Respiratory Therapy Faculty Involvement with Student Health Clinics on College Campuses

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Abstract

Background: Student health centers (SHC) on college campuses in the U.S. represent one resource for providing medical services and wellness education to the student body. Respiratory Therapy (RT) faculty of educational programs on college campuses represent a potential resource to provide pulmonary health services (PHS), (e.g., asthma education, lung function testing), for the SHC. This led to the following research questions; are RT faculty involved in providing PHS for the SHCs on their college campus? And, what are the perceived barriers to RT faculty providing PHS for the SHC? Method: This descriptive study selected 50 RT educational programs in the U.S. from the institutional members of the Coalition for Baccalaureate and Graduate Respiratory Therapy Education (CoBGRTE). The inclusion criteria consisted of colleges that offer a baccalaureate degree in respiratory therapy. The principal instrument used in the study was the Respiratory Therapy Faculty (RTF) questionnaire. The RT Chair/Directors of each institution were contacted via email and invited to complete the online RTF instrument via Survey Monkey. Descriptive statistics were used to analyze quantitative data and common themes were noted for the qualitative data. Results: There was a 66% (33/50) response rate of the RT chair/directors. An SHC is available at 76% (25/33) of the institutions participating in the survey. RT provide PHS for 16% (4/25) of the survey institutions. Asthma education, lung function testing, and smoking cessation are the only services provided. Some of the common barriers to providing PHS include the need for services not assessed (14/25), faculty availability (12/25), funding (9/25), and SHC staff not open to the idea (5/25). Conclusions: RT faculty are not utilized in most SHCs across the survey population. The primary barrier reported is a needs assessment for PHS services. Provision of these services for SHCs could offer additional clinical involvement for RT faculty.
Figure 1: Respiratory Therapy Faculty Questionnaire

1. **RT Chair/Director Information**: Title, highest degree earned and credentials, gender, years as Chair/Director, years teaching in a BSRT program

2. **College/University Information**: City/State/Zip Code

3. **Please provide the following information about the respiratory therapy faculty that teach on campus**:
   - Number of full-time, tenured faculty
   - Number of full-time, tenure-track faculty
   - Number of full-time, non-tenure-track faculty
   - Number of adjunct faculty
   - Number of clinical instructors

   *Of the entire faculty on staff...*

   How many hold the RRT credential?
   How many hold the certified asthma educator (AE-C) credential?
   How many have a Doctorate degree as their highest level of education?
   How many have a Master's degree as their highest level of education?
   How many have a Bachelor’s degree as their highest level of education?
   Years of teaching experience in a BSRT program?

4. **Does the college/university have a Student Health Center (SHC) on campus? If the answer is NO, please proceed to question 9.**

5. If YES to question 4, has the RC faculty ever been involved with providing asthma education, spirometry, or smoking cessation education services to the SHC?

6. **If YES, to question 5 at which frequency does the RT faculty provide respiratory related health services to the SHC?**

7. What are your perceived barriers for the RT faculty providing respiratory therapy related health services to the SHC?

8. **As RT chair/director, what is your perception of having RT faculty involved with providing respiratory therapy related health services at the SHC on campus?**

9. Is there anything else related to this survey you would like to add?
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Submission Deadline: March 15, 2016
Please submit the following information with abstract. Use one sheet per abstract.

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Abstract Major Area (check one)

- Asthma Diagnosis and/or Care
- **Asthma Education Program or Program Evaluation**
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Data (check one)  X Abstract with data  __Abstract without data

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