

Government of the District of Columbia Department of Health Board of Respiratory Care

899 NORTH CAPITOL ST. NE -2^{ND} FLR. WASHINGTON, DC 20002

February 12, 2018

9:00 am - 12:00 pm

MEETING AGENDA



Open Session February 2018: Call to Order

OS-0212-01	SENIOR DEPUTY DIRECTOR'S REPORT
OS-0212-02	EXECUTIVE DIRECTOR'S REPORT
OS-0212-03	BOARD ATTORNEY'S REPORT
OS-0212-04	CHAIRPERSON'S REPORT
OS-0212-05	<u>OPEN SESSION MINUTES</u> <u>Board Action</u> : To consider the Open Session Minutes of the December 11, 2017 meeting.
OS-0212-06	<u>REVIEW OF REGULATIONS</u> <u>Board Action:</u> To conduct a final review of the draft regulations for movement to publication.

ADJOURNMENT

Upon conclusion of the open session meeting pursuant to the DC Official Code 2-575(b) and for the purposes set forth therein, the Board will move into the closed executive session portion of the meeting to consult with the Board attorney, discuss disciplinary matters and hear reports concerning violations of the law or regulations.



Government of the District of Columbia Department of Health Board of Respiratory Care

899 NORTH CAPITOL ST. NE -2^{ND} FLR. WASHINGTON, DC 20002

December 11, 2017

9:00 am - 12:00 pm

OPEN SESSION MEETING MINUTES



ATTENDANCE: December 11, 2017

BOARD MEMBERS:		
	CAROLYN WILLIAMS, CHAIRPERSON	Present
	TIMOTHY MAHONEY, BOARD MEMBER	Present
	BETTY AKPAN, BOARD MEMBER	Present
STAFF:	ROBIN Y. JENKINS, EXECUTIVE DIRECTOR	Present
	ERIC YEAGER, HEALTH LICENSING SPECIALIST	Present
	EMILIA MORAN, INVESTIGATOR	Present
	PANRAVEE VONGJAROENRAT, ASSISTANT	Present
	GENERAL COUNSEL	
VISITOR		



OPEN SESSION December 2017

Call to Order and Roll Call

OS-1211-01	SENIOR DEPUTY DIRECTOR'S REPORT	
	Board Action: None.	
OS-1211-02	EXECUTIVE DIRECTOR'S REPORT	
	Board Action: None.	
OS-1211-03	BOARD ATTORNEY'S REPORT	
	Board Action: The Board Attorney noted that the Board Chair	
	testified before the City Council on November 28 in opposition to	
	the "Removing Barriers to Occupational Licenses Amendment Act of 2017." The legislation proposes to limit a licensing board's	
	inquiry into an applicant's criminal history. Under this bill, a	
	licensing board may only consider an applicant's criminal history if	
	(a) a criminal charge resulted in a conviction and (b) the charge is	
	directly related to the occupation for which the license is sought.	
OS-1211-04	CHAIRPERSON'S REPORT	
	Board Action: The Board Chair opened the meeting with birthday	
	wishes for Board Member Betty Akpan and holiday wishes for the	
	Board and staff. The Board Chair also announced that she and	
	Member Timothy Mahoney will be reappointed to the Board and	
	sworn in on Saturday, December 16, 2017.	
OS-1211-05	OPEN SESSION MINUTES	
	Board Action : The Open Session Minutes of the October 10, 2017	
OS-1211-06	meeting were approved. REGULATIONS UPDATE	
05-1211-00	Board Action: The Board reviewed and discussed various	
	provisions of the draft regulations. The Board agreed to review	
	the regulations in final form at the next meeting on February 12,	
	2018.	
	The Open Session closed at 10:50 a.m.	

DISTRICT OF COLUMBIA MUNICIPAL REGULATIONS for RESPIRATORY THERAPY

CHAPTER 76 RESPIRATORY THERAPY

Secs.

Title 17

7600	General Provisions
7601	Term of License
7602	Educational Requirements
7603	Applicants Educated in Foreign Countries
7604	National Examination
7605	Licensure by Endorsement
7606	Renewal, Reactivation, or Reinstatement of a License; Continuing Education Requirements
7607	Approved Continuing Education Programs and Activities
7608	Practice of Respiratory Care by Students or Applicants
7609	Standards of Conduct and Ethics
7699	Definitions

7600 GENERAL PROVISIONS

- 7600.1 This chapter shall-applyies to any persons who applies for or holds alicenseauthorized to practice respiratory therapy in the District-of Columbia ("District") including applicants for or holders of a license issued in accordance with this chapter.
- 7600.2 Chapters 40 (Health Occupations: General Rules) and 41 (Health Occupations: <u>Administrative Procedures</u>) of this title supplement this chapter The provisions of this chapter shall be supplemented by the provisions of Chapter 35 of this title, entitled "Occupational and Professional License Fee Schedule", Chapter 40 of this title, entitled "Health Occupations: General Rules", and Chapter 41 of this title, entitled "Health Occupations: Administrative Procedures".

7601 TERM OF LICENSE

- 7601.1 A license issued pursuant to this chapter shall be effective for not more than two years and shall expire at 12:00 mMidnight on January 31st of each odd-numbered year. The Director of the Department of Health may establish a different term and expiration date, by rule.
- 7601.2If the Director changes the renewal system pursuant to § 4006.3 of Chapter 40 of
this title, a license issued pursuant to this chapter shall expire at 12:00 midnight of
the last day of the month of the birth date of the holder of the license, or other
date established by the Director.

7602 EDUCATIONAL REQUIREMENTS

7602.1 Except as provided in § 7605, each applicant for a license to practice respiratory therapy shall submit proof, satisfactory to the Board, that the applicant has successfully completed an educational program in the practice of respiratory therapy at an institution accredited by the American Medical Association

District of Columbia Municipal Regulations

Committee on Allied Health Education and Accreditation (CAHEA), upon the recommendation of the Joint Review Committee for Respiratory Therapy Education (JRCRTE)care that has been accredited by the Commission on Accreditation for Respiratory Care (CoARC), or their its successor organizations.

7602.2 For purposes of this section, proof satisfactory to the Board of successfulcompletion of an educational program shall be an official transcript, notarizeddiploma, or certificate of completion from an institution accredited by the CAHEA and JRCRTE.

7603 APPLICANTS EDUCATED IN FOREIGN COUNTRIES

7603.1 An applicant who was educated in a foreign country shall satisfy the educational requirements in § 7602.

7604 NATIONAL EXAMINATION

- 7604.1 In addition to satisfying the educational requirements set forth in § 7602, an applicant shall receive a passing score on the <u>Therapist Multiple-Choice</u> <u>Examination for Certified Respiratory Therapist (CRT) or the Registry</u> <u>Examination for Registered Respiratory Therapist (RRT)-National Board</u> <u>Examination ("NBE")</u> developed and administered by the National Board for Respiratory Care ("NBRC"). The passing score for the <u>NBE for</u> purposes of these rules shall be the passing score determined by the NBRC.
- 7604.2 Each applicant for a license by examination shall submit to the Board a completed application and the applicant's <u>NBE_CRT or RRT examination</u> results, which shall be certified or validated by the NBRC.
- 7604.3An applicant for a license by examination who took and pass an NBRC
examination required pursuant to § 7604.1 more than five (5) years prior to the
date of the application shall be required to take and pass the examination again
unless the applicant has continuously maintained valid credential as a Certified
Respiratory Therapist (CRT) or Registered Respiratory Therapist (RRT) and such
credential was obtained after July 1, 2002.

7605 LICENSURE BY ENDORSEMENT

- 7605.1 The Board shall-may issue a license to practice respiratory therapy, by endorsement to an applicant who:
 - (a) Is currently licensed to practice respiratory care inby another state_ according to standards that were the substantial equivalent to the District's at the time of the licensing;
 - (b) <u>IsHas continually remained</u> in good standing under the laws of another state with standards that the Board determines to be comparable to the requirements of the Act and this chapter;

Comment [PV1]: PLEASE REVIEW – DO WE REQUIRE FOREIGN APPLICANTS

	(c) Possesses a valid and current certification as a Certified Respiratory Therapist (CRT) or Registered Respiratory Therapist (RRT), issued by the National Board for Respiratory Care (NBRC); and
	(de) Pays the applicable feeMeets the other applicable requirements of D.C. Official Code § 3-1205.03.
7606	RENEWAL, REACTIVATION, OR REINSTATEMENT OF A LICENSE; CONTINUING EDUCATION REQUIREMENTS
7606.1	Except as provided in § 7606.2, all applicants for the renewal, reactivation, or reinstatement of a license to practice respiratory therapy in the District shall demonstrate successful completion of approved continuing education units ("CEUs") in accordance with this section.
7606.2	This section shall-does not apply to applicants for an initial District of Columbia- license, nor to applicants for the first renewal of a license granted by examination after the initial grant.
7606.3	To qualify for reactivation of a license to practice respiratory therapy, a person in inactive status, as defined in § 511 of the Act (D.C. Official Code § 3-1205.11), shall submit proof of having successfully completed eight (8) approved CEUs for each year that the applicant was in inactive status, up to a maximum of forty (40)-CEUs.possess a valid and active credential as a Certified Respiratory Therapist (CRT) or Registered Respiratory Therapist (RRT).
7606.4	To qualify for reinstatement of a license, an applicant shall submit proof of <u>the</u> <u>following:</u>
	(a) Hhaving successfully completed eight (8) approved CEUs for each year after January 31, 2003, that the applicant's license was not renewed, up to a maximum of forty (40) CEUs. If an applicant whose license has expired does not apply for reinstatement of a license pursuant to this section within five (5) years of the date that the applicant's license expires, the applicant- shall meet the requirements for obtaining an initial license.that the license remains expired and two (2) of the required CEUs shall be in ethics; and
	(b) A current and valid credential as a Certified Respiratory Therapist (CRT) or Registered Respiratory Therapist (RRT), issued by the National Board for Respiratory Care (NBRC).
7606.5	To qualify for <u>the</u> renewal of a license, an applicant shall <u>have completed sixteen</u> (16) CEUs of approved continuing education programs or activities during the two (2)-year period preceding the date the license expires, which shall also meet the following requirements:

Title 17

	(a) <u>An applicant seeking to renew his or her license on or before January 31, 2019, shall have completed at least three (3) hours of ethics; or Have-completed sixteen (16) CEUs in approved continuing education programs during the two (2) year period preceding the date the license-expires. Beginning with the renewal period ending January 31, 2009, a minimum of three (3) hours of the total continuing education credits-shall have been in ethics; and</u>
	(b) <u>An applicant seeking to renew his or her license after January 31, 2019</u> <u>shall have completed two (2) hours of ethics and two (2) hours of LGBTQ</u> <u>continuing education.</u>
	Attest to completion of the required continuing education credits on the renewal- application form; and
	(c) Be subject to a random audit for compliance with the continuing- education requirement.
7606. <mark>6<u>6</u></mark>	Except as provided in § 7606.7, an applicant under this section shall prove- completion of required continuing education credits by submitting with the application the following information with respect to each program:
	(a) The name and address of the sponsor of the program;
	(b) The name of the program, its location, a description of the subject matter- covered, and the names of the instructors;
	(c) The dates on which the applicant attended the program;
	(d) The hours of credit claimed; and
(e)	Verification by the sponsor of completion, by signature or stamp. <u>A CEU shall be</u> valid only if it is part of a program or activity approved by the Board in accordance with § 7607.
7606. <u>7</u> 7	Applicants for renewal of a license shall only be required to prove completion of the required continuing education credits by submitting proof pursuant to § 7606.6 if requested to do so as part of the random audit, or if otherwise requested to do so by the Board. The Board may conduct a random audit of active licensees to determine compliance with the continuing education requirements and the requirement for continuously valid credential pursuant to § 7611. A licensee who is selected for audit shall submit satisfactory proof of continuing education compliance and possession of valid and active CRT or RRT credential within thirty (30) days of receiving the notice of his or her selection.
7606. <mark>8<u>8</u></mark>	The Board shall conduct a random audit of continuing education credits at the

03-23-2007

Title 17

District of Columbia Municipal Regulations

	completion of each renewal period. A licensee who fails to satisfactorily prove continuing education or continued credential compliance during an audit shall be
	subject to another audit during the subsequent licensure term.
7606.9	An applicant who falsely certifies completion of continuing education credits shall be subject to disciplinary action.
7606.10	An applicant for renewal of a license who fails to renew the license by the date- the license expires may renew the license for up to sixty (60) days after the date of expiration by completing the application, submitting the required supporting- documents, and paying the required late fee. Upon renewal, the license shall be- deemed to have possessed a valid license during the period between the expiration of the license and its renewal.
7606.11	If an applicant for renewal of a license fails to renew the license and pay the late- fee within the sixty (60) days after the expiration of the license, the expired- license shall be deemed to have lapsed on the date of expiration and the applicant- shall thereafter be required to apply for reinstatement of an expired license and- meet all requirements and fees for reinstatement.
7606.12	If an applicant's license lapses, the applicant shall be subject to disciplinary- action, including denial of a license, if the applicant practices respiratory therapy- after the date the license lapses.
7606.13	The Board may, in its discretion, grant an extension of the sixty (60) day period to renew the license after expiration, if the applicant's failure to renew was for good cause. As used in this section "good cause" includes the following:
	(a) Serious and protracted illness of the applicant; and
	(b) The death or serious and protracted illness of a member of the applicant's- immediate family.
7607	APPROVED CONTINUING EDUCATION PROGRAMS AND ACTIVITIES
7607.1	Beginning with the renewal period of 2007, tThe Board shall onlymay grant CEU credits for continuing education programs and or activities administered or approved by organizations listed in § 7607.8 of this chapter that it deems to contribute to the growth or maintenance of competency in the practice of respiratory therapy and meets other applicable requirements of this section.
7607.2	For the renewal period of 2007 only, the Board may accept CEUs for education programs and activities that were not administered or approved by an organization listed in § 7607.8 of this chapter if:
	(a) The Board determines that the CEUs were sufficiently related to the

Title 17

	practice of respiratory therapy;
	(b) The program or activity was approved by a recognized approving body; and
	(c) The CEUs were obtained prior to the enactment of these regulations.
7607.3	The Board may approve a seminar, workshop, or an educational program given at a conference for approved CEU credit, if the seminar, workshop, or program is administered or approved by one of the organizations listed in § 7607.8 of this chapter.
7607. <u>2</u> 4	The Board may approve grant CEU credit for an applicant who serves asto an instructor or speaker at a seminar, workshop, or program that is approved by one of the organizations listed in § 7607.84 of this chapter for both preparation and presentation time, subject to the following restrictions:
	(a) The maximum number of approved CEUs that may be granted for- preparation time is twice the number of hours spent preparing for the- presentation The maximum CEU credit granted for preparation time is equal to the presentation time;
	(b) The maximum number of approved-CEU credit s-that may be granted pursuant to this subsection is fifty percent (50%) of an applicant requestor's CEU requirement;
	(c) If an applicantrequestor has previously received aCEU credit in connection with a particular presentation, the Board shall not grant <u>CEU</u> credit for a subsequent presentation unless it involves either a different subject or substantial additional research concerning the same subject; and
7607. <u>3</u> 5	(d) The presentation shall have been presented during the period for which credit is claimed.
	The Board may approve the following independent home studies and distance- learning continuing education activities:grant CEU credit for authoring and publishing
	(a) Publication of an article in a professional, <u>peer-reviewed</u> journal, <u>publication of a book or a chapter in a book</u> , or <u>publication of a book</u> review in a professional, <u>peer-reviewed</u> journal or bulletin provided that the article, book or chapter was published during the period for which credit is claimed.; and
	(b) Internet courses, video courses, telecourses, videoconferences, and

District of Columbia Municipal Regulations

		teleconferences offered by accredited colleges or universities, or pre- approved by the AARC or MD/DC Society.		
7607.6	applic	oard may grant continuing education credit under § 7607.5.(a) only if the ant proves to the satisfaction of the Board that the work has been published- epted for publication during the period for which credit is claimed.		
7607.7	reinsta	No more than eight (8) CEUs may be accepted in any renewal period, or for- reinstatement or reactivation of a license, for approved independent home studies- and distance learning continuing education activities.		
7607. <u>4</u> 8	contin	nalify for The Board shall grant approval by the Board CEU credit, for a nuing respiratory care education seminar, workshop, or program shall be- nistered, sponsored, or approved by:		
	(a)	The American Association of Respiratory Care (AARC);		
	(b)	The Maryland/District of Columbia Society for Respiratory Care;		
	(c)	A health care facility accredited by the Joint Commission on the Accreditation of Health Care Organizations (JCAHCO);		
	(d)	A college or university approved by an accrediting body recognized by the Council on Postsecondary Accreditation or the Secretary of the United States Department of Education; or		
	(e)	Any of the following organizations provided that the training is related to respiratory care services:		
		(1) American Medical Association under Physician Category I:-		
		(2) American Thoracic Society:		
Ň		(3) American Association of Cardiovascular and Pulmonary Rehabilitation:		
		(4) American Heart Association;		
		(5) American Nurses Association:		
		(6) American College of Chest Physicians:		
		(7)American Society of Anesthesiologists:		
		(8)American Academy of Sleep Medicine		

	(9)	The Accreditation Council for Continuing Medical Education (ACCME);
	(10)	The American College of Cardiology <u>; or</u>
	(11)	The American Lung Association.
	(12) T	The National Society for Cardiopulmonary Technologists
7607. <mark>9<u>5</u></mark>		all not grant CEU credit for basic life support courses or training, or ses or training.
7607.10		t shall verify that a seminar, workshop, or program is approved by rsuant to this section, prior to attending the seminar, workshop or-
7608	PRACTICE APPLICAN	OF RESPIRATORY CARE BY STUDENTS OR TS
7608.1	This section s	shall apply to:
		dent enrolled in an approved school or college as a candidate for a e or a certificate in respiratory therapy; ando
	therap	pplicant whose first application for a license to practice respiratory by in the District has been submitted to the Board and a decision on application is pending.
7608.2		applicant may practice respiratory therapy only in accordance with his section the following provisions:
	health at a he	dent may practice only in a hospital, nursing home, health facility, or a education center operated by the District or federal government or ealth care facility that the student's school or college determines to propriate for this purpose;
	licens	dent shall be supervised at all times by a respiratory therapist ed in the District who shall be present on site and available to vise and oversee the student at all times;
	practi	upervisor shall be fully responsible for the supervised student's ce and may be subject to disciplinary action for any act or omission student that constitutes a violation of the Act or this chapter;
		dent may not receive payment or compensation of any nature either ly or indirectly for his or her practice of respiratory therapy; and

Title 17

District of Columbia Municipal Regulations

	(e) A student shall be subject to each of the applicable provisions of the Act and this chapter.
7608.3	A student shall practice respiratory therapy in a hospital, nursing home, health- facility, or health education center operated by the District or federal government or at a health care facility that the student's school or college determines to be- appropriate for this purpose.
7608. <u>3</u> 4	An applicant may practice respiratory therapy <u>only in accordance with the</u> <u>following provisions:</u>
	(a) An applicant may practice only under general supervision of a respiratory therapist licensed in the District who shall be fully responsible for the supervised applicant's practice and may be subject to disciplinary action for any act or omission by the applicant that constitutes a violation of the Act or this chapter;
	(b) An applicant may not begin practicing respiratory therapy unless he or she has received express, written authorization from the Board, which may not be issued until the Board has satisfactorily reviewed the result of the applicant's criminal background check as provided by the Federal Bureau of Investigation, provided, however, that such temporary authorization to practice shall not limit the Board's authority to take any appropriate action based on the applicant's full criminal background check;
	(c) An applicant's authorization to practice under this section may not exceed ninety (90) days; provided, however, that the Board may grant an extension of this authorization for good cause;
	(d) An applicant may be paid a salary or compensation for the hours worked;
	(e) An applicant shall be subject to each of the applicable provisions of the <u>Act and this chapter.</u>
-in a hospital	, nursing home, or health facility operated by the District or federal government or any private health care facility.
7608.5	The student or applicant shall practice respiratory therapy only under the direct- supervision of a licensed respiratory care practitioner who collaborates with a- licensed physician.
7608.6	When practicing respiratory therapy, a student or applicant shall wear an- identifying name tag or badge that indicates student or applicant status.
7608.7	A licensed respiratory care practitioner who supervises a student or applicant shall be fully responsible for the student's or applicant's practice of respiratory therapy-

	discip	the licensed practitioner's or physician's supervision and shall be subject to- linary action for any act or omission by the supervised student or applicant- onstitutes a violation of the Act or this chapter.	
7608.8	A student shall not receive payment or compensation of any nature, directly or indirectly, for the practice of respiratory therapy. An applicant may be paid a salary based on hours worked.		
7608.9	A student or applicant shall be subject to each of the applicable provisions of the Act and this chapter. The Board may deny an application for a license by, or take other disciplinary action against, a student or applicant who is found to have violated the Act or this chapter, in accordance with Chapter 41 of this title.		
7608. <u>4</u> 10	If the Board finds that a student or applicant has violated the Act or this chapter, the Board may, in addition to any other disciplinary action permitted by the Act <u>including denial of application</u> , revoke, suspend, or restrict the privilege of <u>authorization for</u> the student or applicant to practice respiratory therapy.		
7609	STANDARDS OF CONDUCT AND ETHICS		
7609.1	A licensed respiratory care practitionerrespiratory therapist shall:		
	(a)	Practice medically acceptable methods of treatment;	
	(b)	Present his or her skills, training, scope of practice, certification, professional affiliations, or other qualifications in a manner that is not false or misleading;	
	(c)	Practice only within the scope of his or her competence, qualifications, and any authority vested in the licensed respiratory care practitioner by a physician<u>under the law;</u>	
	(d)	Continually strive to enhance the knowledge and skill set required to render quality respiratory care to each patient;	
	(e)-	Participate in activities to promote community and national efforts to meet the health needs of the public;	
	(f)	Be familiar with state and federal laws that govern health occupations;	
	(g)	Promptly report to the Board any information relative to the incompetent, unsafe, illegal, or unethical practice of respiratory therapy or any violation of the Act or this chapter;	
	(h)	Uphold the dignity and honor of the profession and abide by its ethical principles;	

- (i) Cooperate with other health care professionals;
- (j) Provide all services in a manner that respects the dignity of the patient, regardless of the patient's social or economic status, personal attributes, or health problems;
- (k) Refuse any offer of any gift from a patient or friend or relative of a patient for respiratory care provided to the patient;
- (1) Wear an identifying tag or badge that includes the practitioner's full nameand the words "licensed respiratory care practitioner" when practicingrespiratory therapy; and
- (m) Abide by the National Clinical Practice Guidelines published by the American Association of Respiratory Care (AARC) and any subsequent guidelines published by the AARC.
- 7609.2 If the Board investigates a respiratory care practitioner in connection with a respiratory care procedure for which no AARC guideline has been adopted, the Board may contract with the District of Columbia Society for Respiratory Care (also known as the Maryland/District of Columbia Society for Respiratory Care) or any licensed respiratory care practitioner for a determination of whether the respiratory care procedure was conducted consistent with acceptable standards of care. A respiratory therapist may utilize communication technology in standard patient care assessment and monitoring provided that the patient has provided written and informed consent specific to this manner of service and that the therapist has determined the following:
 - (a) This manner of service does not affect the quality of the service;
 - (b) The technology being used is fully secured and has been determined to safeguard the patient's confidentiality and privacy;
 - (c) The patient is sufficiently knowledgeable or familiar with the technology such that there would not be any difficulty or barrier to its effective utilization;
 - (d) This manner of service promotes continuity of care; and
 - (e) The patient is physically in the District at the time of the service.

7610 SCOPE OF PRACTICE

7610.1A respiratory therapist may practice only in a collaborative agreement with a
licensed physician, a licensed nurse practitioner, or a licensed physician assistant
under supervision of a licensed physician.

03-23-2007

Title 17

7610.2	The r	practice of respiratory care includes the following:
	<u>(a)</u>	Direct and indirect respiratory care services that are safe, aseptic, preventive, and restorative to the patient;
	<u>(b)</u>	The practice of the principles, techniques, and theories derived from cardiopulmonary medicine;
	<u>(c)</u>	Evaluation and treatment of individuals whose cardiopulmonary functions have been threatened or impaired by developmental defects, the aging process, physical injury, disease, or actual or anticipated dysfunction of the cardiopulmonary system;
	<u>(d)</u>	Observation and monitoring of physical signs and symptoms, general behavior, and general physical response to respiratory care procedures, and determination of whether initiation, modification, or discontinuation of the treatment regimen is warranted;
	<u>(e)</u>	The transcription and implementation of a written or oral order, or both, pertaining to the practice of respiratory care;
	<u>(f)</u>	Evaluation techniques including cardiopulmonary functional assessments, gas exchange, the need and effectiveness of therapeutic modalities and procedures, and assessment and evaluation of the need for extended care and home care procedures, therapy, and equipment;
	<u>(g)</u>	Professional application of techniques, equipment, and procedures involved in the administration of respiratory care such as:
		(1) Therapeutic and diagnostic gases (excluding general anesthesia);
		(2) Prescribed medications for inhalation or direct tracheal instillation;
		(3) Nonsurgical intubation, maintenance, and extubation of artificial airways;
		(4) Advanced cardiopulmonary measures;
		(5) Chest needle decompression;
		(6) Cardiopulmonary rehabilitation:
		(7) Mechanical ventilation or physiological life support systems:
		(8) Collection of body fluids and blood samples for evaluation and

	analysis, including collection by intraosseous access;
	(9) Insertion of diagnostic arterial access lines, including large bore intravenous access; or
	(10) Collection and analysis of exhaled respiratory gases:
	(h) The clinical supervision of licensed respiratory care practitioners, respiratory care departments, or the provision of any respiratory care services;
	(i) The respiratory care clinical instruction or oversight of respiratory care students, while performing respiratory care procedures as part of their clinical curriculum; or
	(j) The teaching or instructing of others in the discipline of respiratory care and therapy.
7611	MAINTENANCE OF VALID NATIONAL CERTIFICATION
<u>7611.1</u>	A licensed respiratory therapist XXXX THINK OF WHEN TO START AND HOW TO ACCOMMODATE PEOPLE WITHOUT shall maintain a continuously valid national certification by the National Board of Respiratory Care (NBRC).

7699 **DEFINITIONS**

7699.1 As used in this chapter, the following terms shall have the meanings ascribed:

Act means the District of Columbia Health Occupations Revision Act of 1985, effective march 25, 1986 (D.C. Law 6-99; D.C. Official Code § 3-1201.01 *et seq.*)

Applicant means a person who applies for a license to practice respiratory therapy pursuant to this chapter.

Board means the Board of Respiratory Care, established by § 214 of the Act, (D.C. Official Code § 3-1202.14).

Continuing education unit (CEU) – at least fifty (50) minutes of education, learning, or presentation time.

<u>CRT</u> – credential as a Certified Respiratory Therapist or achieving a passing score on the Therapist Multiple-Choice Examination for Certified Respiratory Therapist, developed and administered by the National Board for Respiratory Care ("NBRC").

LGBTQ continuing education – continuing education focusing on patients or clients who identify as lesbian, gay, bisexual, transgender, gender nonconforming, queer, or question their

03-23-2007

Title 17

District of Columbia Municipal Regulations

sexual orientation or gender identity and expression ("LGBTQ") meeting the requirements of § 510(b)(5) of the Act (D.C. Official Code § 3-1205.10 (b)(5) (2016 Repl.)).

<u>Nurse Practitioner</u> – A licensed registered nurse holding a certificate issued in accordance with Chapter 59 of Title 17 of the District of Columbia Municipal Regulations.

RRT – credential as a Registered Respiratory Therapist or achieving a passing score on the Registry Examination for Registered Respiratory Therapist, developed and administered by the National Board for Respiratory Care ("NBRC").

7699.2The definitions of § 4099 of Chapter 40 of this title are incorporated by
reference into and are applicable to this chapter.

Chapter 35 of Title 17 DCMR is amended by adding the following new section to establish license fees for the practice of respiratory therapy:

DEPARTMENT OF HEALTH

NOTICE OF PROPOSED RULEMAKING

The Director of the Department of Health, pursuant to the authority set forth in § 302 (14) of the District of Columbia Health Occupations Revision Act of 1985 ("the Act"), effective March 25, 1986 (D.C. Law 6-99; D.C. Official Code § 3-1203.02(14) (2012 Repl.), and Mayor's Order 98-140, dated August 20, 1998, hereby gives notice of the intent to take proposed rulemaking action by adopting the following amendments to chapter 76 of title 17 of the District of Columbia Municipal Regulations (DCMR) in not less than thirty (30) days from date of publication of this notice in the *D.C. Register*.

The purpose of this rulemaking is to update the regulation governing the practice of respiratory care, which has not been updated since 1990. The revisions will clarify languages, include clear scope of practice, which addresses the use of communication technology to aid in patient care, and require licensees to maintain national credentials, which are the accepted standards throughout the country.

CHAPTER 76 (RESPIRATORY THERAPY) OF TITLE 17 (BUSINESS, OCCUPATIONS, AND PROFESSIONALS) OF THE DISTRICT OF COLUMBIA MUNICIPAL REGULATIONS is amended as follows:

SECTION 7600, GENERAL PROVISIONS, is amended to read as follows:

7600 GENERAL PROVISIONS

- 7600.1 This chapter applies to persons authorized to practice respiratory therapy in the District including applicants for or holders of a license issued in accordance with this chapter.
- 7600.2 Chapters 40 (Health Occupations: General Rules) and 41 (Health Occupations: Administrative Procedures) of this title supplement this chapter.

SECTION 7601, TERM OF LICENSE, is amended to read as follows:

7601 TERM OF LICENSE

- 7601.1 A license issued pursuant to this chapter shall be effective for not more than two years and shall expire at 12:00 Midnight on January 31st of each odd-numbered year.
- 7601.2 If the Director changes the renewal system pursuant to § 4006.3 of Chapter 40 of this title, a license issued pursuant to this chapter shall expire at 12:00 midnight of the last day of the month of the birth date of the holder of the license, or other date established by the Director.

SECTION 7602, EDUCATIONAL REQUIREMENTS, is amended to read as follows:

7602 EDUCATIONAL REQUIREMENTS

Except as provided in § 7605, each applicant for a license to practice respiratory therapy shall submit proof, satisfactory to the Board, that the applicant has successfully completed an educational program in the practice of respiratory care that has been accredited by the Commission on Accreditation for Respiratory Care (CoARC) or its successor organization.

SECTION 7604, NATIONAL EXAMINATION, is amended to read as follows:

7604 NATIONAL EXAMINATION

- In addition to satisfying the educational requirement set forth in § 7602, an applicant shall receive a passing score on the Therapist Multiple-Choice Examination for Certified Respiratory Therapist (CRT) or the Registry Examination for Registered Respiratory Therapist (RRT) developed and administered by the National Board for Respiratory Care (NBRC). The passing score for the purposes of these rules shall be the passing score determined by the NBRC.
- Each applicant for a license by examination shall submit to the Board a completed application and the applicant's CRT or RRT examination results, which shall be certified or validated by the NBRC.
- An applicant for a license by examination who took and pass an NBRC examination required pursuant to § 7604.1 more than five (5) years prior to the date of the application shall be required to take and pass the examination again unless the applicant has continuously maintained valid credential as a Certified Respiratory Therapist (CRT) or Registered Respiratory Therapist (RRT) and such credential was obtained after July 1, 2002.

SECTION 7605, LICENSURE BY ENDORSEMENT, is amended to read as follows:

7605 LICENSURE BY ENDORSEMENT

- 7605.1 The Board may issue a license to practice respiratory therapy by endorsement to an applicant who:
 - (a) Is currently licensed to practice respiratory care in another state according to standards that were the substantial equivalent to the District's at the time of the licensing;

- (b) Has continually remained in good standing under the laws of another state with standards that the Board determines to be comparable to the requirements of the Act and this chapter;
- (c) Possess a valid and current certification as a Certified Respiratory Therapist (CRT) or Registered Respiratory Therapist (RRT), issued by the National Board for Respiratory Care (NBRC); and
- (c) Meets the other applicable requirements of D.C. Official Code § 3-1205.03.

SECTION 7606, RENEWAL, REACTIVATION, OR REINSTATEMENT OF A LICENSE; CONTINUING EDUCATION REQUIREMENTS, is amended to read as follows:

7606 RENEWAL, REACTIVATION, OR REINSTATEMENT OF A LICENSE; CONTINUING EDUCATION REQUIREMENTS

- 7606.1 Except as provided in § 7606.2, all applicants for the renewal, reactivation, or reinstatement of a license to practice respiratory therapy in the District shall demonstrate successful completion of approved continuing education units ("CEUs") in accordance with this section.
- 7606.2 This section does not apply to applicants for an initial license, nor to applicants for the first renewal of a license after the initial grant.
- To qualify for reactivation of a license to practice respiratory therapy, a person in inactive status, as defined in § 511 of the Act (D.C. Official Code § 3-1205.11), shall possess a valid and active credential as a Certified Respiratory Therapist (CRT) or Registered Respiratory Therapist (RRT).
- 7606.4 To qualify for reinstatement of a license, an applicant shall submit proof the following:
 - (a) Having successfully completed eight (8) approved CEUs for each year that the license remains expired and two (2) of the required CEUs shall be in ethics; and
 - (b) A current and valid credential as a Certified Respiratory Therapist (CRT) or Registered Respiratory Therapist (RRT), issued by the National Board for Respiratory Care (NBRC).
- 7606.5 To qualify for the renewal of a license, an applicant shall have completed sixteen (16) CEUs of approved continuing education programs or activities during the two (2)-year period preceding the date the license expires, which shall also meet the following requirements:

- (a) An applicant seeking to renew his or her license on or before January 31, 2019, shall have completed at least three (3) hours of ethics; or
- (b) An applicant seeking to renew his or her license after January 31, 2019 shall have completed two (2) hours of ethics and two (2) hours of LGBTQ continuing education.
- A CEU shall be valid only if it is part of a program or activity approved by the Board in accordance with § 7607.
- 7606.7 The Board may conduct a random audit of active licensees to determine compliance with the continuing education requirements and the requirement for continuously valid credential pursuant to § 7611. A licensee who is selected for audit shall submit satisfactory proof of continuing education compliance and possession of valid and active CRT or RRT credential within thirty (30) days of receiving the notice of his or her selection.

SECTION 7607, APPROVED CONTINUING EDUCATION PROGRAMS AND ACTIVITIES, is amended to read as follows:

7607 APPROVED CONTINUING EDUCATION PROGRAMS AND ACTIVITIES

- 7607.1 The Board may grant CEU credit for continuing education programs or activities that it deems to contribute to the growth or maintenance of competency in the practice of respiratory therapy and meets other applicable requirements of this section.
- 7607.2 The Board may grant CEU credit to an instructor or speaker at a seminar, workshop, or program that is approved by one of the organizations listed in § 7607.4 of this chapter for both preparation and presentation time, subject to the following restrictions:
 - (a) The maximum CEU credit granted for preparation time is equal to the presentation time;
 - (b) The maximum CEU credit that may be granted pursuant to this subsection is fifty percent (50%) of a requestor's CEU requirement;
 - (c) If a requestor has previously received CEU credit in connection with a particular presentation, the Board shall not grant CEU credit for a subsequent presentation unless it involves either a

different subject or substantial additional research concerning the same subject; and

- (d) The presentation shall have been presented during the period for which credit is claimed.
- 7607.3 The Board may grant CEU credit for authoring and publishing an article in a professional, peer-reviewed journal, a book or a chapter in a book, or a book review in a professional, peer-reviewed journal or bulletin provided that the article, book or chapter was published during the period for which credit is claimed..
- 7607.4 The Board shall grant CEU credit for a continuing respiratory care education seminar, workshop, or program shall be administered, sponsored, or approved by:
 - (a) The American Association of Respiratory Care (AARC);
 - (b) The Maryland/District of Columbia Society for Respiratory Care;
 - (c) A health care facility accredited by the Joint Commission;
 - (d) A college or university approved by an accrediting body recognized by the Council on Postsecondary Accreditation or the Secretary of the United States Department of Education; or
 - (e) Any of the following organizations provided that the training is related to respiratory care services:
 - (1) American Medical Association under Physician Category I;
 - (2) American Thoracic Society;
 - (3) American Association of Cardiovascular and Pulmonary Rehabilitation;
 - (4) American Heart Association;
 - (5) American Nurses Association;
 - (6) American College of Chest Physicians;
 - (7) American Society of Anesthesiologists;
 - (8) American Academy of Sleep Medicine;

- (9) The Accreditation Council for Continuing Medical Education (ACCME);
- (10) The American College of Cardiology; or
- (11) The American Lung Association.
- 7607.5 The Board shall not grant CEU credit for basic life support courses or training, or for CPR courses or training.

SECTION 7608, PRACTICE OF RESPIRATORY CARE BY STUDENTS OR APPLICANTS, is amended to read as follows:

7608 PRACTICE OF RESPIRATORY CARE BY STUDENTS OR APPLICANTS

- 7608.1 This section applies to:
 - (a) A student enrolled in an approved school or college as a candidate for a degree or a certificate in respiratory therapy; or
 - (b) An applicant whose first application for a license to practice respiratory therapy in the District has been submitted to the Board and a decision on the application is pending.
- A student may practice respiratory therapy only in accordance with the following provisions:
 - (a) A student may practice only in a hospital, nursing home, health facility, or health education center operated by the District or federal government or at a health care facility that the student's school or college determines to be appropriate for this purpose;
 - (b) A student shall be supervised at all times by a respiratory therapist licensed in the District who shall be present on site and available to supervise and oversee the student at all times;
 - (c) The supervisor shall be fully responsible for the supervised student's practice and may be subject to disciplinary action for any act or omission by the student that constitutes a violation of the Act or this chapter;
 - (d) A student may not receive payment or compensation of any nature either directly or indirectly for his or her practice of respiratory therapy; and

- (e) A student shall be subject to each of the applicable provisions of the Act and this chapter.
- An applicant may practice respiratory therapy only in accordance with the following provisions:
 - (a) An applicant may practice only under general supervision of a respiratory therapist licensed in the District who shall be fully responsible for the supervised applicant's practice and may be subject to disciplinary action for any act or omission by the applicant that constitutes a violation of the Act or this chapter;
 - (b) An applicant may not begin practicing respiratory therapy unless he or she has received express, written authorization from the Board, which may not be issued until the Board has satisfactorily reviewed the result of the applicant's criminal background check as provided by the Federal Bureau of Investigation, provided, however, that such temporary authorization to practice shall not limit the Board's authority to take any appropriate action based on the applicant's full criminal background check;
 - (c) An applicant's authorization to practice under this section shall not exceed ninety (90) days; provided, however, that the Board may grant an extension of this authorization for good cause;
 - (d) An applicant may be paid a salary or compensation for the hours worked;
 - (e) An applicant shall be subject to each of the applicable provisions of the Act and this chapter.
- 7608.4 If the Board finds that a student or applicant has violated the Act or this chapter, the Board may, in addition to any other disciplinary action permitted by the Act including denial of application, revoke, suspend, or restrict the authorization for the student or applicant to practice respiratory therapy.

SECTION 7609, STANDARDS OF CONDUCT AND ETHICS, is amended to read as follows:

7609 STANDARDS OF CONDUCT AND ETHICS

- 7609.1 A respiratory therapist shall:
 - (a) Practice medically acceptable methods of treatment;

- (b) Present his or her skills, training, scope of practice, certification, professional affiliations, or other qualifications in a manner that is not false or misleading;
- (c) Practice only within the scope of his or her competence, qualifications, and any authority under the law;
- (d) Continually strive to enhance the knowledge and skill set required to render quality respiratory care to each patient;
- (g) Promptly report to the Board any information relative to the incompetent, unsafe, illegal, or unethical practice of respiratory therapy or any violation of the Act or this chapter;
- (h) Uphold the dignity and honor of the profession and abide by its ethical principles;
- (i) Cooperate with other health care professionals;
- (j) Provide all services in a manner that respects the dignity of the patient, regardless of the patient's social or economic status, personal attributes, or health problems;
- (k) Refuse any offer of any gift from a patient or friend or relative of a patient for respiratory care provided to the patient; and
- (m) Abide by the National Clinical Practice Guidelines published by the American Association of Respiratory Care (AARC) and any subsequent guidelines published by the AARC.
- A respiratory therapist may utilize communication technology in standard patient care assessment and monitoring provided that the patient has provided written and informed consent specific to this manner of service and that the therapist has determined the following:
 - (a) This manner of service does not affect the quality of the service;
 - (b) The technology being used is fully secured and has been determined to safeguard the patient's confidentiality and privacy;
 - (c) The patient is sufficiently knowledgeable or familiar with the technology such that there would not be any difficulty or barrier to its effective utilization;
 - (d) This manner of service promotes continuity of care; and

(e) The patient is physically in the District at the time of the service.

SECTION 7610, SCOPE OF PRACTICE, is added to read as follows:

7610 SCOPE OF PRACTICE

- 7610.1 A respiratory therapist may practice only in a collaborative agreement with a licensed physician, a nurse practitioner, or a licensed physician assistant under supervision of a licensed physician.
- 7610.2 The practice of respiratory care includes the following:
 - (a) Direct and indirect respiratory care services that are safe, aseptic, preventive, and restorative to the patient;
 - (b) The practice of the principles, techniques, and theories derived from cardiopulmonary medicine;
 - (c) Evaluation and treatment of individuals whose cardiopulmonary functions have been threatened or impaired by developmental defects, the aging process, physical injury, disease, or actual or anticipated dysfunction of the cardiopulmonary system;
 - (d) Observation and monitoring of physical signs and symptoms, general behavior, and general physical response to respiratory care procedures, and determination of whether initiation, modification, or discontinuation of the treatment regimen is warranted;
 - (e) The transcription and implementation of a written or oral order, or both, pertaining to the practice of respiratory care;
 - (f) Evaluation techniques including cardiopulmonary functional assessments, gas exchange, the need and effectiveness of therapeutic modalities and procedures, and assessment and evaluation of the need for extended care and home care procedures, therapy, and equipment;
 - (g) Professional application of techniques, equipment, and procedures involved in the administration of respiratory care such as:
 - (1) Therapeutic and diagnostic gases (excluding general anesthesia);
 - (2) Prescribed medications for inhalation or direct tracheal instillation;

- (3) Nonsurgical intubation, maintenance, and extubation of artificial airways;
- (4) Advanced cardiopulmonary measures;
- (5) Chest needle decompression;
- (6) Cardiopulmonary rehabilitation;
- (7) Mechanical ventilation or physiological life support systems;
- (8) Collection of body fluids and blood samples for evaluation and analysis, including collection by intraosseous access;
- (9) Insertion of diagnostic arterial access lines, including large bore intravenous access; or
- (10) Collection and analysis of exhaled respiratory gases;
- (h) The clinical supervision of licensed respiratory care practitioners, respiratory care departments, or the provision of any respiratory care services;
- (i) The respiratory care clinical instruction or oversight of respiratory care students, while performing respiratory care procedures as part of their clinical curriculum; or
- (j) The teaching or instructing of others in the discipline of respiratory care and therapy.

SECTION 7611, MAINTENANCE OF VALID NATIONAL CERTIFICATION, is added to read as follows:

7611 MAINTENANCE OF VALID NATIONAL CERTIFICATION

7611.1 A licensed respiratory care practitioner shall maintain a continuously valid national certification by the National Board of Respiratory Care (NBRC).

SECTION 7699, DEFINITIONS, is amended as follows:

Section 7699.1 is amended as follows:

The definition of "Applicant" is struck and the following definitions of "Continuing education unit" and "CRT" are added after the definition of "Board":

Continuing education unit (CEU) – at least fifty (50) minutes of education, learning, or presentation time.

CRT – credential as a Certified Respiratory Therapist or achieving a passing score on the Therapist Multiple-Choice Examination for Certified Respiratory Therapist, developed and administered by the National Board for Respiratory Care ("NBRC").

Nurse Practitioner – A licensed registered nurse holding a certificate issued in accordance with Chapter 59 of Title 17 of the District of Columbia Municipal Regulations.

All persons desiring to comment on the subject of this proposed rulemaking should file comments in writing not later than thirty (30) days after the date of the publication of this notice in the *D.C. Register*. Comments should be sent to the Department of Health, Office of the General Counsel, 899 North Capitol Street, N.E., 5th Floor, Washington, D.C. 20002, or by email to <u>Angli.Black@dc.gov</u>. Copies of the proposed rules may be obtained from the Department at the same address during the hours of 9:00 AM to 5:00 PM, Monday through Friday, excluding holidays.