

Bachelor of Science in Recreational Therapy

School of Health Sciences
College of Health and Human Sciences
Western Carolina University

Self-study Report for the 2009 Program Review

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Executive Summary

There has been recreational therapy education program at WCU for over three decades. Originally an emphasis within parks and recreation, it became an independent program leading to a B.S. degree in 1996. Since 1996, a total of 215 graduates have been awarded the B.S. degree in recreational therapy. During the past five years, the program has undergone tremendous changes in growth and refinement of the curriculum. Between 2005 and 2008, there was one tenure track faculty member and one fixed term position. In those three years, three different fixed term faculty were employed resulting in a lack of consistency in curriculum instruction. Since fall 2008, there have been three faculty positions (two tenure track and one fixed term) leading to significant stability and improvements to the Program. Currently, there are over 90 majors.

The Program is aligned with the School of Health Sciences (SHS), the College of Health and Human Sciences (CHHS), and the University. In 2007, the Program became one of four pilot degree programs to participate in the WCU Quality Enhancement Plan (QEP). The Recreational Therapy B.S. Degree Program prides itself as being engaged with the vision, mission, and strategic direction of the School, College, and University.

While the Program is experiencing growth and stability, there are opportunities for continued expansion in developing a hybrid distance undergraduate program and a graduate program of studies. Future growth will be dependent on additional resources in personnel, equipment, and supplies to meet the needs of additional educational offerings. The following self-study report provides a brief overview of the Program according to the seven standards for Program Review as directed by the Provost of Western Carolina University. Supportive documentation is provided in a separate set of appendices which includes significant data and background for the conclusions that follow.

Background and Program History

In 1996, the Recreational Therapy B.S. Degree Program at WCU was the first academic program in the U.S. to offer a separate program of studies and a degree specifically in recreational therapy (RT). Since the institution of the B.S. in RT, 215 alumni have been awarded undergraduate degrees. Prior to 1996, study in “therapeutic recreation” was an emphasis or option area within Parks and Recreation at WCU. Prior to 2007, the RT program was housed in the Department of Health, Physical Education and Recreation (previously titled Health and Human Performance) within the College of Education and Allied Professions (CEAP). In 2007, WCU completed a comprehensive re-structuring and added new colleges. One of these new colleges was the College of Health and Human Sciences. RT was re-located from the CEAP to the new College of Health and Human Sciences and housed within a new School of Health Sciences. This re-location of the program has been very beneficial as it has allowed for greater disciplinary affinity of the RT Program to other educational programs in the health sciences.

There have been many changes incorporated into the RT Program over the past five years and this report will highlight the current Program as well as many of these changes. The RT Program is recognized for quality education in RT by professionals and educators throughout the state and the country. The Program continues to distinguish itself and to offer excellent learning opportunities to students, alumni and professionals. This program review represents the first comprehensive evaluation of the RT Program.

Program Purpose and Mission

Standard 1. *The purpose of the program reflects and supports the mission and strategic vision of Western Carolina University and the mission of its School and/or College.*

Purpose and Mission: RT is defined by the American Therapeutic Recreation Association (ATRA) as “a treatment service designed to restore, remediate and rehabilitate a person’s level of functioning and independence in life activities, to promote health and wellness as well as reduce or eliminate the activity limitations and restrictions to participation in life situations caused by an illness or disabling condition” (ATRA, July 2009). The purpose of the RT Program is to educate students as the future professionals of the field, to advance the profession of recreational therapy, and to provide service in the region, state and nation. The mission of the RT Program is to provide students preparing for health care careers to become recreational therapists with a sound conceptual foundation and entry-level professional preparation in the knowledge and skills necessary for competent practice in recreational therapy. This mission is in harmony with the missions of WCU, the College of Health and Human Sciences (CHHS), and the School of Health Sciences (SHS).

The mission of Western Carolina University indicates that WCU creates engaged learning opportunities that incorporate teaching, research and service through residential, distance education and international experiences. The University focuses its academic programs, educational outreach, research and creative activities, and cultural activities to improve individual lives and enhance economic and community development in the region, state and nation.

The mission of the College of Health and Human Sciences is to provide a dynamic learning community that prepares individual for professional life by providing quality educational experiences that promote scholarship, engagement and lifelong learning in a global environment. This goal will be met with active, scholarly, collaborative faculty. The College will be recognized for graduates who are ethical, adaptive, technically capable and innovative professionals.

The mission and role of the School of Health Sciences is to prepare successful health professionals and informed consumers. The faculty is committed to high quality undergraduate and graduate teaching which encourages the development of critical thinking and an appreciation of the concept of life-long learning while fostering leadership, scholarship and integrity.

Alignment of the Program with the University and College: The mission of the RT Program is in concert with the missions of the SHC, the CHHS, and WCU. The mission of the RT Program is linked to and is a reflection of the teaching and learning goals that constitute the central mission of Western Carolina University, to create a community of scholarship in which the activities of its members are consistent with the highest standards of knowledge and practice in their disciplines. The RT Program is one of eight degree programs of the SHS.

The RT Program was selected as one of four pilot programs to implement the new WCU Quality Enhancement Plan (QEP). The QEP was developed in concert with the extensive preparation for Western Carolina University's review by the Southern Association of Colleges and Schools (SACS) in April, 2007. The overarching goal of the QEP is "students will synthesize knowledge and skills from their academic and co-curricular experiences to become intentional participants in their own learning". Identifying and diminishing barriers to learning, and facilitating student benefit from the interrelationships and connections of both their academic and co-curricular experiences is a core activity of the members of the academy. Several enhancements have been made to the Curriculum as a consequence of implementing the QEP and based on Annual Assessments of the Program, as well as other sources of data used in ongoing planning.

Distinctive aspects of the Recreational Therapy Program at WCU

- Curriculum alignment with Quality Enhancement Plan (QEP).
- An adventure based course which uses Success Oriented Achievement Realized (SOAR) staff and clients in learning environment.
- An older adults course which has a 15 hour service learning practicum serving residents with dementia in a local nursing facility, Mountain Trace. (Supervision by Peg Connolly, Ph.D., LRT/CTRS).
- The beauty and outdoor opportunities of Western North Carolina.
- The first program in RT to develop and use Technical Standards in undergraduate education.
- A curriculum with strong RT coursework and supportive coursework from psychology, counseling, health sciences, kinesiology and anatomy/physiology.
- A growing presence in the health community.
- An active recreational therapy student organization (Recreational Therapy Association).

Strengths and Weaknesses of the Program: The **strengths** relate primarily to the quality and commitment of the faculty. The Program was one of the first to volunteer to pilot the WCU QEP. Other strengths include a growing service learning component, favorable clinical supervisor reviews of interns, alignment with the health professions, the growing number of RT majors, and plans for moving the Program to the new CHHS building with state of the art technology and facilities for RT. **Weaknesses** of the program relate to the rural area of WCU which creates challenges for securing appropriate clinical experiences required for student learning, few licensed recreational therapists in the area, larger class size (increased from 24:1 to 35:1 in the last two years) and student to faculty ratio (30:1), shortage of adaptive

equipment and other equipment and supplies, lack of adequate facilities, and the need for more service learning opportunities for student engagement.

Program Planning Ongoing and Strategic Planning

Standard 2. The program engages in ongoing, systematic planning that is reflective of the University's strategic priorities.

Continuous quality improvement is a common term in the health professions that indicates the need to regularly review, evaluate and revise processes to improve the quality of health care. Similarly, strategic planning allows an organization to be proactive in planning for its future. WCU has revised its strategic plan recently to cover the period of 2008 to 2013. Eight strategic directions are included in the revised plan including: preparing students for the 21st century, serving the educational needs of North Carolina, improving public education, promoting economic and community advancement in the region, improving health and wellness in western North Carolina, modeling environmental sustainability, promoting outreach and engagement in the region, and demonstrating institutional integrity, responsibility and effectiveness. Likewise, the CHHS recently revised its strategic plan for the period 2009 to 2012 and the College incorporates five strategic directions, including: enhancing the learning environment to support discovery, increasing interdisciplinary collaboration, promoting outreach and engagement in the region, improving College visibility regionally and state-wide, and encouraging diverse experiences for faculty, staff, and students (see Appendix 2).

Program Strategic Goals and Objectives and the Process for Developing/Modifying goals/objectives: While the RT Program has not engaged in a formal strategic planning process, it has been applying principles of continuous quality improvement to strategically improve the program. During the past year, the faculty has met weekly and agreed to a set of strategic goals that align with the University and the College strategic directions. The six strategic goals of the RT Program include: preparation for transition to the new health sciences building, development of a hybrid distance undergraduate degree for students completing the AAS degree in RT, exploration of international study opportunities, exploration of the development of a graduate program in RT, expansion of service learning and engagement opportunities for RT students, and increased interdisciplinary collaboration. The Program anticipates more refined strategic planning efforts in the coming years as the Program continues to stabilize and grow (see Appendix 2).

Relation of Program Goals/Objectives to Curricular and Programmatic Activities and Process for Implementation: Our strategic goals and activities represent a logical extension of our existing curriculum and individual faculty scholarship. As our curriculum evolves, we are able to consider additional application of new techniques and pedagogy to needs identified by the profession and the state. An example of this was the development of Technical Standards for our undergraduate program. The first

step was development and implementation in the Program followed by publication of a scholarly application article for the profession which suggested use of the Technical Standards by other universities across the country. We plan to continue the process of strategic planning in a way that fosters improvement of the Program and extension of our expertise to further educational development and service to the profession and state.

Program Curriculum and Instruction

Standard 3. The program provides and evaluates a high quality curriculum that emphasizes student learning as its primary purpose.

Alignment of Curriculum with Disciplinary Standards: The knowledge and skills for RT practice are defined in the National Job Analysis of the National Council for Therapeutic Recreation Certification (NCTRC) and form the basis for evaluation for eligibility and the content outline of the national certification exam. The American Therapeutic Recreation Association (ATRA) *Guidelines for Curriculum and Self-Competency Assessment* provides guidance for curriculum structure and content. Both the NCTRC and ATRA standards and guidelines are the basis for the WCU RT Degree Program. Since fall 2008, significant improvements have been made to the Program based on involvement with the WCU QEP, annual assessments of curriculum and student learning outcomes, and the fundamental need for greater adherence to the national standards of NCTRC and the ATRA Curriculum Guidelines. While the Program has a rich history of extensive educational offerings in RT, it was necessary to refine and transparently display the relationship to these national standards.

Amount of Time Needed to Complete the Curriculum: The Degree includes a total of 120 credits with 70 credits in RT curriculum requirements, 42 credits in the WCU Liberal Studies Program and 8 elective hours. After comprehensive study of the program, the development of a curriculum map of learning standards, activities and student outcomes, and applying results for recommended changes from annual QEP and assessment reports, the University approved an extensive revision to the curriculum in fall 2009. The new curriculum requirements will be effective in the WCU Catalog 2010-2011. Within the 70 credits required for RT, students currently complete 9 courses specifically in RT and 2 internship courses for the senior, clinical internship. Students entering the Program as a freshman may complete their requirements within eight semesters. It is important to note that a large percentage of our students transfer in at sophomore or junior year, typically. These transfer students are usually able to complete the requirements within four to five semesters.

Multi or Interdisciplinary Strengths of the Program: By its very nature the Program is interdisciplinary. Required courses are completed in biology, psychology, counseling, health sciences, health, physical education, and parks and recreation. In addition, several interdisciplinary and divisions of

student affairs on campus are used to enhance the educational opportunities of our students, including Base Camp Cullowhee, the Office of Student Disability Services, and we have recently engaged with Engineering Technology on campus. Since 2008, graduate students from physical therapy have provided transfer training workshops to recreational students. In spring 2009, the Program sponsored an interdisciplinary educational workshop on adapted sports and engaged students from recreational therapy, physical therapy, athletic training, and engineering technology. As a result of this QEP sponsored interdisciplinary workshop, engineering students have completed a project with the recreational therapy adapted sports program at Carolinas Rehabilitation Institute in Charlotte. Providing opportunities for interdisciplinary studies as well as interdisciplinary interaction is fostered by the College and a priority of the Program.

Alignment of Curriculum to Meet University Needs: The Program offers three service courses on campus: RTH 101 Tai Chi (an intervention course for both majors and non-majors), RTH 250 Inclusion and Recreation for People with Disabilities (required for Parks and Recreation Majors), and RTH 300 Health and Healing: The Spirit-Mind-Body Connection (an upper level Liberal Studies perspective course).

Advising. One of the hallmarks of the WCU QEP is a significant emphasis on student advising to guide the student to the synthesis of knowledge and skills from their academic and co-curricular experiences to become intentional participants in their own learning. Because of this emphasis and the faculty's overall commitment to student growth, the faculty has invested significant time to operationalize and improve the advisement process. During the past year a Student Handbook was developed which covers all aspects of the student's undergraduate studies, curricular and co-curricular, and which delineates the advising process with both student and faculty responsibilities. Additionally, the first set of Technical Standards for RT undergraduate studies were instituted at WCU and at each pre-registration meeting for student advising, students re-affirm their commitment to adhere to these Technical Standards. Students also have access to a WCU Degree Evaluation which is the primary means of up-to-date information on student progress toward their degree. The faculty has developed course requirement checklists for students, and they document student meetings via the advising form in each student's file.

In an effort to gauge the quality of advising for RT majors, the faculty has conducted two surveys to evaluate student perceptions of the advising process. Results from these surveys have illuminated, that, overall, RT students meet with their academic advisors at least once or twice per semester, find their advisors to be easy to access and that advisors have knowledge of requirements for graduation. Each faculty member has over 30 students to advise and this is a significant responsibility.

Course Syllabi: Appendix 3.3 included with this report includes course syllabi. During the past year, based on the development of a curriculum map, faculty has revised all course syllabi to include

general course objectives, relevant NCTRC knowledge areas, and applicable ATRA curriculum standards for each course. In addition, course learning activities have been selected for each course that meet the goals and suggested learning activities and student outcomes from the WCU QEP. This has been a monumental project, but it is one that has aided the faculty in understanding individual elements of the curriculum while assuring that the overall learning objectives are accomplished. The faculty will continue to monitor course offerings and syllabi on a semester-basis.

The benefits of conducting annual assessments of the Program along with involvement in the QEP cannot be over-stated in the value added to the curriculum by incorporating identified areas for improvement from these activities. Each annual assessment report (see Appendix 3.8) depicts a progression of evaluation and improvement in curriculum offerings.

Student Learning Outcomes. One of the most significant improvements to the Program has been in documentation and evaluation of student learning outcomes. The introduction of the comprehensive RT Curriculum Map has provided guidance and structure to the focal point of learning outcomes as a measure of the success of the Program. In conjunction with this focus, the faculty developed an instrument measuring student perception of learning outcomes entitled the RT Competency Assessment. The Assessment includes the measurement of perceived abilities according to the ATRA Curriculum Guidelines in foundations, client assessment, planning and implementing interventions, evaluation and management of RT services, as well as anticipated competency for NCTRC certification, and progress on the five WCU learning outcomes delineated within the QEP. This instrument is now administered upon admission to the Program (in RTH 200 Foundations of RT), prior to the senior clinical internship (in RTH 395 Pre-Intern Seminar), and, finally, during the last week of the senior clinical internship (in RTH 484 and 485 Clinical Internship in RT). The instrument was first implemented in spring 2009 in RTH 395 and RTH 484/485 and in fall 2009 in RTH 200. Over time, it will be possible to track perceived student learning outcomes from entry through completion of the program for individual students as well as cohort groups of students. The table below shows the results from implementation between spring and fall 2009. Positive trends are apparent in perceived learning outcomes from entry to exit from the Program.

RT Competency Assessment Results Spring 2009 to Fall 2009

RT Competency Assessment Areas	RTH 200		Pre-Interns		Post-Interns	
	N	Mean	N	Mean	N	Mean
<i>Measured on a 5 point perceived competency scale with 1= no perceived competence and 5= very high perceived competence</i>						
Average Foundation Knowledge Score	35	2.68	9	3.51	19	4.44
Average Client Assessment Knowledge Score	35	2.48	9	3.06	19	4.28
Average Planning Treatment Knowledge Score	35	2.19	9	3.13	19	4.16

Average Implementing Treatment Knowledge Score	35	2.21	9	3.31	19	4.08
Average Evaluation Knowledge Score	35	2.0	9	3.09	19	4.01
Average Management Knowledge Score	35	2.27	9	3.27	19	4.00
<i>Measured on a 4 point scale: 1= emerging, 2= developing, 3 = achieving, 4= exemplary (adapted from the Assessment Office for QEP Outcomes and Meta-Rubrics)</i>						
Perceived competency to NCTRC Certification Standards	35	1.60	9	2.44	19	2.84
Integrates information from a variety of contexts	35	1.91	9	2.78	19	2.67
Solves complex problems	35	2.03	9	2.56	19	2.68
Communicates effectively and responsibly	35	2.31	9	3.22	19	2.89
Practice civic engagement	35	2.20	9	3.11	19	2.89
Clarify and act on purpose and values	35	2.37	9	2.78	19	2.79

Faculty Resources

Standard 4. *The program has sufficient faculty resources to meet its mission and goals.*

Information on faculty credentials, backgrounds, demographics, faculty contributions, development, work environment and instructional loads, as well as the SHS TPR standards are well-documented in Appendix 4. The RT Program has experienced significant changes and constraints related to faculty resources over the past five years. In 2005, there was a 100% turn over in Program faculty. The program had two tenure-track positions prior to fall 2005 and a Program Director who had been in place for almost three decades. In fall, 2005, the current Program Director was employed and the other tenure-track position was changed to a fixed-term, visiting instructor position. From fall 2005 through spring 2008, three different individuals held the fixed-term, visiting instructor position resulting in inconsistency in the delivery of several required courses. At this same time, the number of graduations from the Program was low, but the number of majors began to increase steadily. In fall 2008, the number of positions for the program was increased to three with two tenure-track positions and one fixed-term, assistant professor position. This has led to greater consistency in quality and productivity since fall 2008. At the same time, the numbers of student majors have continued to increase, representing almost a doubling of RT majors since 2005.

Currently there is a qualified and dedicated faculty in the Program who meet weekly on student and curricular issues as well as strategic planning and development. The student to faculty ratio for the Program is high, placing high demands on faculty not only in teaching but also in advising. At this time the RT Program student ratio is over 30 to 1. This is above the recommended ratio of 24 to 1 from the accreditation standards under development by the Commission for the Accreditation of Recreational Therapy Education (CARTE). In comparison, three sister institutions in the state were polled to determine comparable ratios in recreational therapy degree programs.

<i>UNC Institution</i>	<i>RT FTE</i>	<i>RT Majors as of 1/2010</i>	<i>Student to Faculty Ratio</i>
East Carolina University	8	120*	15 to 1
UNC-Greensboro	3	80*	20 to 1
UNC-Wilmington	4.25	60	14 to 1
Western Carolina University	3	90	30 to 1

**Includes Bachelor's and Master's Degree Programs in RT*

Class enrollments have also increased as have class sizes and, thus, teaching responsibilities. Also, during this same period an additional course is under consideration by the University Curriculum Committee for the program (i.e., RTH 405 Behavioral Health in RT).

The Program Director currently has her application for tenure in process and the other tenure-track faculty member is making progress for tenure and will submit application in another year. While sponsored research has not been initiated by the faculty, the tenure-track faculty members have strong records of scholarly activities. It is clear that further faculty resources will be required in the future to accomplish its strategic goals.

Student Quality

Standard 5. The program attracts, retains, and graduates high quality students.

Specific and detailed information on the size and demography of students in the Program, diversity, enrollment patterns, academic qualifications of students, consistency of advising, student engagement opportunities, and student exam results are documented in Appendix 5. The quality of RT student majors continues to improve and numbers continue to grow. First, applications and admissions to the Program have almost doubled since fall 2005 when RT majors numbered 50. In fall 2009, there were 90 majors and a pre-major has been added currently with an additional 10 students. The Program has also increased graduations from 7 in 2005 to 21 graduates in 2009. Second, in fall 2008, a new admission process and retention GPA were approved for the Program, raising the previous standard from a 2.0 GPA for graduation to the requirement of a GPA of 2.5 for admission, retention and graduation from the Program.

The table below depicts a comparison of the RT student profile to that of the WCU Campus for 2009. It is clear from the data that RT students are very near the University quality indicators from 2009. In terms of diversity, across the nation, recreational therapists are dominated by females typically at 85 females to every 15 men in the profession. At WCU, we have made a concerted effort to attract more men to the Program and now have 22.5% males. Additionally, the Program has show increased diversity in race/ethnicity, especially for students from black and African American backgrounds.

Our student performance on the national certification exam is an area of concern. RT alumni passage rate on the exam has been in the low 70's for the past four years. We continue to look at ways to improve these scores by improving our curriculum and believe that the lack of faculty consistency for

three years greatly harmed our progress here. We will continue to work on improving our overall performance in this area.

Undergraduate Quality Indicators and other Comparisons: WCU Student Body Profile and RT

Indicators - 2009	WCU	RT
<i>Average SAT Verbal</i>	506	511
<i>Average SAT Math</i>	519	517
<i>Average SAT Combined</i>	1025	1028
<i>Average High School GPA</i>	3.43	3.25
<i>Gender</i>		
<i>Male</i>	46%	22.5%
<i>Female</i>	54%	77.5%
<i>Race/Ethnicity</i>		
<i>Hispanic Latino</i>	1.5%	0.0%
<i>American Indian/Alaskan</i>	1.2%	1.1%
<i>Asian</i>	0.8%	0.0%
<i>Black/African American</i>	5.9%	12.2%
<i>Islander</i>	0.0%	0.0%
<i>White</i>	82.8%	84.4%
<i>Multiple Race/Ethnicity</i>	0.6%	0.0%
<i>Unknown/International</i>	7.2%	1.1%

Finally, we believe our number of majors shows our ability to recruit and retain students. Often times, students do not become aware of the major until their sophomore year or later. However, once they are admitted to the program, the retention rate to graduation remains high.

Administrative Resources

Standard 6. The program has an administrative structure that facilitates achievement of program goals and objectives.

Decision-making: The RT program practices a collaborative and consensus-based model of decision-making and is supported in the current administrative structure of the SHS, CHHS, and the University. It is one of eight programs within the SHS. The three full-time faculty members meet weekly on curricular matters and make most decisions jointly. The program director regularly updates the Director of SHS on key decisions and potential future issues.

Support and Training Opportunities for the Program Director: It has been a challenge to maintain and improve the quality of this program over time, but the outcome has been increased student majors, increased faculty, and increased recognition on campus. The Program Director has received significant support from the Director of SHS and the Dean of CHHS has been exceptional in providing support to the Program. Additionally, the Dean regularly convenes advisory committee meetings on such issues as program concerns and clinical experiences. The University provides many opportunities and mechanisms for training and professional development for faculty functioning in leadership positions. These opportunities are facilitated primarily by the Provost’s Office, the QEP Program and the Coulter

Faculty Center. The CHHS and the SHS support training and professional development opportunities by appropriation of budget dollars on an annual basis. While the Program may have been short-staffed for a period of time, faculty support and training opportunities were usually available in the School, College, and the University at large.

Faculty Involvement in Ongoing Program Activities: The faculty participates in the assessment of program structure and activities, curriculum development and review, and all have contributed to this Program Review. Faculty has also been active in committee work at all levels of the University. This faculty engagement has been helpful to incorporate knowledge of university-wide initiatives and feedback into the development and evaluation of the curriculum.

Involvement of Students, Alumni and Other Program Constituents in Program Decision-making: We try to operate based on data and knowledge of the wishes of program constituents. The surveys completed in advising, student evaluation, clinical supervisor input, and alumni evaluation of the Program provide invaluable sources of data essential to sound planning. The faculty is aware that one weakness is a lack of a structured advisory committee for the Program. This is an area that will be developed in the near future. Until then, we seek input electronically from our constituents.

Evaluation of Administrators: Faculty members provide confidential evaluation input for both the Director of the SHS and the Dean of the College each year.

Program Resources

Standard 7. The program has adequate resources to meet its goals and objectives.

Adequacy of Budget: Prior to 2008, Program funding was very low (\$250 to \$500 per year) and came directly from funds for the entire Department of HPER (2005-2007) and the SHS (fall 2007-spring 2008). The RT budgeting process for SHS was revised in 2008 and the budget amounts have also increased (\$1,300 in 2008-09 and \$2,600 for 2009-10). Funds have been used to support the addition of needed equipment and supplies. The Program budget covers the cost of copying within its 2009-10 budget for the first time. Previous to this year, copy and printing costs were assumed within overall department and school budgets.

Adequacy of Facilities and Instructional Technology: Like many departments on campus, available space is restricted for classrooms. The faculty has adequate offices in Belk, but storage space is extremely limited and unsecure. RT faculty offices have been housed in three different buildings over the past five years: Reid Gym, Breese Gym, and the Belk Building. As of January 2009 and the move of faculty to the Belk Building, the RT Program faculty has adequate office space. There are two network printers in the RT suite of offices, one laser printer and one copy/printer from the new PAWS printing system on campus. The closest facsimile machine available to faculty is in the Dean's office on the

second floor of Belk or at the SHS home in Moore building. It has been difficult at times to send/receive fax documents which are used frequently during internship courses.

Finding class space in Belk for non-traditional activities for students is very difficult. All classrooms in Belk now have computers and projectors, but many rooms are not adequately fitted for using this technology effectively (no way to block light coming through windows, unreliability of some equipment and features, uncomfortable student desks limits group work). The Program can schedule classes in e-classrooms in other buildings on campus where students have access to the Internet, Microsoft Office, and other applications, but this is often time consuming and disruptive to classes..

Faculty has access to the full Microsoft Office Suite, Adobe Acrobat, and WebCat (Blackboard) and other software upon request (e.g., SPSS, Quatrics Survey Software, Respondus, etc.). Training is available through on-campus classes or through 1:1 consultation with a Faculty Fellow in Instructional Technology through the Coulter Faculty Center's 'Faculty Sandbox'. The IT 'Help Desk' call center has 24/7 availability to assist faculty with technology and computing issues. Two faculty members (Connolly and Hinton) have licenses to use HeartMath Biofeedback software, which has become an important element in teaching client assessment and interventions and modalities. Both faculty members have participated in training to use HeartMath, although further training as HeartMath instructors will be invaluable to maximize the use of this biofeedback package for the measurement of heart rate variability.

Equipment and Supplies: During the past year, faculty has sought equipment and supplies to meet teaching and service learning needs. However, the Program has many needs in this area to adequately prepare students in the major. The three areas that are most supported with acquisitions so far are client assessment, adventure-based RT, and interventions and modalities in RT. The critical needs for further equipment are in adaptive equipment for work with people with physical disabilities, Alzheimer's disease, and behavioral health.

Library Resources to Support Mission and Goals: Our College has a designated research librarian liaison, Ann Hallyburton, who is a tremendous asset to both faculty and students. She is proactive and responsive to the information needs of all our programs (see Appendix 7.4). Her enthusiasm and expertise in the research process make her a regular 'guest speaker' in some RT courses. Other valuable on campus resources include the Coulter Faculty Center, WCU Writing Center, Academic Advising Center, Center for Service Learning, and the Career Services Center.

Administrative support (1.75 FTEs) is divided between all eight SHS programs. Both of the administrative staff are located in Moore Building which is a significant distance from the RT faculty. This makes it extremely difficult to use SHS equipment, to access supplies, and mail. The Dean's Office in Belk has provided assistance closer to the Program, however, the Program has been limited in this area. In 2008, the Program requested a work-study student who has helped significantly in the area of

administrative support. This inconsistency in support delays or preempts building and/or updating program tools to assess, analyze, plan and implement improvements. This is not due to lack of willingness or helpfulness of the administrative support staff, but to geographic location and space. With a focus for RT faculty on teaching and learning activities, tough choices must be made among increasing administrative duties, faculty research agendas and the central mission of the University, ‘teaching and learning’(Appendix 7).

Program Staffing Needs: As previously indicated having three faculty members has significantly improved the Program. At the same time, the Program has grown significantly and almost doubled in student numbers since 2005. The current student ratio is high when compared to sister UNC institutions with RT programs and the recommended standard by CARTE which is 24 to 1 or almost 25% lower than the current RT student ratio of 30 to 1. Additionally, if the program is to continue to strategically plan for expansion and growth (i.e., development of the hybrid distance undergraduate program and exploration of developing a graduate education program) there will need to be additional faculty members in order to support such expansions.

Program Areas of Concern

Based on analysis of several surveys of current students, alumni, and clinical supervisors, it is clear that there are several areas where program improvements are needed.

Clinical/Practical Opportunities, including opportunities to implement “real-world” client interventions: There is no question that getting students hands on experiences with clients prior to internship is necessary, and important for their learning. When put in the framework of service to the community, students gain some experience through volunteering with people with disabilities. Providing students with opportunities to obtain actual clinical experiences has many challenges, especially in rural areas such as Jackson County, NC. While there are many clients who could benefit from students’ practical experiences, the agencies that serve these clients are often facing a number of difficulties. Two of these difficulties are: 1) agencies neither hire (nor often understand the role of) recreational therapists, and 2) agencies are often understaffed in general. With these barriers, there needs to be a large commitment from the faculty member to create and supervise practical experiences at the agency site. This is desirable, but extraordinarily time consuming.

At present we have two SLC designated courses in which service learning activities are performed. These are different types of clinical experiences requiring different levels of professional supervision according to state licensing laws for RT. Our curriculum could benefit from further service learning experiences. However, increased levels of staffing would be needed to provide the proper supervision in the community settings during the laboratory experiences. In addition, it will take

additional faculty time and effort to create partnerships with appropriate sites. We have found through experience that all willing sites are indeed not conducive for student learning. Faculty will continue with the previously mentioned strategic goals to improve this area.

In addition to furthering service learning opportunities in existing courses, it would be beneficial to add a field experience course. However, it will be extraordinarily difficult to do this in the region during the regular academic year if students are expected to gain experience under a CTRS (Certified Therapeutic Recreation Specialist) and an LRT (Licensed Recreational Therapist). If this is the experience desired, students will need to complete their field experiences in other regions over designated University breaks.

Clinical practice experiences are much more complex and will have to grow as Western Carolina attracts more licensed recreational therapists to the area. With the new health sciences building, we will also be better equipped to deliver RT services from campus which will solve a lot of the problems related to clinical experiences.

Equipment and Supplies: We have been fortunate to increase the amount of equipment and supplies available over the past two years. Indeed, our extraordinarily small, unsecured storage space is reaching its maximum capacity. Because of recent budget limitations and this lack of storage space until we move in to our new facility, it is difficult to choose items to add to the inventory at this juncture. However, there are many items that may be ordered when we have additional laboratory, outdoor and storage space in the future.

Since we are in a mountain area, having some adaptive equipment for fishing and outdoor activities would also be beneficial, along with an all-terrain wheelchair and state-of-the art sports wheelchairs. Supplies focused on music would also be beneficial and useful.

When in the new facility, a small low-element challenge course would be a very useful addition to the outdoor grounds. These elements would need to be installed and then inspected yearly by a professional challenge course vendor. This is not an extraordinary cost, but would be an ongoing one. In addition, elements need to be maintained through other methods, such as mulching, etc.

The addition of further testing and practice stations for modalities such as deep breathing, meditation, and use of software such as HeartMath are vital. At present, we do not have enough quiet space, mats, computers, or software for students to practice these modalities effectively. The area designated at the new facility will need to be equipped with these materials to be useful.

Facilities: We anticipate that our facility needs will be resolved with the move to the new CHHS building which is currently under construction. RT has been involved with architectural planning for this building since 2007. Whether funds are available to support equipment needs projected for the new facilities remains an issue (e.g., 2 duet bikes, biofeedback technology and software, etc.). Our proposal for

equipment needs related to the new facilities was at approximately \$20,000.00 two years ago and may increase at the time of the move to the new building due to inflation and increased student numbers.

Summary

The WCU RT Program has undergone tremendous changes over the past five years. The Program has experienced significant growth in student numbers and growth in the quality of students. The greatest contribution to the stability and quality of the program has been the hiring of two additional faculty members in 2008. The past two years have represented the first time in many years that a consistent and stable faculty has been in place.

Several needs continue to exist for the program in opportunities for clinical experience, the acquisition of equipment, supplies, and facilities, and several areas where further refinement of the curriculum is required to afford students better education in documentation, the development of professional skills, and better testing procedures to adequately measure and gauge student learning and progress.

This brief overview report is supported in a separate document of appendices which includes significant data and background for this report.