

- 6. Tape recording an instructor without his/her knowledge or consent;
- 7. Improper use of tape recordings permitted because of a documented disability requiring the use of tape recorders.
- 8. Violation of Skyline College Associate and/or Bachelor Degree Respiratory Care Practitioner Program HIPAA Policy.
- 9. Physical or verbal insults; threats of profanity, ethnic or racial slurs, or unprofessional interactions or comments with other students, faculty, staff, clients/patients agencies, the simulated clinical laboratory, computer laboratory, facility staff, any healthcare providers, administration, and other stakeholders.
- 10. Violation of any AARC Code of Ethics

2. Academic Violations

- 1. Violation noted under the <u>Academic Integrity and Honesty Bylaws</u>. This includes but not limited to: Cheating, plagiarism (including self-plagiarism without proper citation), alteration or misuse of college or hospital/clinical agency documents, records, equipment or computer data.
- 2. Physical or verbal insults; threats of profanity, ethnic or racial slurs, or unprofessional interactions or comments with other students, faculty, staff, clients/patients agencies, the simulated clinical laboratory, computer laboratory, classrooms, virtual meetings, online discussions, in any digital platform, or in the program or faculty offices.
- 3. Violation of district Student Code of Conduct Bylaws
- 4. Verbal or physical behavior which obstructs or disrupts teaching, learning, patients/clients care, or the administration of the respiratory care program.
- 5. Disruption of in-person or online learning to peers and the program.
- 6. Furnishing false or misleading or altered information or documents to the Skyline College Associate and/or Bachelor Degree Respiratory Care Practitioner Program or instructors.
- 7. Violation of Colleges Policies and Procedures from Student Handbook.
- 8. Violation of Student Privacy Rights

Assignments, Projects, and Participation

- Timely completion of assignments and projects is essential to your success and to the success of your student colleagues in the teaching and learning environment.
- Most assignments are intended to be completed individually. However, some are collaborative in nature and require timely, high-quality contributions to support individual, group, and class learning. For example, discussion board assignments rely on active and punctual participation from all students to maximize collaborative engagement. Some assignments may also be completed in group formats that require teamwork and coordination.
- Instructors will clearly define expectations for each assignment and project, including grading criteria that reflect professional standards, comprehension, and adherence to deadlines.
- Students are encouraged to maintain open and effective communication with instructors, team members, and support personnel whenever questions arise or clarification is needed regarding any expectations.
- Instructors will also provide clear expectations for overall course participation. Please read the syllabus for each course carefully to understand course length, pacing, and expectations.
- For all meetings and conferences, whether in-person or online, arrive on time and be prepared to engage meaningfully.

Returning B.S. Degree Student Policy

We understand that, on occasion, students accepted into the Bachelor of Science in Respiratory Care (BSRC) Program may need to take a leave of absence from their coursework. Students in the process of completing upper-division coursework may return at any time to resume and complete their classes. Please note that all required prerequisite courses, as outlined in the course catalog, must be completed prior to re-enrollment.

Each returning student's case will be evaluated individually.

ACADEMIC RECORD

Applicable academic records are accessible on a need-to-know basis by the Program Director, faculty, counselor, and Program Services Coordinator in order to evaluate a student's academic standing as needed for the program.

ACADEMIC REQUIREMENTS

While grades do not fully define the kind of respiratory care practitioner a student will become, they serve as an important measure of a student's retention of knowledge necessary for safe and competent practice. Therefore, a minimum grade of "C" (70%) is required in all BSRC courses.

If a student is unable to achieve this minimum requirement, options for continuation in the program will be assessed and developed by the Program Director. The Program Director's decision regarding a student's continuation in the program will be based on the following criteria:

- The student's academic standing, attendance, professionalism, and behavior while enrolled in the program
- The reason(s) for the student's academic difficulties
- The potential for resolution and improvement in academic performance
- The development and implementation of a Student Success Plan
- Faculty assessment of the student's potential to successfully complete the program

Etiquette & Netiquette

As a Respiratory Care Practitioner, professionalism is expected at all times—even in virtual environments. Faculty, staff, and student colleagues are expected to maintain a respectful, professional, and supportive attitude, especially when differences of opinion or disagreements arise.

The guidelines that govern online communication are known as *netiquette*. These not only include rules of behavior during discussions but also etiquette that reflects the unique nature of online interaction. Remember: your time online is also someone else's time. Respect for others' time, privacy, and dignity is essential.

To communicate effectively and professionally in our online environment, please adhere to the following rules:

- Avoid typing in all caps. This is equivalent to shouting and is considered impolite.
- Do not plagiarize. Always give credit where credit is due when referencing someone else's work.
- Keep personal information private. Protect your own and others' confidentiality.
- Avoid foul or offensive language. This is a professional forum—always present yourself with professionalism.
- Use correct punctuation, grammar, and spelling. Clear and professional writing reflects your

attention to detail.

- **Read first.** Review questions, instructions, and assignments thoroughly before posting or asking questions—your answer may already be there.
- **Be kind.** Although online communication may feel anonymous, remember there is a real person behind every screen name. Engage respectfully, even in disagreement.

Student Relationships

Throughout the program, students will share a wide range of experiences. It is important to understand that there is no need for competition among peers. Some students may enter the program with more knowledge of respiratory care, while others may have less. It is essential to recognize that no one—not even instructors—knows everything.

The primary goal is to support, teach, and learn from one another. Students and faculty are partners in creating a collaborative learning environment and building meaningful relationships that may last beyond the duration of the two-year program. Students are encouraged to address instructors by their names or titles to help foster a respectful, professional, and supportive atmosphere.

Additionally, the program offers a Respiratory Care Club through the Student Organizations and Clubs at Skyline College. Participation in this club is encouraged, as it provides valuable opportunities for academic enrichment, leadership development, and the cultivation of professional skills essential to becoming effective respiratory care practitioners and future leaders in healthcare.

Guidelines for Using Artificial Intelligence (AI) as a Student

As technology evolves, so does academia. A good rule of thumb when using AI as a student is to **supplement**, not replace, your learning and critical thinking. AI tools can offer valuable assistance with research, data analysis, and study organization; however, they should not be relied upon as a substitute for understanding the material or developing your own insights. Remember, **you are the conductor—AI is your assistant, not your boss!**

Below are guidelines for responsibly and effectively using AI tools as you progress through the BSRC program:

- Use AI as a tool, not a crutch: While AI can help streamline tasks and provide additional resources, it's essential to stay actively engaged with the material and build your understanding independently.
- Verify and cross-reference: Always double-check the accuracy and credibility of AI-generated information, especially when using it for academic research or writing. Cross-reference with reputable

sources to ensure information is reliable and up to date.

- Understand limitations: AI algorithms may have biases or limitations based on the data they are trained on. Apply your critical thinking skills when interpreting AI-generated content.
- **Maintain academic integrity**: When using AI tools to assist with writing or generating content, ensure you are not plagiarizing or violating academic honesty policies. Use AI-generated content as a starting point, and be sure to edit, modify, and properly cite any sources used. Don't forget to credit all external content appropriately.
- Seek guidance when needed: If you're unsure how to use AI tools effectively or ethically, reach out to your instructors, librarians, or academic advisors. They can provide support and clarity in navigating AI use in academia.

In summary, approach AI use with a balanced mindset—leveraging the strengths of modern technology while preserving the core values of traditional learning and academic integrity.

Academic Integrity and Self-Plagiarism

Maintaining academic honesty is essential to your success in the BSRC Program and to upholding the integrity of the respiratory care profession. One important aspect of this responsibility is understanding the concept of **self-plagiarism**.

What Is Self-Plagiarism?

Self-plagiarism occurs when a student reuses their previously submitted work and presents it as new, without proper citation or substantial new contribution. According to the **APA 7th Edition (Section 8.3)**, once an assignment has been submitted in an academic setting, it is considered "published." Reusing that material in future assignments requires citation just as you would with any other source.

It is important to recognize that **building on prior work**—especially in a program that includes progressive or cumulative projects—is encouraged. However, this does **not** mean copying and pasting large sections of a previous paper into a new one. Even if the work is your own, submitting it again without clear attribution constitutes self-plagiarism and violates academic integrity policies.

Acceptable Use of Your Previous Work

You may incorporate portions of your previous work under the following conditions:

- **Vou must properly cite yourself** using APA 7th Edition style.
- **Only a small portion** (a few sentences or a short paragraph) should be reused, and only if it directly supports the purpose of the new assignment.
- V The reused content must be **relevant**, **justified**, and should not replace new, original analysis or insight.
- V Avoid reusing entire papers or large sections of prior work.

How to Cite Yourself (APA 7th Edition)

If you include content from a previously submitted paper, cite it like this:

Smith, J. (2024). *Title of the previous paper*. Unpublished manuscript, [Course Name], [Institution Name].

This citation makes clear that you are the author and that the work has already been submitted in a prior academic context.

Paraphrasing and Citation

Paraphrasing is the process of rewording and restructuring an original source using your own words while preserving the meaning of the original content. When paraphrasing, you **must still provide a proper citation** to credit the original author.

To avoid plagiarism of any kind:

- Use your own voice to paraphrase ideas and integrate them into your work.
- Include in-text citations and a complete reference list for all sourced content, following current APA Edition formatting.
 - For more support contact CTTL
 - Website: <u>https://skylinecollege.edu/cttl/</u>
 - Location:
 - Skyline College
 - 3300 College Drive, Suite 5-118
 - San Bruno, CA 94066
 - Phone: 650-738-7080

More Resource:

Plagiarism and Artificial Intelligence Guidance, SMCCD District Academic Senate
 <u>https://smccd.edu/academicsenate/plagiarismaiguidance.php</u>

Upholding Integrity

<u>Understanding Turnitin: What You Need to Know as a Respiratory Care Student at Skyline</u> <u>College</u>

Welcome to the Respiratory Care Program at Skyline College! As you begin your academic journey with us, one of the tools you'll become familiar with is **Turnitin**. Turnitin is an online application used by many colleges and universities—including Skyline College—to support academic writing and help uphold integrity in your coursework.

What is Turnitin?

Turnitin is a platform that checks your written assignments for similarity by comparing your work to a vast database of academic papers, articles, websites, and student submissions worldwide. This generates a **Similarity Report** which highlights parts of your submission that match other sources.

Think of Turnitin not just as a "plagiarism checker," but as a **learning tool** that helps you improve your writing, avoid accidental plagiarism, and develop strong academic habits.

How Do I Use It?

Your instructors may ask you to submit essays, reflection papers, or other written assignments through Turnitin. In most cases, this will be done directly through your **Canvas** course shell. After you submit your work, Turnitin will generate a Similarity Report showing what percentage of your paper matches other sources.

- A low percentage (generally under 20%) is often considered normal, depending on the type of assignment.
 - **0–20%**: Usually acceptable, especially for research papers or assignments that include proper citations.
- 21–29%: May prompt instructor review and feedback on improving citation and paraphrasing.
- **30% or higher**: This may typically result in a more formal review. If the report shows questionable similarity, the **instructor may consult with the Program Director** to create a **Progress Plan** that addresses the issue and supports your success.
- 50% or higher: If your similarity report is 50% or greater, and the faculty's initial review confirms plagiarism, and absence of proper citation, the Program Director must be notified immediately. At

this point, the Academic Integrity and Honesty policy is activated, and we will meet with you to:

- Review the findings,
- Identify the root of the issue,
- Provide guidance on proper academic practices, and
- Collaboratively create a plan for moving forward to support your success in the assignment and the course.

Our goal is not to penalize but to **support you in becoming a responsible and successful student**. Mistakes can be powerful learning opportunities, and we're here to help you every step of the way.

What Happens if the Similarity is High?

If your Turnitin report shows a high similarity score, it doesn't always mean you've intentionally done something wrong—but it does mean we'll need to take a closer look. In line with Skyline College's Academic Integrity and Honesty Guidelines, we'll work with you to create a Progress Plan to address the issue.

This may include:

- Reviewing proper citation practices
- Providing additional writing support
- Giving you a chance to revise and resubmit
- Helping you build the skills needed to succeed not just on that assignment, but throughout the course

Our goal is always to support you—not to penalize you—and to ensure you're learning and growing through each experience.

🤝 Where Can I Get Help?

If you ever have questions about Turnitin or your Similarity Report, the **first step** is to reach out to your **instructor for that course**. They can give you the best guidance specific to that assignment.

If you need further support, don't hesitate to contact your **Respiratory Care Program Director**—we're here to help and ensure you feel confident and prepared.

BSRC Program Learning Outcomes Assessment Matrix					
Program Student Learning Outcome (PSLO)	Learning Dutcome (PSLO)Assessment MethodCourses Used for AssessmentS		Success Criterion		
PSLO #1: Applied Specialized Interventions Demonstrate the ability to evaluate, assess, and apply interventions in areas of respiratory care including sleep medicine, neonatal and pediatric care, adult critical care, and respiratory case management.	Direct Assessment – Course Performance	RPTH B10 – Advanced Cardiopulmonary Care RPTH B15 – Sleep Medicine and Respiratory Care RPTH B20 – Advanced Respiratory Case Management RPTH B60 – Advanced Neonatal and Pediatric Respiratory Care	Students must earn a minimum score of 70% in each course listed to demonstrate competency in evaluating, assessing, and applying interventions across key specialty areas.		
PSLO #2: Evidence-Based Respiratory Care Demonstrate the use of evidence-based practice and respiratory-driven protocols to enhance critical thinking and provide safe patient care.	Direct Assessment – Course Performance	 RPTH B10 – Advanced Cardiopulmonary Care RPTH B15 – Sleep Medicine and Respiratory Care RPTH B20 – Advanced Respiratory Case Management RPTH B30 – Principles of Health Education RPTH B40 – Health Care Research Design and Methodology RPTH B60 – Advanced Neonatal and Pediatric Respiratory Care RPTH B90 – Respiratory Care Capstone Project 	Students must earn a minimum of 70% or higher in each course listed to demonstrate the application of evidence-based practices and respiratory-driven protocols.		

PSLO #3: Healthcare Leadership Develop and apply transformational leadership principles in healthcare that foster inclusive decision-making and address business aspects of healthcare such as value efficacy and quality improvement.	Direct Assessment – Course Performance	RPTH B52 – Respiratory Care Leadership and Management II COMM B10 – Health Communication SOSC B10 – Public Health Policy	Students must earn a minimum of 70% or higher in each course listed to demonstrate application of leadership principles and business strategy in healthcare settings.
PSLO #4: Respiratory Care Competency Develop and apply effective professional oral and written communication skills that empower autonomy as a healthcare team member.	Direct Assessment – Course Performance	COMM B10 – Health Communication SOSC B10 – Public Health Policy COUN B10 – Multicultural Human Relations SOCI B10 – Intersectionality and Citizenship RPTH B30 – Principles of Health Education RPTH B90 – Respiratory Care Capstone Project	Students must earn a minimum of 70% or higher in each course listed to demonstrate professional communication competency and autonomy in team-based healthcare.

(The lower portion of this page has been intentionally left blank)

2025 BSRC SLO to PSLO Alignment Mapping				
Course	Course Student Learning Outcome (SLO) Name	Course Student Learning Outcome (SLO) Details	Program Learning Outcome (PLO) Name	Program Learning Outcome (PLO) Details
	SLO1 THEORIES & MODELS IN HEALTHCARE	Analyze and discuss the theories, models, and organizational issues and strategies in healthcare.	BSRC - Healthcare Communication Skills	Develop and apply effective professional oral and written communication skills and tools that empower autonomy to be an effective member of the healthcare team.
SKY COMM B10	SLO2 HEALTH PROMOTION & BEHAVIOR CHANGE	Examine and assess health promotion materials and behavior change campaigns.	BSRC - Healthcare Communication Skills	Develop and apply effective professional oral and written communication skills and tools that empower autonomy to be an effective member of the healthcare team.
	SLO3 TEAM HEALTH PRESENTATION	Research, design and cohesively present a team health promotion.	BSRC - Healthcare Communication Skills	Develop and apply effective professional oral and written communication skills and tools that empower autonomy to be an effective member of the healthcare team.
	Critical Thinking	Analyze multiple identities through the lens of intersectionality such as ethnicity, gender, class, sexual orientation, and generational identity.	BSRC - Evidence-based Respiratory Care	Demonstrate the use of evidence-based-practice and respiratory driven protocols which enhance the critical thinking of the RCP and provide safe patient care.

B10

r				
	Practices of Culturally	Implement counseling	BSRC - Healthcare	
	Competent Care	practices and theoretical	Leadership	
		frameworks to become a		
		more culturally		Develop and apply
		competent practitioner		transformational
		(e.g. self-awareness,		leadership principles in
		attending skills,		healthcare that foster an
		unconditional positive		environment of inclusion
		regard/outward valuing		in decision making.
		of others, vulnerability,		Employing effective
		communication, active		strategies to address
		listening, being present,		various business aspects
		reflection, reframing,		of healthcare particularly
		cultural humility,		value efficacy and
		therapeutic alliance,		continuous quality
		empathy, and praxis).		improvement.
	Creating a Care Plan	Create a care plan for a	BSRC - Applied	Demonstrate the ability
		patient with a	Specialized Interventions	to evaluate, assess and
		cardiopulmonary or a		apply interventions in
		neuro respiratory disease		areas of respiratory care
		process.		including sleep medicine,
				neonatal and pediatric
				care, adult critical care,
				and respiratory case
				management.
	Evidence- Based Practice of	Analyze disease-specific	BSRC - Evidence-based	Demonstrate the use of
	Cardiopulmonary Care	treatment options in	Respiratory Care	evidence-based-practice
		cardiopulmonary and		and respiratory driven
		neuro-respiratory care		protocols which enhance
		and recommend		the critical thinking of
		modifications based on		the RCP and provide safe
		evidence- based practice.		patient care.
SKY RPTH B10	Inter-professional	Practice interprofessional	BSRC - Healthcare	Develop and apply
	Communication and	communication and	Communication Skills	effective professional
	Collaboration in Critical	collaboration in the care		oral and written
	Care Settings.	of patients with an		communication skills and
		advanced		tools that empower
		cardiopulmonary		autonomy to be an
		disease.		effective member of the
		uiscusc.		healthcare team.
				nearcheare team.

				47
			BSRC - Healthcare Leadership	Develop and apply transformational leadership principles in healthcare that foster an environment of inclusion in decision making. Employing effective strategies to address various business aspects of healthcare particularly value efficacy and continuous quality improvement.
	Patient Intervention	Evaluate and apply advanced cardiopulmonary diagnostic procedures and medical interventions performed by respiratory care	BSRC - Evidence-based Respiratory Care	Demonstrate the use of evidence-based-practice and respiratory driven protocols which enhance the critical thinking of the RCP and provide safe patient care.
		practitioners.	BSRC - Healthcare Communication Skills	Develop and apply effective professional oral and written communication skills and tools that empower autonomy to be an effective member of the healthcare team.
	Recording Data	Identify and apply appropriate tools and strategies for recording physiologic data during sleep studies including the montage and equipment selection, and mechanical and physiologic calibrations.	BSRC - Applied Specialized Interventions	Demonstrate the ability to evaluate, assess and apply interventions in areas of respiratory care including sleep medicine, neonatal and pediatric care, adult critical care, and respiratory case management.
SKY RPTH B15	Sleep Disorder Management	Apply management strategies to titrate continuous positive airway pressure, bilevel positive airway pressure, adaptive servo ventilation, noninvasive positive-pressure ventilation, and supplemental oxygen to	BSRC - Applied Specialized Interventions	Demonstrate the ability to evaluate, assess and apply interventions in areas of respiratory care including sleep medicine, neonatal and pediatric care, adult critical care, and respiratory case management.

48

				48
		achieve optimal		
		outcomes.		
	Sleep Disorders	Interpret and analyze	BSRC - Applied	Demonstrate the ability
		patient sleep disorders	Specialized Interventions	to evaluate, assess and
		and their characteristics.		apply interventions in
				areas of respiratory care
				including sleep medicine,
				neonatal and pediatric
				care, adult critical care,
				and respiratory case
				management.
	Application Strategies	Identify and apply	BSRC - Applied	Demonstrate the ability
		strategies for assessing,	Specialized Interventions	to evaluate, assess and
		planning, implementing,		apply interventions in
		coordinating,		areas of respiratory care
		monitoring, and		including sleep medicine,
		evaluating options and		neonatal and pediatric
		services to promote		care, adult critical care,
		quality and cost-effective		and respiratory case
		outcomes.		management.
			BSRC - Evidence-based	Demonstrate the use of
			Respiratory Care	evidence-based-practice
				and respiratory driven
				protocols which enhance
				the critical thinking of
				the RCP and provide safe
				patient care.
	Case Management Plan	Analyze patient case	BSRC - Healthcare	Develop and apply
		management plans	Leadership	transformational
SKY RPTH B20		created by the		leadership principles in
		healthcare delivery team		healthcare that foster an
		to coordinate resources		environment of inclusion
		and services necessary to		in decision making.
		accomplish client goals.		Employing effective
				strategies to address
				various business aspects
				of healthcare particularly
				value efficacy and
				continuous quality
				improvement.

				49
	Professional Practice	Assess professional practice principles such as confidentiality, legal and regulatory requirements, risk management, interpersonal communication, conflict resolution, and negotiation strategies in the context of the case management process	BSRC - Healthcare Leadership	Develop and apply transformational leadership principles in healthcare that foster an environment of inclusion in decision making. Employing effective strategies to address various business aspects of healthcare particularly value efficacy and continuous quality improvement.
	Apply learning theory to the creation and delivery of health care related curricula.	Evaluate and apply child and adult learning theories in the creation and delivery of healthcare related curriculum.	BSRC - Healthcare Communication Skills	Develop and apply effective professional oral and written communication skills and tools that empower autonomy to be an effective member of the healthcare team.
SKY RPTH B30	Develop a lesson plan that includes outcomes, objectives, content, skills and abilities.	Create and evaluate a lesson plan that includes outcomes, objectives, content, skills, and abilities.	BSRC - Healthcare Leadership	Develop and apply transformational leadership principles in healthcare that foster an environment of inclusion in decision making. Employing effective strategies to address various business aspects of healthcare particularly value efficacy and continuous quality improvement.
	Develop an effective assessment tool for assessing lesson plan outcomes.	Create and Evaluate an effective assessment tool for assessing lesson plan outcomes.	BSRC - Evidence-based Respiratory Care	Demonstrate the use of evidence-based-practice and respiratory driven protocols which enhance the critical thinking of the RCP and provide safe patient care.
SKY RPTH B40	RPTH-B40-1 Analyze, and interpret published research	Critically review, analyze, and interpret published research.	BSRC - Evidence-based Respiratory Care	Demonstrate the use of evidence-based-practice and respiratory driven protocols which enhance the critical thinking of the RCP and provide safe

				90
				patient care.
	RPTH-B40-2 Develop and	Develop research design,	BSRC - Evidence-based	Demonstrate the use of
	conduct research design	conduct or review a	Respiratory Care	evidence-based-practice
		study, critically assess		and respiratory driven
		and perform analysis of		protocols which enhance
		quality measurement.		the critical thinking of
				the RCP and provide safe
				patient care.
	RPTH-B40-3 Evaluate and	Evaluate and present a	BSRC - Evidence-based	Demonstrate the use of
	present a research design	research design and	Respiratory Care	evidence-based-practice
		applicable protocol.		and respiratory driven
				protocols which enhance
				the critical thinking of
				the RCP and provide safe
				patient care.
			BSRC - Healthcare	Develop and apply
			Communication Skills	effective professional
				oral and written
				communication skills and
				tools that empower
				autonomy to be an
				effective member of the
				healthcare team.
	Continuous quality	Critically reflect on	BSRC - Evidence-based	Demonstrate the use of
	improvement utilizing	evidence-based practices	Respiratory Care	evidence-based-practice
	evidence-based practices	and competencies in		and respiratory driven
		teamwork and		protocols which enhance
		leadership.		the critical thinking of
				the RCP and provide safe
				patient care.
	Developing a leadership	Integrate behaviors and	BSRC - Healthcare	Develop and apply
	style of their own)	actions of successful	Leadership	transformational
		leaders, and develop an		leadership principles in
		individual current or		healthcare that foster an
		future leadership style.		environment of inclusion
				in decision making.
				Employing effective
SKY RPTH B50				strategies to address
				various business aspects
				of healthcare particularly
				value efficacy and
				, continuous quality
				improvement.

				51
	Practices and Theories of Leadership	Articulate a working foundation of leadership practices and theories for leading people and health organizations.	BSRC - Healthcare Leadership	Develop and apply transformational leadership principles in healthcare that foster an environment of inclusion in decision making. Employing effective strategies to address various business aspects of healthcare particularly value efficacy and continuous quality
	Understand and complete actual management responsibilities of Respiratory Care Departments	Apply management strategies to various operational procedures and functions of the Respiratory Care department and other related departments.	BSRC - Healthcare Leadership	improvement. Develop and apply transformational leadership principles in healthcare that foster an environment of inclusion in decision making. Employing effective strategies to address various business aspects of healthcare particularly value efficacy and continuous quality
	SLO #4 Strategic Methodologies Application: Enhancing Performance	Critically reflect on the application of theoretical constructs and strategic methodologies that support peak performance in teams.	BSRC - Healthcare Communication Skills	improvement.Develop and applyeffective professionaloral and writtencommunication skills andtools that empowerautonomy to be aneffective member of thehealthcare team.
SKY RPTH B52			BSRC - Healthcare Leadership	Develop and apply transformational leadership principles in healthcare that foster an environment of inclusion in decision making. Employing effective strategies to address various business aspects of healthcare particularly value efficacy and continuous quality improvement.

				52
	SLO#1 Leadership and	Make inferences and	BSRC - Healthcare	Develop and apply
	Management Skills and	draw conclusions relative	Leadership	transformational
	Dynamics in Healthcare	to leadership and		leadership principles in
		management skills within		healthcare that foster an
		the healthcare		environment of inclusion
		organization or industry.		in decision making.
				Employing effective
				strategies to address
				various business aspects
				of healthcare particularly
				value efficacy and
				continuous quality
				improvement.
	SLO#2 Strategic Model	Integrate the tenets of	BSRC - Evidence-based	Demonstrate the use of
	Integration:	various evidence-based	Respiratory Care	evidence-based-practice
	Evidence-Based Decision	theoretical constructs	Respiratory Care	
	Making			and respiratory driven protocols which enhance
	WIGKING	and strategic models to		•
		make decisions, solve		the critical thinking of
		problems, and develop		the RCP and provide safe
		plans.		patient care.
	SLO#3 Strategic	Distinguish the	BSRC - Healthcare	Develop and apply
	Implementation:	difference between	Leadership	transformational
	Leveraging Leadership vs.	leadership and		leadership principles in
	Management for	management and use		healthcare that foster an
	Organizational	that knowledge to make		environment of inclusion
	Effectiveness	strategic decisions and		in decision making.
		enhance organizational		Employing effective
		efficiencies and		strategies to address
		effectiveness through the		various business aspects
		development and		of healthcare particularly
		implementation of plans.		value efficacy and
				continuous quality
				improvement.
	Advanced medical	Distinguish and apply	BSRC - Applied	Demonstrate the ability
	treatments	appropriate advanced	Specialized Interventions	to evaluate, assess and
		medical treatments and		apply interventions in
		modalities which can be		areas of respiratory care
		utilized to appropriately		including sleep medicine,
		care for neonatal and		neonatal and pediatric
		pediatric patients.		care, adult critical care,
SKY RPTH B60				and respiratory case
				management.
			BSRC - Evidence-based	Demonstrate the use of
			Respiratory Care	
			Respiratory Care	evidence-based-practice
				and respiratory driven
				protocols which enhance
				the critical thinking of

				00
				the RCP and provide safe
				patient care.
	Differentiate approaches	Differentiate approaches	BSRC - Applied	Demonstrate the ability
		to care between	Specialized Interventions	to evaluate, assess and
		neonatal/pediatric and		apply interventions in
		adult patients.		areas of respiratory care
				including sleep medicine,
				neonatal and pediatric
				care, adult critical care,
				and respiratory case
				management.
			BSRC - Healthcare	Develop and apply
			Communication Skills	effective professional
				oral and written
				communication skills and
				tools that empower
				autonomy to be an effective member of the
				healthcare team.
	Critical Thinking	Draw on multiple sources	RSRC Evidence based	Demonstrate the use of
		of analysis, research, and	Respiratory Care	evidence-based-practice
		critical thinking across	Respiratory Care	and respiratory driven
		the curriculum to		protocols which enhance
		develop address a		the critical thinking of
		problem and complete a		the RCP and provide safe
		project.		patient care.
		projecti	BSRC - Healthcare	Develop and apply
			Leadership	transformational
				leadership principles in
				healthcare that foster an
				environment of inclusion
				in decision making.
				Employing effective
SKY RPTH B90				strategies to address
				various business aspects
				of healthcare particularly
				value efficacy and
				continuous quality
				improvement.
	Final Presentation	Demonstrate in a final	BSRC - Applied	Demonstrate the ability
		presentation the full	Specialized Interventions	to evaluate, assess and
		breadth of knowledge		apply interventions in
		gained through the		areas of respiratory care
		Respiratory Care		including sleep medicine,
		program, focusing on		neonatal and pediatric
		one or more subject		care, adult critical care,
		areas: cardiopulmonary		and respiratory case

		-		54
		pathophysiology, case		management.
		management, health	BSRC - Evidence-based	Demonstrate the use of
		education, research	Respiratory Care	evidence-based-practice
		methodology, and/or		and respiratory driven
		respiratory care		protocols which enhance
		leadership and		the critical thinking of
		management.		the RCP and provide safe
				patient care.
			BSRC - Healthcare	Develop and apply
			Communication Skills	effective professional
				oral and written
				communication skills and
				tools that empower
				autonomy to be an
				effective member of the
				healthcare team.
			BSRC - Healthcare	Develop and apply
			Leadership	transformational
				leadership principles in
				healthcare that foster an
				environment of inclusion
				in decision making.
				Employing effective
				strategies to address
				various business aspects
				of healthcare particularly
				value efficacy and
				continuous quality
				improvement.
	Assess and articulate	Assess and articulate	BSRC - Healthcare	Develop and apply
	theories and concepts on	theories and concepts on	Leadership	transformational
	race and ethnicity through	race and ethnicity		leadership principles in
	written and verbal	through written and		healthcare that foster an
	presentation.	verbal presentation.		environment of inclusion
				in decision making.
				Employing effective
				strategies to address
				various business aspects
				of healthcare particularly
				value efficacy and
SKY SOCI B10				continuous quality
				improvement.

	Evaluate current social	Evaluate current social	BSRC - Healthcare	Develop and apply
	issues and debates	issues and debates	Leadership	transformational
	regarding race and	regarding race and		leadership principles in
	ethnicity through the use	ethnicity through the use		healthcare that foster an
	of the sociological	of the sociological		environment of inclusion
	imagination.	imagination.		in decision making.
				Employing effective
				strategies to address
				various business aspects
				of healthcare particularly
				value efficacy and
				continuous quality
				improvement.
	CONTEMPORARY HEALTH	Summarize and discuss	BSRC - Healthcare	Develop and apply
	POLICY ISSUES	contemporary health	Leadership	transformational
	FOLICT ISSUES	policy problems and	Leadership	leadership principles in
				healthcare that foster an
		issues.		environment of inclusion
				in decision making.
				Employing effective
				strategies to address
				various business aspects
				of healthcare particularly
				value efficacy and
				continuous quality
				improvement.
	HEALTHCARE POLICY &	Appraise healthcare	BSRC - Healthcare	Develop and apply
	PROGRAMS	policy and programs	Leadership	transformational
		from sociological,		leadership principles in
		political, economic, legal,		healthcare that foster an
		and ethical perspectives.		environment of inclusion
				in decision making.
				Employing effective
				strategies to address
SKY SOSC B10				various business aspects
				of healthcare particularly
				value efficacy and
				continuous quality
				improvement.
	SOLUTIONS TO	Develop and evaluate	BSRC - Evidence-based	Demonstrate the use of
	HEALTHCARE PROBLEMS	possible solutions to	Respiratory Care	evidence-based-practice
		important healthcare	Respiratory Care	and respiratory driven
		problems.		protocols which enhance
				the critical thinking of
				the RCP and provide safe
				patient care.

			BSRC - Healthcare Leadership	Develop and apply transformational leadership principles in healthcare that foster an environment of inclusion in decision making. Employing effective strategies to address various business aspects of healthcare particularly value efficacy and continuous quality improvement.
BS DA PSLO Website Link:	https://skylinecollege.edu/r	espiratorycarebachelors/		
Applied filters: objectiveName is BSRC - Evidence-based Respiratory Care, BSRC - Healthcare Communication Skills, BSRC - Healthcare Leadership, or BSRC - Applied Specialized Interventions Plan Type is SKY Course SLO Assessment PSLO Status is Active unit ID is 646				

~END~

Last Updated (May 2025)

56

APPENDIX A

~ FORM: Outside District Pathway to BSRC;

(MUST MEET with YOUR ACADEMIC COUNSELOR for MAPPING)

PATHWAY: Bachelor's Degree to an Associate Degree

This pathway applies to students who have catalog rights beginning Fall 2016 and thereafter.

Student's Name: _____

G#

Students who wish to pursue an Associate Degree at Skyline College who have already been awarded a Bachelor's Degree from a regionally accredited college or university in the United States may be exempt from Skyline College's local Associate Degree General Education requirements. This pathway does not apply to the Associate Degrees for Transfer (AA-T or AS-T). Students must still complete a minimum of 12 units in residence at Skyline College. For the major, at least 12 units, or 50% of the units required for the major, whichever is fewer, must be completed at Skyline College. All other local requirements may be waived if the completed Bachelor's degree includes coursework that fulfills the Title 5 minimum requirements for the Associate Degree as noted below.

SKYLINE COLLEGE BACHELOR'S DEGREE TO ASSOCIATE DEGREE PATHWAYS CHECKLIST				
\checkmark	The student has met, or will meet, the following requirements, by the end of the semester:			
	Awarded a Bachelor's Degree from a regionally accredited college or university in the United States Note: Final transcripts must be in Banner at the time the Associate Degree application is submitted			
	Complete 12 units in residence at Skyline College			
	Meet the major requirement (12 units, or 50% of the required for the major, whichever is fewer, must be completed at Skyline College)			
	Complete a minimum of 60-degree applicable units			
	Complete a Freshman Composition course (equivalent to ENGL 100 or ENGL 105 at Skyline College)			
	Complete an Intermediate Algebra course (equivalent to MATH 120 or higher at Skyline College)			
	Complete 19 units of General Education to include:			
	6 semester units in English Language Communication and Critical Thinking			
	4 semester units in Scientific Inquiry (includes lab)			
	 3 semester units in Arts and Humanities 3 semester units in Social Science 			
	3 semester units in Lifelong Learning & Self Development or the aforementioned areas			
	Area F : In general, any student who begins their academic work at either a CCC or CSU Fall 2021 and			
	beyond will be required to complete the new general education requirements Area F.			
	Confirm incoming official transcript(s) is in WebXtender			
	Confirm that Transcript Evaluation Service (TES) has been requested.			

Counselor's Note:

APPENDIX B

~Individual BSRC Courses; COURSE OUTLINES OF RECORD (COR)~

Skyline College Official Course Outline

COURSE ID: RPTH B10 TITLE: Advanced Cardiopulmonary Respiratory Care Units: 3.0 units Hours/Semester: 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours Method of Grading: Letter Grade Only Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program; and RPTH 450 or equivalent.

2. COURSE DESIGNATION: Degree Credit

Transfer credit: none

3. COURSE DESCRIPTIONS:

Catalog Description:

Provides an analytical framework through which students will expand their knowledge of respiratory diseases, diagnostic procedures, and symptom management. Includes detailed assessment of cardiopulmonary and neurorespiratory diseases, performance of diagnostic testing, medical interventions, and analysis of treatment benefits.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

- 1. Evaluate and apply advanced cardiopulmonary diagnostic procedures and medical interventions performed by respiratory care practitioners.
- 2. Analyze disease-specific treatment options in cardiopulmonary and neurorespiratory care and recommend modifications based on evidence- based practice.
- 3. Create a care plan for a patient with a cardiopulmonary or a neurorespiratory disease process.
- 4. Practice interprofessional communication and collabration in the care of patients with an advanced cardiopulmonary disease.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

- 1. Demonstrate advanced diagnostic and therapeutic procedures performed by respiratory care practitioners.
- 2. Explore different high risk procedures in advanced cardiopulmonary respiratory care.
- 3. Indicate short term and long term goals of therapy.
- 4. Discuss treatment plans based on evidence-based practice and clinical and laboratory data.
- 5. Demonstrate the patient's response to therapy.
- 6. Discuss modifications in treatment recommendations based on patient-reported and objective signs and symptoms.
- 7. Discover how to communicate the need to continue or change the treatment plan based on patient's response to therapy.
- 8. Explore hemodynamic management in patients with cardiopulmonary compromise based on evidence-based practice.
- 9. Explain the importance of interprofessional communication and collaboration in the care of patients with cardiopulmonary and neurorespiratory disease.

6. COURSE CONTENT:

Lecture Content:

- 1. Diagnostic and Therapeutic Procedures
 - A. Bronchoscopy
 - B. Interventional Pulmonology
 - C. Spirometry
 - D. Hemodynamics
 - a. Central venous catheters
 - b. Pulmonary artery catheters
 - c. Intra-aortic balloon pump (IABP)
 - d. Blood chemistry and hematology studies
 - e. Diaphragm function interpretation (Sniff test with fluoroscopy, phrenic nerve conduction studies)

- 2. Respiratory Care Practice Act and Evidence-based Medicine
- 3. Telemedicine (hospital, clinic, home care applications)
- 4. Advanced Practices
 - A. Extracorporeal membrane oxygenation (ECMO)
 - B. Rapid response teams
 - C. Disaster management, epidemic, endemic and pandemic?
 - D. Patient transport
 - E. Respiratory care in third world countries
 - F. Interventions and therapy for patients with Covid 19
- 5. Advanced Pharmacology
 - A. Inhaled nitric oxide
 - B. Anesthesia medications
 - C. Advanced antimicrobial and antiviral therapy
- 6. Advanced Pathophysiology
 - A. Cardiac anatomy and physiology
 - B. Renal disease /failure's impact on cardiopulmonary system.
 - C. Neurorespiratory Anatomy and Physiology.
- 7. Advanced Pathophysiology
 - A. Respiratory care practice act and evidence base medicine
 - B. Burns
 - C. Trauma (head, spine)
 - D. Sepsis
 - E. Compartment syndrome
 - F. Airway Injuries
 - G. Advanced neurological disorders ALS, upper, and lower neuron disease
 - H. Post-anesthetic complications and ICU care (Cholinesterase deficiency)
 - I. Sleep disorders and sleep studies

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Activity
- C. Critique
- D. Discussion
- E. Individualized Instruction

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Writing assignments will consist of synthesis and evaluation of outcomes and findings in case study analysis, and reflection/evaluation in relation to skills, abilities, and critical thinking inadvanced respiratory care.

- Case studies focusing on an assigned topic given weekly by instructor.
- Summary reflection/evaluation essays of case studies and/or weekly readings (2-3 per week).
- Two comprehensive case study writing assignments will be required over the duration of the course. 5-7 pages each.

Reading Assignments:

Reading assignments will consist of reading and synthesizing at minimum 10 peer reviewed articles, textbooks, and publications. Readings will be focused on experience in health care as applicable to respiratory care. Number of pages will vary but at minimum will require 750 - 900 pages of reading and analysis.

Other Outside Assignments:

Students participate in a collaborative team project presenting on a Respiratory Care aspect from a case study.

Students prepare and present an oral presentation of their case study findings to peer colleagues and receive feedback.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Homework

- C. Oral Presentation
- D. Papers
- E. Projects
- F. This is a project based program and assessment/grading is based on group projects, assignments, oral presentations and papers.

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

A. Dean R. Hess. *Respiratory Care: Principles and Practice***, 4th ed. Burlington, MA 01803: Jones & Bartlett Learning, 2021

Possible periodicals include:

A. . Respiratory Care, Volume 2019

Other:

A. ** This title is available through Skyline College Library's e-Book collection, and students can access it fro free by using their SMCCCD credentials.

Respiratory Care: Principles and Practice

https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCD/s0te9o/alma9910007878588053

Origination Date: January 2023 Curriculum Committee Approval Date: February 2023 Effective Term: Fall 2023 Course Originator: Heather Esparza

Skyline College Official Course Outline

COURSE ID: RPTH B15 TITLE: Sleep Medicine and Respiratory Care Units: 3.0 units Hours/Semester: 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours Method of Grading: Letter Grade Only Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program; and RPTH 450 or equivalent.

2. COURSE DESIGNATION: Degree Credit

Transfer credit: none

3. COURSE DESCRIPTIONS:

Catalog Description:

Prepares students to apply polysomnography to diagnose sleep disorders. Students will gain knowledge and skills related to the normal development of sleep patterns and demonstrate the ability to identify specific sleep disorders as well as score sleep stages and respiratory patterns. Emphasis is placed on pediatric and adult assessment, monitoring, and sleep disorders.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

- 1. Interpret and analyze patient sleep disorders and their characteristics.
- 2. Identify and apply appropriate tools and strategies for recording physiologic data during sleep studies including the montage and equipment selection, and mechanical and physiologic calibrations.
- 3. Assess and formulate management strategies to titrate continuous positive airway pressure, bilevel positive airway pressure, adaptive servo ventilation, and supplemental oxygen to achieve optimal outcomes.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

- 1. Identify the medical discoveries that led to the development of sleep medicine and technology.
- 2. Provide an overview of technological advances in sleep medicine and technology.
- 3. Describe how the body changes between sleep and wake.
- 4. Identify the structures and neurotransmitters that are involved in the sleep and wake process.
- 5. Identify the tools and purpose for recording physiologic data including the montage and equipment selection, and mechanical and physiologic calibrations.
- 6. Define physiologic aspects of the polysomnogram that require intervention.
- 7. Define artifactual findings of the polysomnogram that require intervention.
- 8. Educate patients regarding disease process and therapy recommendations.
- 9. Follow patients' progress on positive airway pressure therapy and treatment recommendations
- 10. Assist patients with positive airway pressure adherence issues.

6. COURSE CONTENT:

Lecture Content:

- 1. Overview of sleep medicine physiology and technology:
 - A. The evolution of polysomnography
 - B. Obstructive sleep apnea research
 - C. Physiology for recording sleep-related parameters Circadian variations related to wake and sleep
- 2. Classification of sleep disorders:
 - A. Insomnias
 - B. Hypersomnias
 - C. Sleep-related breathing disorders
 - a. Obstructive sleep apnea (OSA)
 - b. Central sleep apnea (CSA) syndromesi
 - i. Cheyne-stokes respiration
- 3. Biolectric signals of interest in sleep medicine:
 - A. Electroencephalography-Waves: Alpha, Delta, Sawtooth, Theta waves, K complex, Sleep spindles
 - B. Modified lead II electrocardiography (ECG)
 - C. Electroculogram

- 4. Stages of sleep:
 - A. Stage W
 - B. Stage N1
 - C. Stage N2
 - D. Stage N3
 - E. Stage R
- 5. Equipment:
 - A. Sensors
 - B. Transducers

C. Ancillary equipment: Recording EEG, EMG, EOG, and ECG with surface electrodes

- 6. The polysomnogram:
 - A. Prestudy procedures B. Monitoring activities
 - C. Poststudy scoring and interpretation
- 7. Recognizing, evaluating, and minimizing recording artifacts.
- 8. Noninvasive monitoring of gas exchange during testing:
 - A. Monitoring oxygenation and ventilation
 - B. Monitoring carbon dioxide
- 9. Diagnosis, treatment, and outcome management of sleep-disordred breathing and other sleep disorders
 - A. Continuous positive airway pressure (CPAP)
 - B. Central sleep apnea
 - C. Mixed sleep apnea
 - D. Obstructive sleep apnea
 - E. Narcolepsy and excessive daytime sleepiness
 - a. Diagnostic sleep study
 - b. Split night sleep study
 - c. Titration study
 - d. Multiple sleep latency test

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Critique
- C. Activity
- D. Discussion
- E. Other (Specify): Case Scenarios

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Writing assignments will consist of synthesis and evaluation of outcomes and endings in case study analysis, and evaluation in relation to skills, abilities, and critical thinking in Sleep Medicine.

a. Weekly reflection discussion board posts (1-3 pages).

b. Two comprehensive case study writing assignments will be required over the duration of the course (5-7 pages).

Reading Assignments:

Reading assignments will consist of reading and synthesizing at minimum 10 peer reviewed articles, textbooks, and publications. Readings will be focused on respiratory care and sleep medicine in health care. Number of pages will vary but at minimum will require 750 to 900 pages of reading and analysis.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Class Work
- C. Homework
- D. Oral Presentation

- E. Papers
- F. Projects
- G. Research Projects

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

- A. Rita Brooks, Cynthia Mattice. Fundamentals of Sleep Technology Workbook, 3rd ed. Lippincott Williams and Wilkins, 2020
- B. Buddy Marshall, Bonnie Robertson. Polysomnography for Sleep Technologist, 1st ed. Elsevier, 2014

Origination Date: February 2023 Curriculum Committee Approval Date: March 2023 Effective Term: Fall 2023 Course Originator: Heather Esparza

Skyline College Official Course Outline

COURSE ID: RPTH B20 TITLE: Advanced Respiratory Case Management Units: 3.0 units Hours/Semester: 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours Method of Grading: Letter Grade Only Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program; and RPTH 485 or equivalent.

2. COURSE DESIGNATION:

Degree Credit

Transfer credit: none

3. COURSE DESCRIPTIONS:

Catalog Description:

Applied case management in Respiratory Care highlighting facilitation, integration, coordination and transition of patients through the continuum of care. Students effectively apply strategies for collaboration between the case manager, the client, the payer and appropriate service personnel, in order to optimize the outcome while maintaining client privacy and confidentiality, health, and safety through advocacy and adherence to ethical, legal, accreditation, certification and regulator standards or guidelines.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

- 1. Analyze patient case management plans created by the interdisciplinary team to coordinate resources and services necessary to accomplish client goals.
- 2. Identify and apply strategies for assessing, planning, implementing, coordinating, monitoring, and evaluating options and services to promote quality and cost-effective outcomes based on current evidence-based practice.
- 3. Assess professional practice principles such as confidentiality, legal and regulatory requirements, risk management, interpersonal communication, conflict resolution, and negotiation strategies in the context of the case management process.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

- 1. Evaluate the available patient options related to human, environmental, and equipment services, balancing cost and quality, to ensure prudent use of resources and optimal outcomes.
- 2. Discover how to create a personalized, written, multidisciplinary rehabilitation plan based on a needs assessment of returning the client to optimum level of function in their activity of daily living.
- 3. Discuss the needs and values of the client, in collaboration with all service providers, to link the client with appropriate providers and resources.
- 4. Discuss the collaborative process that assesses, plans, implements, coordinates, monitors and evaluates the options and services required to meet the client's health and human service needs.
- 5. Assess behavioral concepts and intervention strategies to manage client care holistically, taking into consideration the psychological, physical, emotional, and cultural needs of the patient to ensure they have an appropriate support system and or resources.
- 6. Determine how to communicate and engage patients and their families during education and discharge planning.
- 7. Examine ethical issues related to disease management.
- 8. Explore the benefits and challenges associated with working within an interdisciplinary team during disease management and discharge planning.

6. COURSE CONTENT:

Lecture Content:

- 1. Case Management Role and Function
- i. Types
 - 1. Clinical
 - 2. Outpatient
- ii. Credentials and Requirements
- iii. Standards of Practice
- iv. Case Management Concepts
- v. Insurance
- vi. Utilization Review and Quality Management in Health Care Services
- 2. Legal Issues in Case Management
- 1. U.S. Legislation
- 2. Malpractice
- 3. Liability
- 4. Documentation

5. Contracts

3. Ethical Issues and Dilemmas

i. Quality Reviews and Risks Management

ii. Negotiation Strategies and Holistic Care

iii. Interdisciplinary Health Care Teams (These models include only the physician and the "non-physician provider," who is a physician assistant and/or a nurse practitioner.)

iv. Health Care Practice Models

- 1. The parallel model
- 2. The sequential
- 3. The share model
- v. Case Management Process
- 4. Disease Management
- i. COPD
- ii. Asthma
- iii. Cystic Fibrosis
- iv. Sleep Apnea
- v. Pulmonary Fibrosis
- 5. Coordination of Services
- i. Rehabilitation
- ii. Resources and Support
- iii. Alternative care
- iv. Discharge Planning
 - 1. Education
 - 2. Home care
- 6. Communication and Patient Engagement
- i. Patients and family
- ii. Health care team
- iii. Third party payers
- 7. Financial Aspects of Case Management
- i. Financial structure
- ii. Cost and reimbursement
 - 1. Public sector plans
 - 2. Worker's compensation and rehabilitation management
 - 3. Commerical insurance plans
 - 4. Federal plans
 - 5. Disability
 - 6. Home equipment and billing
- 8. Application of Case Management
- i. Effective Case Management connecting to Healthcare Systems and the Community
- ii. Clinical Case Management in the Field

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Critique
- C. Discussion
- D. Guest Speakers
- E. Other (Specify): Interactive group activity, analysis of reimbursement structures, analysis of patient scenarios.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Writing assignments will consist of synthesis and evaluation of outcomes and findings in case study analysis, and reflection/evaluation in relation to skills, abilities, and critical thinking in advanced respiratory case management.

- Case studies focusing on an assigned topic (2-3 pages).
- Weekly summary reflection/evaluation essays focusing on reading assignments (2-3 pages).

• Two comprehensive case study writing assignments will be required over the duration of the course 5-7 pages).

Reading Assignments:

Reading assignments will consist of reading and synthesizing at minimum 10 peer reviewed articles and case studies relating to respiratory case management. Students will also read from identified textbooks and relevant publications. Readings will be focused on experience in health care as applicable to case management in Respiratory Care. Number of pages will vary but at minimum will require 750 -900 pages of reading and analysis.

Other Outside Assignments:

• Field interviews, analysis of case management studies, critical review and analysis of cost reimbursement policies and procedures.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Homework
- C. Oral Presentation
- D. Papers
- E. Research Projects
- F. Analysis of case scenarios

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

A. Mullahy, C. *The Case Manager's Handbook***, 6th ed. Burlington, MA: Jones & Bartlett Learning, 2016 Other:

A. ** This title is available through Skyline College Library's digital textbook collection, and students can access it for free by using their SMCCCD credentials.

The Case Manager's Handbook

https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCD/1slusvf/cdi_statref_primary_tds459_978128

Origination Date: February 2023 Curriculum Committee Approval Date: March 2023 Effective Term: Fall 2023 Course Originator: Heather Esparza

Skyline College Official Course Outline

COURSE ID: RPTH B30 TITLE: Principles of Health Education Units: 3.0 units Hours/Semester: 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours Method of Grading: Letter Grade Only Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program; and RPTH 485 or equivalent.

2. COURSE DESIGNATION:

Degree Credit

Transfer credit: none

3. COURSE DESCRIPTIONS:

Catalog Description:

Provides an analytical framework to teach adult learning theory and prepare the student to teach effectively in healthcare and classroom settings. Topics include learning styles, curriculum development, effective teaching techniques, and assessment of learning.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

- 1. Evaluate and apply child and adult learning theories in the creation and delivery of health care related curriculum.
- 2. Create and evaluate a lesson plan that includes outcomes, objectives, content, skills and abilities.
- 3. Create and evaluate an effective assessment tool for assessing lesson plan outcomes.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

- 1. Describe the various settings in which a respiratory care practitioner provides education.
- 2. Evaluate different learning theories, styles and preferences.
- 3. Discover how to modify a teaching style to accommodate the needs of a student.
- 4. Compare and contrast Pedagogical and Andragogical principles.
- 5. Discuss the development and implemention of course content, assignments and assessment methods.
- 6. Describe the creation and evaluation of effective learning outcomes through the use of Bloom's Taxonomy.
- 7. Demonstrate various techniques to engage learners.
- 8. Discuss the appropriate use of technology in education.
- 9. Analyze strategies in making education accessible and equitable.

6. COURSE CONTENT:

Lecture Content:

- 1. Overview of education in healthcare settings
 - A. Teaching a variety of audiences
 - B. Formal and informal teaching
 - C. Patient education
 - D. Interprofessional education
- 2. Learning Theories
 - A. Learning Styles
 - B. Learning Domains
 - a. Cognitive
 - b. Affective
 - c. Psychomotor
 - C. Adult versus child learning theories
 - D. Applying learning theories in the classroom and hospital settings
- 3. Education material development
 - A. Developing goals and objectives
 - B. Content
 - a. Theory
 - b. Skills
 - c. Competency based learning

- C. Clinical teaching development
- 4. Teaching methods
 - A. Classroom teaching methods
 - B. Clinical teaching methods
 - C. Techniques for engagement
- 5. Technology in health education
 - A. Develop handouts using word processing and/or desktop publishing software
 - B. Creating presentations for the patients and family using PowerPoint
 - C. Utilizing health mobile applications to teach patients and family improving patient outcomes.
- 6. Assessment of learning
 - A. Determining focus of assessment
 - a. Goals
 - b. Objectives
 - c. Outcomes
 - B. Assessment models
 - C. Formative vs summative assessments
 - D. Competency based assessments
 - E. Analyzing assessment data to improve outcomes

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Activity
- C. Discussion
- D. Other (Specify): Case scenarios

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Writing assignments will consist of synthesis and evaluation of outcomes and findings in case study analysis, and reflection/evaluation in relation to skills, abilities, and critical thinking in health education.

- Case studies focusing on an assigned topic given weekly by instructor.
- Summary reflection/evaluation essays of case studies and/or reading assignments (2-3 per week).
- Two comprehensive case study writing assignments will be required over the duration of the course, 5-7 pages/each.
- Students prepare a class lesson integrating effective active teaching techniques.

Reading Assignments:

Reading assignments will consist of reading and synthesizing at minimum 10 peer reviewed articles, textbooks, and publications. Readings will be focused on experience in health care as applicable to education in health care. Number of pages will vary but at minimum will require 750 - 900 pages of reading and analysis per semester.

Other Outside Assignments:

1. Students participate in a team project preparing and presenting an inservice to a Respiratory Care department, with the use of a survey to collect feedback.

2. Students prepare and present a class in an academic setting using a survey to collect feedback.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Final Class Performance
- B. Final Performance
- C. Homework
- D. Oral Presentation
- E. Papers
- F. Projects
- G. 1. Inter-professional teaching demonstration and oral presentation. 2. Hospital or other clinic-based teaching provided to patients and their families. 3. Case Studies

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

- A. Hess, N. MacIntyre, S. Mishoe and W. Galvin. *Respiratory Care : Principles and Practice*, 4th ed. Jones & Bartlett Learning, 2021
- B. Susan Bastable, Pamela Gramet, Karen Jacobs, Deborah Sopczyk. *Health Professional as Educator: Principles of Teaching and Learning***, 3rd ed. Jones & Bartlett Learning, 2019

Possible manuals include:

A. AARC. <u>Clinical practice guideline</u>, http://www.rcjournal.com/cpgs/, 06-01-2019 Possible periodicals include:

A. . *Respiratory Care*, Volume Current 2019

Other:

A. ** This title is available through Skyline College Library's e-Book collection, and students can access it for free by using their SMCCCD credentials.

Respiratory Care: Principles of Practice

https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCD/s0te9o/alma9910007878588053

Origination Date: January 2023 Curriculum Committee Approval Date: February 2023 Effective Term: Fall 2023 Course Originator: Heather Esparza

COURSE ID: RPTH B40 TITLE: Health Care Research Design and Methodology Units: 3.0 units Hours/Semester: 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours Method of Grading: Letter Grade Only Prerequisite: Admission to the Bachelor of Science in Respiratory Care program and completion of, or concurrent enrollment in MATH 200

2. COURSE DESIGNATION:

Degree Credit Transfer credit: none

3. COURSE DESCRIPTIONS:

Catalog Description:

Analysis of research design and methodology in health care and health sciences. Emphasis will include research evaluation and interpretation of results, design methodology, the planning and approval process, data collection and analysis, and communication and presentation of the results.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

- 1. Critically review, analyze, and interpret published research.
- 2. Develop research design, conduct or review a study, critically assess and perform analysis of quality measurement.
- 3. Evaluate and present a research design and applicable protocol.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

- 1. Discover the importance of evidence-based practice in health care.
- 2. Discuss the history, ethical and legal aspects of research.
- 3. Assess the strength and validity of research through the hierarchy of evidence.
- 4. Discover a systematic approach in the evaluation and analyzation of research results.
- 5. Explain the development of a research proposal.
- 6. Develop research questions and testable hypotheses.
- 7. Determine how to identify the appropriate design and data analysis methodology.
- 8. Discuss and practice how to effectively communicate research results.

6. COURSE CONTENT:

- 1. The Scientific Method
 - A. Elements of the research process
 - B. Research terminology
 - C. Statistical terminology
 - D. Research design
 - E. Hypothesis testing
 - F. Use and misuse of statistics
 - G. Difference between good and poor research design
 - H. Understanding the ethical issues in research
 - a. Investigational Review Boards
 - b. Informed consent, risk, and privacy
 - c. Investigational drugs and devices
 - I. Clinical research and evidence based practice
- 2. Conducting a literature review
 - A. Developing and researching clinical questions
 - B. Drawing clinical implications from results of prior research
 - C. Conceptualizing the research problem
 - D. Translating the problem into specific measurable statements
 - E. Recognizing and controlling threats to validity and reliability

- 3. Review basic statistical concepts
 - A. Dependent and independent variables
 - B. Sum, average mean, mode, and median
 - C. P value, T- test, Odd ratio
- 4. Steps in the research process
 - A. Define the problem
 - B. Review the literature
 - C. Identify the specific questions
 - D. Define variables and hypothesis
 - E. Design the protocol
 - F. Collect and analyze the data
 - G. Draw conclusions, discuss limitations, and communicate the results
- 5. Device testing, evaluation, and comparison
 - A. Lung testing devices and the application of patient models in research design
 - B. Different respiratory care diseases and modalities
 - C. The research literature review paper (selected topics)
 - D. Currently adopted clinical practice guidelines by the American Association of Respiratory Care as a standard of practice

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Critique
- C. Discussion
- D. Guest Speakers
- E. Other (Specify): 1. Students will present research to the fellow students, health care providers, health care researchers in clinical settings such as hospitals and Respiratory Care departments. Feedback from the audience will be collected by instructor.

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Writing assignments will consist of synthesis and evaluation of outcomes and findings in case study analysis, and reflection/evaluation in relation to skills, abilities, and critical thinking in health care research design.

- Case studies focusing on an assigned topic given weekly by instructor (2-3 pages).
- Summary reflection/evaluation essays focusing on weekly reading assignments (2-3 pages).
- One comprehensive case study writing assignments will be required over the duration of the course (5-7 pages)
- A written research project proposal (3-5 pages)
- Peer evaluation and feedback on research project proposal (1 page/once per semester)

Reading Assignments:

Reading assignments will consist of reading and synthesizing at minimum 10 peer reviewed articles, textbooks, and publications. Readings will be focused on research methodology and quantitative principles in health care. Number of pages will vary but at minimum will require 750 - 900 pages of reading and analysis.

Other Outside Assignments:

Students will work in groups to create a final oral presentation (15 minutes in length) of their research project proposal for their fellow students, health care providers, and health care researchers in clinical settings such as hospitals and Respiratory Care departments.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Homework
- **B.** Oral Presentation
- C. Research Projects
- D. Written examination
- E. Peer evaluation and feedback

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

A. Leslie G. Portney, Mary P. Watkins. *Foundations of Clinical Research: Applications to Practice*, 4th ed. F.A. Davis, 2020

B. Paul D. Leedy, Jeanne Ellis Ormrod. *Practical Research: Planning and Design*, 12th ed. Pearson, 2019 Possible periodicals include:

A. . Respiratory Care, Volume 2023

Origination Date: February 2023 Curriculum Committee Approval Date: April 2023 Effective Term: Fall 2023 Course Originator: Heather Esparza

COURSE ID: RPTH B50 TITLE: Respiratory Care Leadership and Management I Units: 3.0 units Hours/Semester: 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours Method of Grading: Letter Grade Only Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program; and RPTH 485 or equivalent.

2. COURSE DESIGNATION: Degree Credit

Transfer credit: none

3. COURSE DESCRIPTIONS:

Catalog Description:

Leadership and management theories in effective practices in the healthcare setting. Focuses on introducing roles and responsibilities of a leader and manager. Emphasis is placed on development of skills in leadership, communication, and critical thinking that facilitates positive change, and growth within the Respiratory Care profession. Specific attention is focused on the role of the transformational leader in assuring value, efficiency, and continuous quality improvement.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

- Upon successful completion of this course, a student will meet the following outcomes:
 - 1. Articulate a working foundation of leadership practices and theories for leading people and health organizations.
 - 2. Integrate behaviors and actions of successful leaders, and develop an individual current or future leadership style.
 - 3. Apply management strategies to various operational procedures and functions of the Respiratory Care department and other related departments.
 - 4. Critically reflect on evidence-based practices and competencies in teamwork and leadership.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

- 1. Compare and contrast leadership and management and justify rationale why health organizations need both.
- 2. Establish and optimize one's own current and future leadership styles and goals.
- 3. Characterize the complexity of healthcare systems and workers and be able to apply different leadership models focusing on transformational leadership in good communication and conflict management to various situations.
- 4. Develop and implement continuous quality improvement programs that focus on evidence-based practice and highlight the important role the RCP plays in successful healthcare delivery.
- 5. Apply concepts of budgets and budgeting, significant functions and elements of budget, and enumerate the principles and rules of budgeting as they apply.
- 6. Apply the role of ethics in Health care practices.
- 7. Demonstrate the effect culture can have on leading healthcare organizations .
- 8. Locate and utilize our professional organization AARC productivity standards to measure efficiency, effectiveness and value of the RCP in healthcare.
- 9. Develop a working knowledge of how multigenerational teams can best thrive within the Respiratory Care department as well as within the multidisciplinary healthcare team.
- 10. Develop a relationship with a healthcare provider who is in or has had experience with leadership.

6. COURSE CONTENT:

- 1. Principles of leadership and management
 - A. Understanding theories/models of leadership
 - a. Omnibus Leadership
 - b. Dymanic Culture
 - c. Bolman and Deal's Reframing Leadership
 - d. Yukl's Multiple Linkage
 - e. Hargrove's and Glidewell's Impossible Leadership

- B. Habits and practices of successful Leaders
 - a. Leadership and personality assessment
 - b. Personality archetype and leadership
 - c. Utilization of critical thinking using evidence-based practice.
 - d. Determining your own leadership style
- C. Leadership in Health Organizations
 - a. Mission, vision, values, strategies, goals
 - b. Internal and external environment
 - c. Culture
 - d. Continuous quality improvement
- D. Ethics in Health Leadership
 - a. Policy making and treatment
 - b. Codes in health industry as well as Respiratory Care State and National Law and Professional Ethics Standards
 - c. State regulatory compliance
 - d. Examining and directing solutions for ethical dilemmas in the workplace
- E. Listening, emotional intelligence, empathy, cultural diversity
- F. Professionalism
- G. Conflict
- 2. Structure of healthcare organizations
 - A. Profit versus not-for-profit organizations
 - a. Structure
 - b. Financial conditions
 - c. Operational differences
 - B. Accountable care /affordable care
 - a. Metric thresholds
 - b. Cost structures
 - c. Challenges to balance conditions
 - C. Highly reliable organizations
 - a. Leadership
 - b. Culture
 - c. Models
 - D. Transitions to business models such as Lean management systems
- 3. Organizational structure within healthcare systems
 - A. Organizational charts, decentralization versus central
 - B. Respiratory Care Department
 - a. Structure
 - b. Scope of practice
 - c. Labor Productivity
 - d. Policy and procedure making
 - e. Education competencies
 - f. Decision making process
 - g. Communication

4. Introduction to budgets, cost centers, ledgers and reports, revenue versus non-revenue departments, operations and capital budgets, reimbursement structure, Current Procedural Terminology (CPT) coding

- A. Metrics and using data to measure hospital and department performances including customer services
- B. Data collection systems, outcomes, benchmarking
- C. Forecasting and strategic thinking
- D. Quality assurance Continuous Quality Improvement (CQI) programs
- E. Contracts and purchasing
- 5. Working with Human Resources
 - A. Disciplinary Processes
 - a. Problematic behavior
 - b. Counseling vs. disciplining
 - c. Progressive discipline
 - d. Union vs. non-union

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

A. Lecture

- B. Critique
- C. Discussion
- D. Guest Speakers
- E. Other (Specify): Interactive group projects to analyze various aspects of working Respiratory Care Departments (and other related departments). Case scenarios. Discussions and reflections. Use of instructor's comments and feedback on assignments and discussions. Evaluation of evidence-based practice

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Writing assignments will consist of synthesis and evaluation of outcomes and findings in case study analysis, and reflection/evaluation in relation to skills, abilities, and critical thinking in leadership and management.

- Weekly assignments require discussion and reflection on reading and video presentations (1-3 pages).
- One comprehensive writing assignment (5-10 pages) will focus on critical analysis and evaluation of management strategies to Respiratory Care department operational procedures and/or function.
- Major development and implementation of a quality improvement process within one's own environment utilizing the Plan, Do, Study, Act (PDSA) or Plan, Do, Check, Act (PDCA) cycle- scope involves both B50 and B52.

Reading Assignments:

Reading assignments will consist of reading and synthesizing at minimum 10 peer reviewed articles and case studies relating to respiratory leadership and management. Students will also read from identified textbooks and relevant publications. Readings will be focused on experience in health care as applicable to leadership and management. Number of pages will vary but at minimum will require 750 -900 pages of reading and analysis.

Other Outside Assignments:

- Evaluate productivity and staffing-using AARC standards and evaluating each student's own clinical daily work assignments versus national standards through a written reflection paper.
- Leadership Video- develop a 5 minute creative video on successful leadership in respiratory care.
- Begin the group research project by identifying, selecting, and researching a quality improvement issue at a hospital through a written analysis.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Group Projects
- C. Homework
- D. Oral Presentation
- E. Papers
- F. Research Projects
- G. Written examination
- H. Standard BSRT asynchronous discussion rubric, Standard synchronous discussion BSRRT rubric, Instructor's standards- creativity and originality, Group project, Oral presentation- video rubric

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

A. Dye, C., F. *Leaderhip in Healthcare: Essential Values and Skills***, 3rd ed. Chicago, IL: Health Administration Press, 2017

Possible periodicals include:

A. . Respiratory Care, Volume Current 2023

Other:

- A. Instructor authored-OER- Respiratory Care Leadership and Management 1 Resource Packet: Lecture Notes, Canvas References for RPTH B50
- B. ** This title is avaiable through Skyline College Library's e-Book collection, and students can access it for free by using their SMCCCD Credentials.

Leadership in Healthcare: Essential Values and Skills

Origination Date: February 2023 Curriculum Committee Approval Date: April 2023 Effective Term: Fall 2023 Course Originator: Heather Esparza

COURSE ID: RPTH B52 TITLE: Respiratory Care Leadership and Management II Units: 3.0 units Hours/Semester: 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours Method of Grading: Letter Grade Only Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program; and RPTH 485 or equivalent.

2. COURSE DESIGNATION: Degree Credit

Transfer credit: none

3. COURSE DESCRIPTIONS:

Catalog Description:

Application of advanced level of skills learned in Respiratory Care Leadership and Management I through a case based model approach in various aspects of providing respiratory health care management. Students will identify and apply strategic models to analyze problems, formulate solutions, and make sound decisions.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

- 1. Make inferences and draw conclusions relative to leadership and management skills within the healthcare organization or industry.
- 2. Integrate the tenets of various evidence-based theoretical constructs and strategic models to make decisions, solve problems, and develop plans.
- 3. Distinguish the difference between leadership and management and use that knowledge to make strategic decisions and enhance organizational efficiencies and effectiveness through the development and implementation of plans.
- 4. Critically reflect on the application of theoretical constructs and strategic methodologies that support peak performance in teams.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

- 1. Integrate perspectives from theory and practice to effect change by developing strategic skills and implementing strategic foresight.
- 2. Analyze and evaluate strategic leadership and management evidence- based literature to inform decisions, draw conclusions, solve problems, and develop strategic models.
- 3. Analyze and critique organizational cases to judge the impact of leadership and management on a department or organization.
- 4. Evaluate how to lead teams to levels of peak performance through the application of evidence-based theoretical constructs and strategic methodologies.
- 5. Analyze and evaluate data using various analysis models to draw conclusions, inform decisions, and make recommendations.
- 6. Examine the decision-making process to determine why making mistakes is an important and beneficial aspect of the strategic management process.
- 7. Differentiate between simple and complex decisions and explain the process involved in making complex decisions.
- 8. Examine effective oral and written professional communication strategies that inspires engagement and interprofessional collaboration.

6. COURSE CONTENT:

- 1. Evidence-based Leadership and management strategies
 - A. Applying models of leadership
 - B. Developing systems of decision making
 - a. Situational assessment and environmental scanning
 - b. Decision making and decision alignment
 - c. Logical and intuitive processes

- d. Group problem solving
- e. Decision assessment and evaluation through analysis models
 - i. Pareto
 - ii. Value
 - iii. Cause and effect
 - iv. Check sheet
 - v. SWOT
 - vi. PEST
 - vii. Cost benefit analysis
- 2. Leadership and management and effects for change
 - A. Goals for change
 - B. Psychology of resistance to change
 - C. Identification and implementation of change model
 - D. Change management plan
 - E. Implementation and communication
 - F. Evaluation and assessment
 - G. Effective communication strategies
- 3. Hiring and retention
 - A. Orientation programs
 - B. Performance evaluations
 - C. Disciplinary processes
- 4. Coaching and mentoring staff
 - A. Motivational strategies
 - B. Teamwork approaches
 - C. Delegation and empowerment
 - D. Career development programs
 - a. Clinical ladders
 - b. Advancement
- 5. Managing departmental resources for effective productivity and outcomes
 - A. Data collection systems
 - B. Outcomes, forecasting, and strategic thinking
 - C. Budgets
 - D. Reimbursement structures
 - E. Efficiency
 - F. Benchmarking
- 6. Case study
 - A. Strategic planning
 - B. Resource allocation
 - C. Budget planning and execution
 - D. Performance evaluation
 - E. Staff development
 - F. Disciplinary process

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Critique
- C. Discussion
- D. Guest Speakers
- E. Other (Specify): Interactive group projects to analyze various aspects of working Respiratory Care Departments (and other related departments), case scenarios

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following: Writing Assignments:

Writing assignments will consist of synthesis and evaluation of outcomes and findings in case study analysis, and reflection/evaluation in relation to skills, abilities, and critical thinking in leadership and management. These assignments will use the Plan, Do, Study, Act (PDSA) or Plan, Do, Check, Act (PDCA) cycle introduced in B50.

• Written summaries (7-10 pages) based on 2-5 journal articles assigned weekly.

- One comprehensive case study (5-7 pages) writing assignment will be focused on critical analysis and evaluation of management strategies to Respiratory Care department operational procedures and/or function.
- One reflective writing assignment (1-3 pages) articulating a working foundational philosophy of leadership practice and theory for leading people and health organizations.

Reading Assignments:

Reading assignments will consist of reading and synthesizing at minimum 10 peer reviewed articles and case studies relating to respiratory leadership and management. Students will also read from identified textbooks and relevant publications. Readings will be focused on experience in health care as applicable to leadership and management. Number of pages will vary but at minimum will require 750 -900 pages of reading and analysis per smester.

Other Outside Assignments:

- Field interviews, analysis of departments and various management reports, critical review and analysis of Respiratory Care policies and procedures. Visit and critique a health care organization strategies and/or interview a health care leader/manager.
- Finish the group research project by orally presenting a quality improvement issue at a hospital and action plan that mitigates the issue through leadership and management choices.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Group Projects
- C. Homework
- D. Oral Presentation
- E. Papers
- F. Research Projects
- G. Written examination

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

- A. Ludlow, G. and Coppola, N. *Leadership for Health Professionals, Theory, Skills, and Application***, 3rd ed. Burlington, MA: Jones and Bartlett Leanring, 2018
- B. McConnell, C. *The Effective Healthcare Supervisor***, 9th ed. ed. Burlington, MA: Jones and Bartlett Learning, 2019

Possible periodicals include:

A. . Respiratory Care, Volume Current 2023

Other:

A. ** This title is available through Skyline College Library's e-Book collection, and students can access it for free by using their SMCCCD credentials.

Leadership for health professionals: theory, skills, and applications

 $https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCD/s0te9o/alma9910007876597053$

B. ** This title is available through Skyline College Library's e-Book collection, and students can access it for free by using their SMCCCD credentials.

The effective health care supervisor

https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCD/s0te9o/alma9910006395405053

Origination Date: February 2023 Curriculum Committee Approval Date: April 2023 Effective Term: Fall 2023 Course Originator: Heather Esparza

COURSE ID: RPTH B60 TITLE: Advanced Neonatal and Pediatric Respiratory Care Units: 3.0 units Hours/Semester: 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours Method of Grading: Letter Grade Only Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program; and RPTH 490 or equivalent.

2. COURSE DESIGNATION: Degree Credit Transfer credit: none

3. COURSE DESCRIPTIONS:

Catalog Description:

Advanced concepts of neonatal and pediatric respiratory care. Emphasis placed on neonatal and pediatric: Anatomy, cardiopulmonary disease, pathophysiology, high risk procedures, transport, inter-professional collaboration and communication, professionalism, evidence-based medicine, quality assurance and the advanced therapeutic needs of children. Students will demonstrate competence in assessment skills, formulation of patient care plans and application of specific respiratory care modalities for neonatal and pediatric patients.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

- 1. Critically appraise approaches and applications of appropriate advanced medical treatments and modalities which can be utilized to effectively care for neonatal and pediatric patients.
- 2. Demonstrate advanced airway management, mechanical ventilation, aerosol drug delivery and resuscitation techniques of the neonatal and pediatric patient.
- 3. Create and evaluate appropriate and effective patient care plans reflecting consideration of evidence-based research and quality assurance in the care of neonatal and pediatric patients.
- 4. Evaluate, assess and implement strategies to enhance inter-professional collaboration, communication and multidisciplinary team dynamics.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

- 1. Discuss approaches in advanced neonatal and pediatric respiratory care.
- 2. Identify and provide appropriate gestational physical and neurological developmental care.
- 3. Recognize levels of respiratory and cardiovascular hemodynamic compromise in the neonatal and pediatric patient populations.
- 4. Evaluate neonatal and pediatric evidence-based literature and research.
- 5. Illustrate approaches that optimize medication delivery in neonatal and pediatric patient populations.
- 6. Categorize and practice initiating appropriate advanced mechanical ventilation strategies and waveforms within the neonatal and pediatric populations.
- 7. Demonstrate team dynamics through interprofessional collaboration and develop collaborative strategies to enhance patient care.
- 8. Differentiate and apply modalities that optimize lung function in neonatal and pediatric populations.
- 9. Discuss, identify, and recommend treatment plans for cardiovascular and respiratory compromise in the neonatal/pediatric patient.
- 10. Distinguish common legal ethical issues that occur in neonatal and pediatric practice.

6. COURSE CONTENT:

- 1. Evidence-based medicine and research in neonatal and pediatric respiratory care
 - A. Evidence-based practice
 - B. Hierarchy of evidence
 - C. PICO
 - D. Internet medical search engines
 - E. Research validity and bias

- 2. Quality assurance initatives and implementation in neonatal and pediatric respiratory care
 - A. Nine steps in a quality assurance plan
 - B. Hospital committees
 - C. PDSA cycle
 - E. Measurable outcomes
- 3. Pediatric/neonatal anatomy and physiology:
 - A. Normal child growth and development
 - a. Skeletal and pulmonary maturity
 - b. Neurologic development
 - c. Pulmonary function
 - B. Fetal and transitional circulation
- 4. Advanced neonatal/pediatric pathophysiology
 - A. Pulmonary disorders
 - B. Congenital heart defects
- 5. Invasive/non-invasive ventilation and artificial airway for neonatal pediatric patients:
 - A. Artificial airways
 - a. Endotracheal, tracheostomy, and laryngeal mask
 - i. Type and size
 - ii. Proper selection
 - iii. indications and hazards
 - iv. securing and routine care
 - B. Oxygen delivery
 - a. Low flow
 - b. High flow
 - C. Ventilators
 - a. Conventional
 - i. Invasive
 - ii. Noninvasive
 - a. Proper interfaces
 - b. Interface challenges
 - b. High frequency oscillation
 - c. High frequency jet
 - D. Extracorporeal membrane oxygenation
- 6. Invasive and non-invasive monitoring
 - A. Arterial and capillary blood gases
 - B. Pulse oximetry
 - C. Transcutaneous monitoring
 - D. End tidal carbon dioxide monitoring
 - E. Hemodynamic monitoring
 - F. Pulmonary function testing
 - G. Bronchoscopy
 - H. Skin integrity and staging
 - I. Waveforms
- 7. Transporting of critically ill patients
 - A. Unit to unit
 - B. Ambulance
 - C. Air
- 8. Advanced medication and gas delivery
 - A. Medications
 - a. Surfactant
 - b. Nitric Oxide
 - c. Heliox/Isoflurane
 - d. Nitrogen-sub ambient
 - e. Prostaglandin
 - B. Administration techniques and dosing
- 9. Discharge planning
 - A. Patient and family education
 - B. Equipment management

10. Interprofessional Collabration

- A. Team dynamics
- B. Communication
- C. Professionalism
- D. Multidisciplinary team
- E. Care team, rounds and huddles
- 11. Ethics/legal issues for neonatal and pediatric patients
 - A. Mandatory reporting
 - B. Age of decision making
 - C. Equipment modifications
 - D. Withdrawal/grief
 - E. Family centered care
 - F. Ancillary services & interdisciplinary care team
 - G. Lung transplants / transplant donor network
 - H. Discharge planning

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Critique
- C. Activity
- D. Discussion
- E. Observation and Demonstration
- F. Other (Specify): Case study analysis

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Writing assignments will consist of synthesis and evaluation of outcomes and findings in case study analysis, and reflection/evaluation in relation to skills, abilities, and critical thinking in advanced neonatal and pediatric respiratory care.

• Case studies in neonatal care and pediatric care on an assigned topic given weekly by the instructor (2-4 pages).

• Summary reflection/evaluation essays (2-3 per week) focusing on weekly reading assignments (1-2 pages).

• Two comprehensive case study writing assignments will be required over the duration of the course, one focused on neonatal care and one focused on pediatric care (5-7 pages).

Reading Assignments:

Reading assignments will consist of reading and synthesizing at minimum 10 peer reviewed articles and case studies relating to neonatal and pediatric respiratory care. Students will also read from identified textbooks and publications. Readings will be focused on experience in health care as applicable to neonatal and pediatric respiratory care. Number of pages will vary but at minimum will require 750 - 900 pages of reading and analysis.

Other Outside Assignments:

A. Evaluation of patient case scenarios

- B. Computer assisted learning exercises
- C. Discussion board participation

Students participate in a collaborative team project preparing and presenting a care plan. The care plan is presented through a video to peer colleagues and students receive feedback.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Class Performance
- C. Class Work
- D. Final Class Performance
- E. Group Projects
- F. Homework

G. Oral Presentation

H. Papers

I. Research Projects

J. Simulation

K. Written examination

L. Case studies

10. REPRESENTATIVE TEXT(S):

Possible textbooks include: A. Walsh, B, K. *Neonatal and Pediatric Respiratory Care*, 6th ed. Elsevier, 2022 Possible periodicals include: A. *. Respiratory Care*, Volume Current 2023

> Origination Date: January 2023 Curriculum Committee Approval Date: February 2023 Effective Term: Fall 2023 Course Originator: Heather Esparza

COURSE ID: RPTH B90 TITLE: Respiratory Care Capstone Project Units: 4.0 units Hours/Semester: 24.0-27.0 Lecture hours; 120.0-135.0 Field Experience hours; 48.0-54.0 Homework hours; 192.0-216.0 Total Student Learning hours Method of Grading: Letter Grade Only Prerequisite: RPTH B10, RPTH B15 RPTH B20 RPTH B30 RPTH B40 RPTH B50 RPTH B52 RPTH B60 COMM B10, COUN B10, SOCI B10, and SOSC B10

2. COURSE DESIGNATION: Degree Credit

Transfer credit: none

3. COURSE DESCRIPTIONS:

Catalog Description:

Capstone course in Respiratory Care focuses in areas of advanced cardiopulmonary respiratory care, leadership and management, case management, research, education, or other special areas of interest. Students will identify and complete a project applying knowledge and skills learned in the program. Projects will be developed in collaboration with faculty and community members and are aligned with student areas of interest.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

- 1. Draw on multiple evidence-based practice sources of analysis, research, and critical thinking across the curriculum to develop addressing a problem and completing a project.
- 2. Develop a project plan for addressing the research question, issues, problem or need.
- 3. Evaluate project methods, findings, and outcomes.
- 4. Present orally and in writing the full breadth of knowledge gained through the Respiratory Care program, focusing on one or more subject areas: cardiopulmonary pathophysiology, case management, health education, research methodology, and/or respiratory care leadership and management.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

- 1. Critically evaluate and identify real world Respiratory Care industry research questions, issues, problems or needs with knowledge and skills developed during the program.
- 2. Discover how to draw on multiple evidence-based practice sources of analysis, research, and critical thinking across curriculum to address a problem in Respiratory Care.
- 3. Critique various ways to address a research question, issue, problem or need.
- 4. Develop and evaluate methods of communication to present evidence-based literature that addresses a healthcare question or problem.
- 5. Discover how to apply interventions that have the potential to address healthcare issues or concerns.
- 6. Evaluate different strategies to address ongoing healthcare issues and to enhance value efficacy through continuous quality improvement initiatives.
- 7. Analyze leadership principles that are required to address the healthcare question, problem or need.
- 8. Discover how to incorporate quality assurance and patient safety concepts to address a healthcare question or problem.

6. COURSE CONTENT:

- 1. Identify a research question, issue, problem, or need in the field.
 - A. Advanced Cardiopulmonary Respiratory Care
 - B. Advanced Neonatal/Pediatric Respiratory Care
 - C. Advanced Respiratory Case Management
 - D. Health Care Research Design and Methodology
 - E. Leadership and Management
 - F. Health Education
 - G. Other Focal Approved Area
- 2. Choose an appropriate community expert for development of project.

- 3. Plan and implementing a project.
 - A. Industry problem to be addressed
 - B. Literature analysis
 - C. Analysis of problem
 - D. Posit solutions to identified problems using discourse in the field as a guide.
 - E. Formulate project plan to address problem
 - a. Project structure
 - b. Timelines, GANT charts
 - c. Project plan creation
 - d. Execution of plan
 - e. Summary of results
- 4. Formal presentation to industry and related communities
- 5. Evidence- based research paper
- 6. Analysis and solution to identified project
- 7. Abstract poster

Lab Content:

- Students will be performing the following through project- based field experience:
- 1. Identification of a research question, issue, problem, or need in the field. Project must align with focal areas within the major.
 - A. Advanced Cardiopulmonary Respiratory Care
 - B. Advanced Neonatal/Pediatric Respiratory Care
 - C. Advanced Respiratory Case Management
 - D. Health Care Research Design and Methodology
 - E. Leadership and Management
 - F. Health Education
 - G. Other Focal Approved Area
- 2. Identification of appropriate community expert for development of project.
 - A. Clinical
 - B. Outpatient
 - C. Research
 - D. Educator
 - E. Professional Organization Leader
 - F. Manager
 - G. Other Applicable Practitioner
- 3. Plan and implementation of project.
 - A. Industry problem to be addressed
 - B. Literature analysis
 - a. Meta-analysis
 - b. Evidence based strategies
 - C. Analysis of problem
 - D. Posit solutions to identified problems using discourse in the field as a guide.
 - E. Formulate project plan to address problem
 - a. Project structure
 - b. Timelines, GANT charts
 - c. Project plan creation
 - d. Execution of plan
 - e. Summary of results
 - F. Formal presentation to industry and related communities
- 4. Faculty and community mentor will meet with student weekly to advise and support the capstone project.

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Directed Study
- C. Critique
- D. Activity
- E. Discussion
- F. Field Experience
- G. Individualized Instruction
- H. Other (Specify): Mentorship between student and community member

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Writing assignments will consist of:

- Articulation of capstone project proposal (1-2 pages).
- Integration of literature search analysis; synthesis of outcomes and findings (2-3 pages).
- Reflection/evaluation of capstone experience in relation to skills, abilities, and critical thinking (2-3 pages).
- A final capstone paper that demonstrates the full breadth of knowledge gained through the Respiratory
- Care Program with focus on one or more assigned subject areas (5-7 pages).

Reading Assignments:

- Reading assignments will vary depending on capstone project. They will consist of the following:
- Reading and synthesizing at minimum 15 peer reviewed articles.
- Textbooks and publications used in prerequisite curriculum.
- Readings will be focused on experience in health care as applicable to capstone project.
- Number of pages will vary but at minimum will require 750 -900 pages of reading and analysis.

Other Outside Assignments:

- Demonstration in a final presentation (25 minutes) the full breadth of knowledge gained through the Respiratory Care Program with focus on one or more assigned subject areas.
- Students are expected to meet a varied number of hours per week with a faculty and/or community member to facilitate progress and completion of an independent study capstone project. 120 hours will be documented.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Work
- B. Field Trips
- C. Group Projects
- D. Oral Presentation
- E. Papers
- F. Research Projects

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

- A. Bastable, S. et. al. *Health Professional as Educator: Principles of Teaching and Learning***, 2nd ed. Sudbury, MA: Jones and Bartlett Leanring, 2020
- B. Leedy, P & Ormrod, J. Practical Research: Planning and Design, 12th ed. Pearson, 2019
- C. Dye, C. F. *Leadership in Healthcare: Essential Values and Skills***, 3rd ed. Chicago, IL: Health Administration Press, 2017

Possible periodicals include:

A. . Respiratory Care, Volume Current 2023

Other:

A. ** This title is available through Skyline College Lirary's e-Book collection, and students can access it for free by using their SMCCCD credentials.

Leadership in Healthcare: Essential Values and Skills

https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL_SMCCD/s0te9o/alma9910007515738053
B. This title is available through Skyline College Lirary's e-Book collection, and students can access it for free by using their SMCCCD credentials.

Health Professional as Educator: Principles of Teaching and Learning

https://caccl-smccd.primo.exlibrisgroup.com/permalink/01CACCL SMCCD/s0te9o/alma9910007855593053

Origination Date: February 2023 Curriculum Committee Approval Date: April 2023 Effective Term: Fall 2023 Course Originator: Heather Esparza

1. COURSE ID: COMM B10 TITLE: Health Communication

Units: 3.0 units **Hours/Semester:** 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours

Method of Grading: Letter Grade Only

Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program; and COMM 130, or COMM 150 or equivalent.

2. COURSE DESIGNATION:

Degree Credit Transfer credit: none

3. COURSE DESCRIPTIONS:

Catalog Description:

Critical exploration of health communication concepts, theories, research methods, cases, and other practices applied in addressing real-world health issues, administration, and decision-making. Addresses health communication approaches in the planning, implementation, and evaluation of health promotion and behavior change campaigns.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

- 1. Analyze and discuss the theories, models, and organizational issues and strategies in healthcare.
- 2. Examine and assess health promotion materials and behavior change campaigns.
- 3. Research, design and cohesively present a team health promotion.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

- 1. Describe the history of the Health Communication field.
- 2. Discuss the social construction of health and illness.
- 3. Explore the various contexts of Health Communication.
- 4. Identify and predict the factors that impact healthcare decisions.
- 5. Compare and contrast the various theories and models of health communication.
- 6. Analyze current issues in healthcare.
- 7. Engage in interpersonal, small group, mass media and organizational communication strategies.
- 8. Summarize and employ communication competency interventions.
- 9. Produce and present a health promotion program.
- 10. Apply the theories, models and principles of health communication and behavioral change to evaluate health promotion materials.
- 11. Interpret organizational complexities in healthcare contexts.

6. COURSE CONTENT:

- 1. Social Construction of Health
 - A. History of Health Communication
 - a. Development of the Field
 - i. Psychological Foundation
 - ii. Sociological Foundation
 - iii. Persuasion & Social Influence
 - iv. Communication Foundation
 - b. Competing Perspectives
 - i. Healthcare Delivery
 - ii. Health Promotion
 - c. Conceptualization of Health in the U.S.
 - d. Institutionalization of the Field
 - B. Models, Theories and Fields
 - a. Biomedical Model
 - b. Biopsychosocial Model

- c. Cultural Model
- d. Narrative Theory
- e. Health Information Seeking Theory
- f. Interpersonal Communication
- g. Mass Media Communication
- h. Organizational Communication
- C. Social Construction of Health and Illness
 - a. Cultural
 - b. Gender
 - c. Ethnic
 - d. Religious
 - e. Geographical
 - f. Political
 - g. Health Literacy
 - h. Socioeconomic Status
 - i. Disability
- D. Current Issues in Healthcare Communication
 - a. Public Advocacy
 - i. Disease
 - ii. Vaccinations
 - iii. Death/Dying
 - iv. Religion
 - b. Consumerism
 - i. Identifying sources
 - ii. Identifying channels
 - iii. Gathering data
 - iv. Analyzing data
 - c. Empowerment
 - i. Advocating/Negotiating
 - ii. Disseminating Information
- 2. The Clinical Context of Health Communication
 - A. Action Areas
 - a. Management
 - b. Human Resources
 - c. Education
 - d. Policy
 - e. Public Relations
 - f. Community Mobilization
 - B. Leadership and Teamwork
 - C. Organizational Complexities
 - D. Communication Competency Interventions
- 3. Planning, Implementing and Assessing Health Communication Programs
 - A. Planning Process
 - B. Situation Analysis
 - a. Audience
 - b. Context
 - c. Message
 - d. Behavior Change
 - e. Medium
 - C. Objectives and Strategies
 - D. Evaluation Plans

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Critique
- C. Activity
- D. Discussion
- E. Guest Speakers
- F. Observation and Demonstration

G. Other (Specify): Small group work

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Writing Assigments:

- Health narrative essay (4-6 pages/once per semester)
- Health issue research paper (6-8 pages/once per semester)
- Case Study analysis paper (3-5 pages/1-2 per semester)
- Reading or Personal reflection papers (1-2 pages/3-4 per semester)
- Full-sentence outlines (2-5 pages/2-3 times per semester)
- Works cited/reference pages (up to 1 page/2-3 times per semester)
- Weekly posts in individual and group discussion forums 10-20 pages of total writing over the course of a semester (when appropriate for course modality).
- Oral Presentation Assignments:

All of the following oral presentations will be faculty-supervised, and faculty-evaluated oral presentations in the presence of others (physically or virtually).

- Health Promotion Group Project Presentation (30 minute persuasive presentation)
- Health issue podcast (5-7 minute informative presentation)
- Healthcare Debates (10-20 minutes)

The specific speech times and number of cited research sources, per speech, will be determined by the individual instructors.

Reading Assignments:

Reading assignments will consist of peer reviewed articles, textbooks, case studies, publications and health promotion materials. The number of pages will vary, but students can expect to read 1-2 chapters per week as well as outside articles and studies. Reading materials will be focused on the theories, principles, models and concepts related to the organization, issues and decision making within the field of Health Communication.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Class Performance
- C. Class Work
- D. Exams/Tests
- E. Final Class Performance
- F. Final Performance
- G. Group Projects
- H. Homework
- I. Oral Presentation
- J. Papers
- K. Portfolios
- L. Projects
- M. Quizzes
- N. Research Projects

10. **REPRESENTATIVE TEXT(S):**

Possible textbooks include:

- A. Schiavo, R. Health Communication: From Theory to Practice, 2nd ed. Hoboken, NJ: Jossey-Bass, 2014
- B. du Pre, A & B. Cook Overton. *Communicating About Health: Current Issues and Perspectives*, 6th ed. Oxford: Oxford University Press, 2020
- C. du Pre, A. & E. Berlin Ray. *Real-Life Scenarios: A Case Study Perspective on Health Communication*, 1st ed. Oxford University Press, 2017

Origination Date: January 2023 Curriculum Committee Approval Date: February 2023 Effective Term: Fall 2023 Course Originator: Jessica Hurless

1. COURSE ID: SOSC B10 TITLE: Public Health Policy

Units: 3.0 units Hours/Semester: 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours

Method of Grading: Letter Grade Only

Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program; and SOCI 100, or HSCI 135, or PHIL 100, or PHIL 240 or PLSC 210, or PLSC 200 or equivalent.

2. COURSE DESIGNATION:

Degree Credit Transfer credit: none

3. COURSE DESCRIPTIONS:

Catalog Description:

Exploration of public health policy, examining core topics in the study of health and health care delivery. Diverse perspectives on health care policy will be examined from an interdisciplinary approach. Students will develop an understanding of fundamental ideas and problems in the areas of health and medical care.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

- 1. Appraise healthcare policy and programs from sociological, political, economic, legal, and ethical perspectives.
- 2. Summarize and discuss contemporary health policy problems and issues.
- 3. Develop and evaluate possible solutions to important healthcare problems.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

- 1. Discuss how socio-economic and cultural factors can affect health and healthcare policy outcomes.
- 2. Describe decisions, plans, strategies, and actions undertaken to achieve specific health care goals
- 3. Weigh the pros and cons of U.S. health policy approaches as compared to international approaches.
- 4. Discuss the political and policy-making process of US healthcare.
- 5. Describe the process through which health policy is made in the United States, including the role of legislators, judges, government agencies, non-government organizations and for-profit actors.
- 6. Understand the unique nature of the American system of health care delivery, and the historical forces that shaped it.
- 7. Formulate actionable strategies for improving the equitable delivery of health care in the United States.
- 8. Analyze policy tradeoffs and clearly communicate a case for or against specific policy options.
- 9. Identify the interplay between social determinants of health, including racism and other forms of systemic oppression, and health policy.
- 10. Anticipate the effects of policy on health equity, including consequences of health policies and practices that harm under-served groups.

6. COURSE CONTENT:

- 1. Determinants of health
 - A. biological and hereditary factors
 - B. socioeconomic factors
 - C. cultural factors
 - D. environmental factors
 - E. case studies: smoking, asthma, obesity
- 2. Public Health as an approach
 - A. concept and appropriateness of public health approaches to issues such as
 - a. gun violence
 - b. teen pregnancy
 - c. depression
 - d. drug and alcohol abuse
 - e. obesity

f. tobacco use

- g. environmental pollutants
- h. bullying
- B. history of public health and public health policy responses to crisis such as cholera, polio, HIV/AIDS, COVID-19, famine, and malaria
- 3. Healthcare policy and health
 - A. US healthcare laws and institutions
 - a. organizing healthcare delivery
 - b. organizing healthcare insurance
 - B. issues of need, access, and cost
 - a. setting priorities, allocating resources
 - b. market-based mechanisms versus non-market based mechanisms
 - C. future and emerging issues
 - a. aging populations
 - b. globalized and mobile populations
 - c. newly emerging pathogens or illnesses
- 4. Politics and the policy-making process in healthcare
 - A. key players and interest groups
 - a. who are they?
 - b. how do their interests dovetail or conflict?
 - B. the legislative process
 - a. Students will explore at least one major health care policy initiative by considering legislative responses to health care crisis.
 - C. implementation and oversight
 - a. how to ensure quality healthcare delivery
 - i. role of government
 - ii. role of NGOs
 - iii. role of patients
- 5. Policy Alternatives
 - A. varying policies and approaches within the US
 - a. Healthy SF
 - b. Medicaid and CHIP in differring states
 - B. varying policies by other developed countries. For example:
 - a. Healthcare in Britain
 - b. Healthcare in France
 - c. Healthcare in Japan
 - C. other public health approaches
 - a. what will patients want from their providers?

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Critique
- C. Directed Study
- D. Discussion
- E. Guest Speakers

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

Writing assignments will consist of synthesis and evaluation of outcomes and findings in case study analysis, and reflection/evaluation in relation to skills, abilities, and critical thinking in public health policy.

- Case studies focusing on an assigned topic given weekly by instructor.
- Summary reflection/evaluation essays (2-3 per week) focusing on weekly reading assignments. 250 300 words each.
- One to two comprehensive case study writing assignments will be required over the duration of the course. 1000-1500 words each.

Reading Assignments:

Reading assignments will consist of reading and synthesizing at minimum 10 peer reviewed articles and

case studies relating to public health policy. Students will also read from identified textbooks and relevant publications. Readings will be focused on various aspects related to public health policy. Number of pages will vary but at minimum will require 750 -900 pages of reading and analysis.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Class Performance
- C. Class Work
- D. Exams/Tests
- E. Group Projects
- F. Homework
- G. Papers
- H. Projects
- I. Quizzes
- J. Research Projects
- K. Written examination
- L. Analysis of Case Studies
- 10. **REPRESENTATIVE TEXT(S):**

Possible textbooks include:

- A. Birkhead, G., Morrow C., and Pirani S. Essentials of Public Health, 4th ed. Jones & Bartlett Learning, 2020
- B. McLaughlin, C. and McLaughlin, C. Health Policy Analysis: An Interdisciplinary Approach, ed. Jones & Bartlett Learning, 2023
- C. McKenzie, J., Pinger, R., and Seabert, D. An Introduction to Community & Public Health, ed. Jones & Bartlett Learning, 2021

Origination Date: February 2023 Curriculum Committee Approval Date: April 2023 Effective Term: Fall 2023 Course Originator: Jesse Raskin

COURSE ID: COUN B10 TITLE: Multicultural Human Relations Units: 3.0 units Hours/Semester: 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours Method of Grading: Letter Grade Only Prerequisite: Admission to the Bachelor of Science in Respiratory Care Program; and PSYC 100 or equivalent.

2. COURSE DESIGNATION: Degree Credit

Transfer credit: none

3. COURSE DESCRIPTIONS:

Catalog Description:

Engages students in an evolving process of developing greater self and cultural awareness that will help inform how they work with communities specific to various professional settings. Utilizes a psychosocial perspective to explore various counseling theoretical frameworks that strive for greater cultural competency as a practitioner. Examination of intersectionalities such as ethnicity, gender, class, sexual orientation, and generational identity.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

Upon successful completion of this course, a student will meet the following outcomes:

- 1. Implement counseling practices and theoretical frameworks to become a more culturally competent practitioner (e.g. self-awareness, attending skills, unconditional positive regard/outward valuing of others, ethical vulnerability, communication active listening, being present, reflection, reframing, cultural humility, therapeutic alliance, empathy, and praxis).
- 2. Analyze multiple identities through the lens of intersectionality such as ethnicity, gender, class, sexual orientation, and generational identity.
- 3. Transform theories to practice when addressing systems of oppression that are underlying in their professional settings.

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

- 1. Understand multiple theoretical frameworks that inform intersectionalities such as ethnicity, gender, class, sexual orientation, and generational identity
- 2. Engage in specific communities utilizing multicultural competencies and practices
- 3. Advocate through various domains maximizing critical thinking skills and self-efficacy
- 4. Manifest their complex identities into a unifying a purpose that integrates into their personal life, professional field, and communities
- 5. Develop a collective action plan utilizing applied counseling theoretical frameworks to address systems of oppression in their professional settings
- 6. Acknowledge and understand personal resistance in multicultural counseling
- 7. Be cognizant of how worldviews may influence the ability to understand, empathize, and work effectively with diverse clients
- 8. Realize that becoming an effective multicultural practitioner is a lifelong journey

6. COURSE CONTENT:

- 1. Theories & Pedagogies
 - A. Critical Pedagogy (Freire)
 - B. Reality Pedagogy (Emdin)
 - C. Engagement Pedagogy (hooks)
 - D. Advocacy Competency Domains (Lewis, Arnold, House, & Toporek)
 - E. Transnational Feminism Theory
 - F. Racial Identity Development Theory (Tatum)
 - G. Cultural Competence Model (Sue)
 - H. Community Cultural Wealth (Yosso)
- 2. Awareness of Intersectionalities

- A. Cultural Influences on Identity
- B. Knowledge of Self
 - a. Necessity to understand who we are in the room
 - b. Biases, personal beliefs, and assumptions
 - c. Transference/Counter Transference
- C. Microaggressions in Counseling
- D. Complexity of identity for clients and patients
 - a. Cultural Beliefs
 - b. Knowledge
 - c. Skills
- 3. Cultural Competency
 - A. The Politics of Counseling
 - a. Social Justice in Counseling
 - B. Systemic Oppression: Trust, Mistrust, Credibility, and Worldviews
 - C. Counseling Ethics
 - a. Exploring ethics in relation to cultural values, norms, and practices
 - b. How does culture inform us in the ways we address contemporary moral and political issues ersonal is Political
 - D. Personal is Political
 - a. Multicultural practice: Individual vs Micro/Meso/Exo/Macrosystems
 - E. Counseling and Poverty
- 4. Radical (Non-traditional) approaches to advocacy and human relations
 - A. Advocacy Competency Domains model
 - a. Client
 - b. Student
 - c. Community
 - B. Non-Western and Indigenous Methods of Healing
 - a. Strategies and Interventions
 - b. Implications for Counseling
- 5. Counseling Across Cultures
 - A. African Americans
 - B. American Indians and Alaskan Natives
 - C. Asian Americans, Filipinos, and Pacific Islanders
 - D. Latinos
 - E. Individuals of Multiracial Descent
 - F. Arabs and Muslim Americans
 - G. Immigrants and Refugees
 - H. LGBTQ Community
 - I. Older Adult Clients
 - J. Women
 - K. Persons with Disabilities
- 6. Culturally Appropriate Intervention Strategies
 - A. Communication
 - B. Conflict Resolution
 - C. Cultural Contexts
 - D. Effective Working Relationships
 - E. Empathy versus Compassion
 - a. Differentiating empathy from compassion
 - b. Comparing the different modes of communication and understanding of others
- 7. Immersion versus Engagement
 - A. Approaches and Activities for Active Participation
 - B. Stages of engagement into a community
 - C. Community Demographics and Needs

7. REPRESENTATIVE METHODS OF INSTRUCTION:

- Typical methods of instruction may include:
 - A. Lecture
 - B. Activity
 - C. Discussion

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following:

Writing Assignments:

1. (One required) Narrative Identity Presentations (Cultural Sharing addressing Intersectionalities)(4-6 pages)

2. (One required) Research Paper (8-10 pages)

3. Discussions (6-8 required)

Reading Assignments:

Students will be reading from required texts, recommended texts, and selected articles. Students are expected to read between 30-50 pages per week.

Other Outside Assignments:

Actively engage in cultural events:

Examples include but not limited to: informational interviews, volunteerism, poster presentations, video documentary, summarization through artistic mediums of expression

Group Final Project:

Students will apply what they learn from the course lecture content in identifying a particular system of oppression utilizing Freire's Cycle of Critical Praxis.

- 1. Identify a problem/issue.
- 2. Research the problem.
- 3. Develop a collective plan of action to address the problem.
- 4. Implement the collective plan of action.
- 5. Evaluate the action.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Class Performance
- C. Class Work
- D. Final Class Performance
- E. Homework
- F. Oral Presentation
- G. Papers
- H. Projects
- I. Research Projects

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

A. Lee, Courtland. Multicultural Issues in Counseling, 5th ed. American Counseling Association, 2018

B. Sue, D.W. & Sue, D. *Counseling the Culturally Diverse: Theory and Practice*, 8th ed. Hoboken, NJ: John Wiley & Sons, Inc, 2019

Other:

A. Recommended Texts:

1. Emdin, Christopher (2016). For White Folks Who Teach in the Hood...And the Rest of Y'all Too – Reality Pedagogy and Urban Education: Beacon Press

2. Friere, P. (1970). Pedagogy of the Oppressed: Penguin Group

3. Hays, P. (2013). Connecting Across Cultures: The Helper's Toolkit. Los Angeles: Sage Publications

4. hooks, bell (2003). Teaching Community: A Pedagogy of Hope: Routledge

5. Martin & Nakayama (2022). Experiencing Intercultural Communication: An Introduction, 7th ed. New York, NY: McGraw Hill

Origination Date: October 2022 Curriculum Committee Approval Date: November 2022 Effective Term: Fall 2023 Course Originator: Lorraine DeMello

1. COURSE ID: SOCI B10 TITLE: Intersectionality and Citizenship

Units: 3.0 units Hours/Semester: 48.0-54.0 Lecture hours; 96.0-108.0 Homework hours; 144.0-162.0 Total Student Learning hours

Method of Grading: Grade Option (Letter Grade or Pass/No Pass)

Prerequisite: Admission to the Bachelor of Science in Respiratory Care program; and ENGL 100, or ENGL 105 or equivalent; and SOCI 100, or PSYC 100 or equivalent.

2. COURSE DESIGNATION:

Degree Credit Transfer credit: none

3. COURSE DESCRIPTIONS:

Catalog Description:

Exploration of the intersection of identities: race, ethnicity, socioeconomic class, gender, and citizenship status. Students will explore and analyze how race and ethnicity are socially constructed and intersect with identities such as class and gender. Provides students theoretical frameworks for assessing these constructs and their consequences.

4. STUDENT LEARNING OUTCOME(S) (SLO'S):

- Upon successful completion of this course, a student will meet the following outcomes:
 - 1. Recognize and demonstrate a knowledge of sociological perspectives and theories relating to the social constructs of race and ethnicity in the United States.
 - 2. Assess and articulate theories, concepts and the constructs of race and ethnicity in the context of intersectionality (the intersection of identities, including but not limited to that of race, ethnicity, socioeconomic class, gender, citizenship status).

5. SPECIFIC INSTRUCTIONAL OBJECTIVES:

Upon successful completion of this course, a student will be able to:

- 1. Increase understanding on the complexities of social construction and intersectionality as applied to race, ethnicity, class and gender.
- 2. Provide analysis of systemic inequalities.
- 3. Evaluate policies, laws and practices as they apply to race, ethnicity, gender, class and citizenship status in current and historical context.
- 4. Recognize the connections between individual behaviors and the structure of social relationships and opportunity structures.
- 5. Increase tolerance and cultural understanding of social classes, gender issues, diversity and race and ethnic issues.
- 6. Analyze current social issues concerning race, ethnicity and citizenship using sociological concepts and theories.
- 7. Provide skillful, critical explanations of current social issues and policy regarding race, ethnicity, gender as they related and intersect with citizenship.
- 8. Critically analyze and understand complex social dynamics including but not limited to, economic, locational, historical policies and practices, access or lack of to adequate and vital resources (health, educational, housing) in the the society.

6. COURSE CONTENT:

- 1. Theory
- 1. Critical Race Theory
- 2. Conflict Theory
 - a. Dialectical Materialism
- 3. Structural Functionalism
 - a. Davis and Moore Model
- 4. Symbolic Interactionism
 - a. Sapir-Whorf Hypothesis (linguistic relativity)
- 5. Gender

- a. Gender Schema Theory
- b. Queer Theory
- 2. Citizenship and Race
- 1. (Marshall) Citizenship and class
- 2. Multi-tiered citizenship
- 3. Legality/ Policy re: citizenship access and rights
- 3. Social Construction
- 1. Social construction theories (applied to race, gender, class)
- 2.White Privilege
- 3. Male Privilege
- 4. Symbolic (optional) ethnicity
- 4. Intersectionality (Intersection of Identities)
- 1. Complexity of identity and identity formation
- 2. Intersecting oppressions
- 3. Internalized psychology of racism
- 4. Intersectionality as applied to social movements and collective action

5. Assimilation and Pluralism

- 1. Immigration Trends (current and historical)
- 2. Diasporas
- 3. Anti-Immigration/Nativist Narratives (current and historical)
- 4. Assimilation and acculturation
- 5. Immigration, documentation and multi-tiered rights

6. Race and Residence

- 1. Perpetuating Residential racial segregation
- 2. Concentration of Poverty
- 3. Environmental Racism
- 4. Crime and sentencing
- 7. Activism and Collective Action

7. REPRESENTATIVE METHODS OF INSTRUCTION:

Typical methods of instruction may include:

- A. Lecture
- B. Critique
- C. Directed Study
- D. Activity
- E. Discussion
- F. Field Experience
- G. Guest Speakers
- H. Service Learning
- I. Other (Specify): Discussions: potential weekly or bi-weekly basis Short papers: twice per late start semester, potentially quarterly per regular semester Short papers may be 4-6 pages in length Concept Application 1-2 times per semester, potentially as a final paper. Final Concept/Term paper will be 8-16 pages in length depending upon topic and if it is a group paper or individual paper

8. REPRESENTATIVE ASSIGNMENTS

Representative assignments in this course may include, but are not limited to the following: Writing Assignments:

* Reflection papers: Students may be expected to write short reflection papers on their reading assignments (3-6 pages/twice a semester)

* Concept Application: Students may be expected to write a short application paper linking course concepts and theory to current social issues and affairs in the immediate and/or larger community (3-5 pages/twice a semester)

* Research Paper: Students may be expected to conduct field or library research on a topic of their choice related to course content. Papers will be approx. (8-15 pages/once a semester).

Reading Assignments:

Students will be expected to read textbooks and/or journal articles on a weekly basis, 30-75 pages each week.

Other Outside Assignments:

Students may be assigned a field project once during the semester with a service learning component engaging with the course concepts in the community of their choice. Papers may be approximately 6-12 pages in length.

9. REPRESENTATIVE METHODS OF EVALUATION

Representative methods of evaluation may include:

- A. Class Participation
- B. Class Performance
- C. Class Work
- D. Exams/Tests
- E. Group Projects
- F. Homework
- G. Oral Presentation
- H. Papers
- I. Portfolios
- J. Projects
- K. Quizzes
- L. Research Projects
- M. Written examination

10. REPRESENTATIVE TEXT(S):

Possible textbooks include:

- A. Ford, Chandra L.; Griffith, Derek M.. *Racism: Science & Tools for the Public Health Professional*, 1st ed. American Public Health Association, 2019
- B. Ore, T. *The Social Construction of Difference and Inequality: Race, Class, Gender and Sexuality*, ed. McGraw-Hill Education, 2013
- C. Rothenberg, P. *White Privilege: Essential Readings on the other Side of Racism*, ed. Worth Publishers, 2011
- D. Hill Collins, Patricia; Bilge, Sirma. Intersectionality (Key Concepts), 2nd ed. New York: Polity, 2020
- E. Patrick Grzanka. Intersectionality: Foundations and Frontiers, 2nd ed. Routledge, 2019

Origination Date: March 2023 Curriculum Committee Approval Date: April 2023 Effective Term: Fall 2023 Course Originator: Tricia Murajda



Three Year Assessment Cycle for Fall 2025- Spring 2028

Program Name: <u>Respiratory Care (RPTH)</u>

Assessment Coordinator: Anrey Bartoszynski

	2025-2026	2026-2027	2027-2028
	RPTH 460	RPTH 410	RPTH 445
Fall	RPTH 490	RPTH 415	RPTH B40
	RPTHB60	RPTH 420	СОММ В10
	COUN B10	RPTH B10	SOSC B10
	SOCI B10	RPTH B30	
	RPTH 480	RPTH 430	RPTH 495
Spring	RPTH 485	RPTH 450	RPTH B90
	RPTH B20	RPTH B15	
	RPTH B52	RPTH B50	
Featured <u>ISLO</u>	Critical and Creative Thinking	Lifelong Wellness	Effective Communication
Which of that year's	RPTH 460	COUN B10	COMM B10
course(s) will be used	RPTH 490	SOCI B10	SOSC B10
to assess the	RPTH B60		RPTH B90
featured ISLO?	RPTH B20		
	RPTH B52		

* Information Literacy and Community Engagement will be assessed in 2028-2029 and 2029-2030 respectively