

# The State of Respiratory Therapy: A 2021-2022 Report

## How RTs feel about the field – and their future

Boston Scientific and the American Association for Respiratory Care (AARC) partnered to survey **87 hospital-based respiratory therapists, managers and directors in the US**, conducted online from **July 9 to August 9, 2021**. This report explores their views on several topics, including career experiences and expectations, patient care innovation and barriers, critical changes due to COVID-19 and key priorities for the future.

We heard from a wide range of professionals



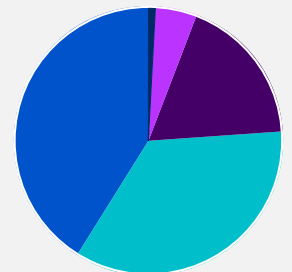
**36** Respiratory Therapists      **7** RT Coordinators  
**19** RT Managers/Supervisors    **8** Others  
**17** RT Directors                      (educators, trainers, etc.)

All across the US



**39%** South      **18%** West  
**28%** Midwest    **15%** Northeast

And from a wide range of age groups



**41%** 55+      **5%** 26-35  
**35%** 46-55    **1%** 18-25  
**18%** 36-45

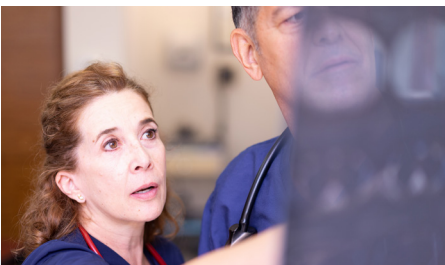
# Respiratory Therapy Experience & Expectations

The ground beneath the feet of respiratory therapists has shifted over the past few years due to COVID-19, reduced budgets and staffing shortages. Yet nearly all plan to continue in the medical field – many until retirement.



## What's now: Making a difference

Most RTs hold influence with colleagues on important decisions – perhaps a key reason for wanting to remain in the field.



**84%**

have influence in making decisions around patient care and technology



**21%**

of that group see their influence growing over time, while...



**77%**

of that group see their influence staying the same



16% have little or no influence in making important decisions, but they hope it grows in the next 12 months

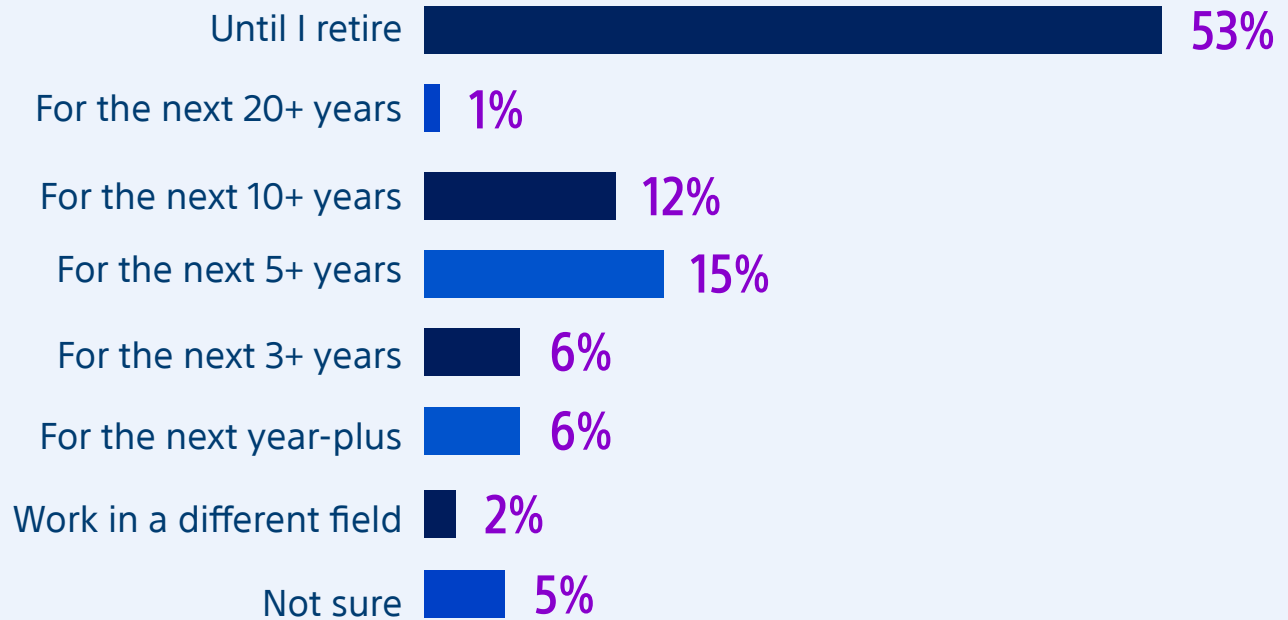
## What's next: Committing to the future

While the going has gotten tough lately, the tough plan to keep going. Most RTs are here to stay for their patients.



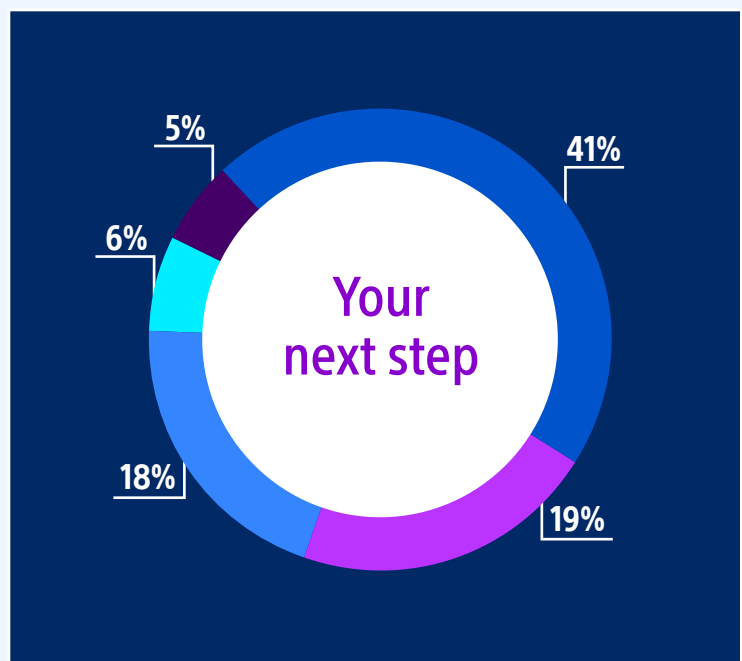
79% of RTs said they're experiencing burnout, according to a 2021 AARC survey<sup>1</sup>

## Long-term plans to stay in respiratory therapy



## The next step in your career

- 41% Continue current role
- 19% Another medical role
- 18% RT Manager or Director
- 6% Outside medical field
- 5% Not sure



## What's up: A rising need for more qualified staff

Talent shortage is a big concern for the future. A big reason for that? Retirement plus fewer and fewer incoming RTs.

### Troubling trends in respiratory therapy



**92,474**

RTs will leave the profession by 2030<sup>2</sup>



**27%**

decline in respiratory care education program enrollment since 2010<sup>2</sup>



“

A number of people close to retiring made the decision to leave the field – COVID is speeding up the process that had already begun. And I don't see many new young RTs stepping up to take their place as profession leaders.

*Respiratory Therapist, Washington*

## Patient Care

### Innovation & Barriers

In the field of respiratory therapy, talent, time and technology go a long way – but too often there's a shortage of all three. The impact is felt by RTs trying to balance care and efficiency.



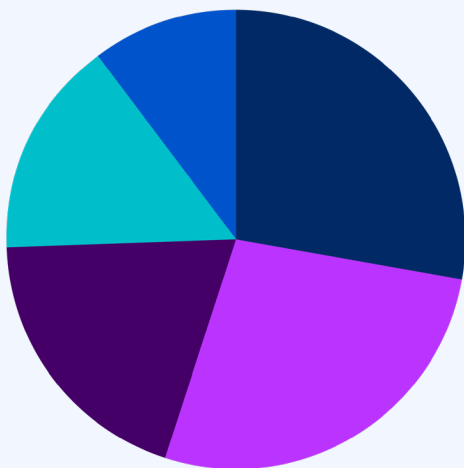
“It’s extremely difficult to balance **care and efficiency** because we don’t have enough therapists to meet the needs of higher acuity services.”

*Education Development Coordinator,  
Respiratory Care, Ohio*



## What’s now: Demanding more talent and innovation

Simply put, advancing patient care requires more staff to care for patients – and more advances in technology.



### Biggest barriers to better patient care

- 67%** Talent on our team/understaffed
- 65%** Technology availability/function/performance
- 46%** Operational inefficiencies
- 37%** Lack of training
- 24%** Other

## Top 3 procedures needing innovation

RTs want to see advances in:

**50%**

### Mechanical ventilation

to decrease barotrauma and improve modes

**41%**

### Secretion management

to provide smaller, more effective removal solutions

**35%**

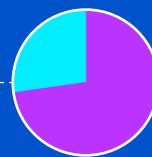
### Aerosol therapy

to deliver higher quality nebulizers with shorter deposition

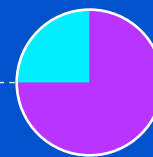
## Top 3 technologies needing innovation



33%  
Ventilator



27%  
Nebulizer



25%  
Oxygen Blender



It's all about prioritization. Making sure assignments are controllable from the beginning so when emergencies happen, we can take care of 'priority' patients. Then treat every patient with respect and the same level of care.

*Respiratory Therapist, New Jersey*

## What's next: Investing in (the right) innovations

As hospital budgets tighten, the importance of spending it wisely increases. Many RTs have a shopping list in mind.

### Top technology investments

in 2021 & 2022

- 29% Ventilator
- 15% Bronchoscope
- 15% Spirometer
- 15% Arterial Blood Gas Analyzer
- 35% Not sure

### Technology wish list

if budget approved

- 28% Ventilator
- 9% Arterial Blood Gas Analyzer
- 6% Humidifier
- 6% Bronchoscope
- 4% Regulator
- 4% Oxygen Blender
- 2% Nebulizer
- 2% Recitation Bag
- 0% Spirometer
- 0% Flowmeter
- 47% Not sure
- 17% Other\*

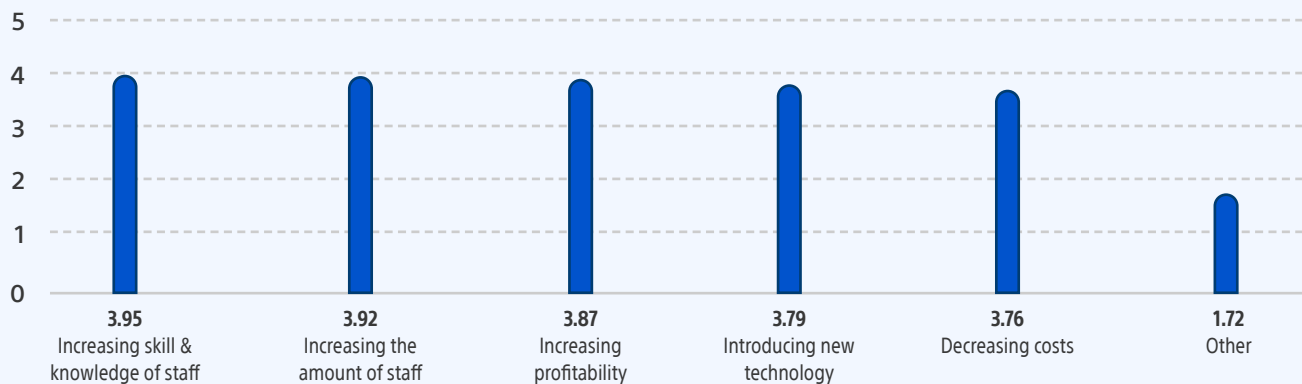
\* Lung Ultrasound, PFT Equipment, MRI Vent Options

## What's up: Focusing on what matters most

For most RTs, hiring more skilled and knowledgeable staff is priority number one.

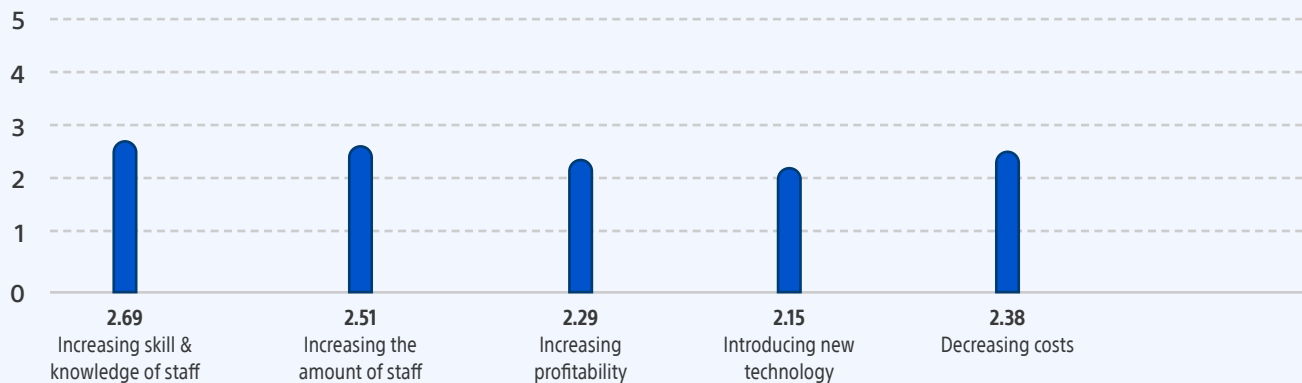
### Everything is important 2021 departmental needs

(Rankings show response averages. 5 = highest priority, 1 = lowest priority)



### On the horizon 2022 departmental needs

(Rankings show response averages. 5 = highest priority, 1 = lowest priority)



Staffing is an issue. We need more RTs coming into the field. It's very hard to hire quality RTs these days – sometimes you have to settle and hope for the best.

*Respiratory Care Chief, Missouri*

# Impact of COVID-19

## Challenges & Change

COVID-19 continues to be a critical issue for RTs and others in the medical field – affecting patient care, professional burnout and the future of health care itself.



### What's now: An unending cycle

As the pandemic cycled through chaos and calm and back again, so too did the stress on RTs.

What's the toughest challenge for RTs moving forward?

Overworked  
Reimbursement  
PPE Patient Motivation  
Support Quality  
Stress National Critical  
Rt's Pay Staffing  
Education Care

### What's next: Reforming patient care

Respiratory therapists see significant changes to patient care coming after COVID-19 – some better, some worse.

#### Changes in care post-COVID-19

- ▶ Better technology options
- ▶ Safer transmission methods
- ▶ Fewer skilled RTs
- ▶ Less face-to-face care
- ▶ More lung-related conditions



## What's up: Staying nimble is key

The end of COVID-19 can't come soon enough for RTs. Until then, the only constant is change.

“

COVID put the spotlight on respiratory therapists – this is our chance to expand our scope throughout different facilities.

”

“More people will continue to burn out. More people will leave due to COVID, along with inadequate staffing and not being recognized as a critical member of patient care.”

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**“The long-term impact of COVID for those infected will be felt in the environment for decades to come – making respiratory care much more in demand.”**

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**“ We needed more staffing. Everywhere.**

“Our next challenge is keeping enough RTs in the field for the next pandemic or next surge of COVID patients already on the way.”

**“We've lost about 15% of our staff.”**

## In conclusion



# RTs are here to stay – but they need more help

Throughout this report, we've explored a wide range of views on important topics impacting RTs today. From career expectations to patient care to COVID-19, one call to action rang loudest: Help Wanted. Staffing skilled RTs – and equipping them with sophisticated technology – are the keys to the future of respiratory therapy.

87%

expect to remain an RT for  
at least the next  
three years

67%

believe not having enough  
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65%

say the availability, function  
and performance of  
technology impacts their  
ability to care for patients

## Investments in innovation

to advance patient care

### RTs seek innovation in these procedures

- ✓ Mechanical ventilation
- ✓ Secretion management
- ✓ Aerosol therapy

### And investment in these devices

- ✓ Ventilator
- ✓ Bronchoscope
- ✓ Spirometer

# Boston Scientific

## About Boston Scientific

Boston Scientific is dedicated to transforming lives through innovative medical solutions that improve the health of patients around the world. As leaders in airway endoscopy and pioneers of single-use products, Boston Scientific connects you with a pipeline of groundbreaking innovations, built on our foundation of 1,500+ GI and airway devices.

[BostonScientific.com/RT](https://www.bostonscientific.com/RT)



## About the AARC

Founded in 1947, the American Association for Respiratory Care (AARC) is the leading national and international professional association for respiratory care. We encourage and promote professional excellence, advance the science and practice of respiratory care, and advocate for patients, their families, the public, the profession, and the respiratory therapist. Supporting more than 40,000 members worldwide, the AARC is a not-for-profit professional association headquartered in Irving, TX.

[AARC.org](https://www.aarc.org)

# References

1 "Prevalence of Burnout Among Respiratory Therapists Amidst the COVID-19 Pandemic". Respiratory Care July 2021. <https://doi.org/10.4187/respcare.09283>

2 "Why the World Needs More RTs, and How You Can Help". August 4, 2021. The National Board for Respiratory Care. <https://www.nbrc.org/why-the-world-needs-more-rt-and-how-you-can-help/>



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