



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

**899 NORTH CAPITOL ST. NE – 2ND FLR.
WASHINGTON, DC 20002**

May 8, 2017

9:00 am - 12:00 pm

MEETING AGENDA



Open Session May 2017: Call to Order

OS-0508-01	SENIOR DEPUTY DIRECTOR'S REPORT	
OS-0508-02	EXECUTIVE DIRECTOR'S REPORT	
OS-0508-03	BOARD ATTORNEY'S REPORT	
OS-0508-04	CHAIRPERSON'S REPORT	
OS-0508-05	<u>OPEN SESSION MINUTES</u> Board Action: To consider the Open Session Minutes of the February 13, 2017 meeting.	
OS-0508-06	<u>UPDATE ON REGULATIONS</u> Board Action: Board Member Tim Mahoney will provide an update of the subcommittee's work on recommendations for amending the Municipal Regulations.	

ADJOURNMENT

At the conclusion of the public open session meeting and 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.



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

**899 NORTH CAPITOL ST. NE – 2ND FLR.
WASHINGTON, DC 20002**

February 13, 2017

9:00 am - 12:00 pm

**OPEN SESSION
MEETING MINUTES**



ATTENDANCE: February 13, 2017

BOARD MEMBERS:		
	CAROLYN WILLIAMS, CHAIRPERSON	Present
	TIMOTHY MAHONEY, BOARD MEMBER	Present
STAFF:	ROBIN Y. JENKINS, EXECUTIVE DIRECTOR	Present
	ERIC YEAGER, HEALTH LICENSING SPECIALIST	Present
	REBECCA ODRICK, INVESTIGATOR	Present
	PANRAVEE VONGJAROENRAT, ASSISTANT GENERAL COUNSEL	Present
	DR. SHARON LEWIS, SENIOR DEPUTY DIRECTOR	Present
VISITOR	Betty Akpan	Present
	Carolyn Kuchel	Present
	Brett Cox	Present



OPEN SESSION February 2017

Call to Order and Roll Call

OS-0213-01	<p>SENIOR DEPUTY DIRECTOR'S REPORT Board Action: Dr. Sharon Lewis thanked the Board Members for their hard work on behalf of the citizens of the District of Columbia and invited them to attend the DOH oversight hearing at the City Council on March 1, 2017.</p>	
OS-0213-02	<p>EXECUTIVE DIRECTOR'S REPORT Board Action: The Executive Director mentioned that the Mayor's Office of Talent and Appointments (MOTA) is still searching for candidates to fill vacancies on this Board. She also encouraged the Board Members to attend the March 1, 2017 oversight hearing at the City Council.</p>	
OS-0213-03	<p>BOARD ATTORNEY'S REPORT Board Action: The Board Attorney took a moment to review with the Board Members materials from Ethics and Boundaries Assessment Services, LLC (EBAS) as another tool boards can use for discipline of licensees.</p>	
OS-0213-04	<p>CHAIRPERSON'S REPORT Board Action: The Board Chair took a moment to wish all in attendance a Happy Valentine's Day.</p> <p>She then announced that she attended the Maryland/DC Society for Respiratory Care Installation of Officers and Awards Banquet on January 21, 2017 in Columbia, Md. The Society recognized Respiratory Therapists who were nominated and selected for various awards. The following Respiratory Therapists who work in DC hospitals were recognized:</p> <ol style="list-style-type: none"> 1. Nithin George – Nominated for Rookie of the Year 2. Karen Brant and Vanae Tood – Nominated for Neonatal/Pediatric Critical Care Therapists of the Year 	



	<ol style="list-style-type: none"> 3. Stefani Harvey – Nominated for Supervisor of the Year 4. Cherise Wilson – Nominated for Manager of the Year 5. Jean Williams – Received a Special Award for Service to the DC Board of Respiratory Care and retirement after more than 40 years as a Respiratory Therapist 6. Carolyn Williams, Chair of the DC Respiratory Care Board – Received the Award for Excellence in Respiratory Care <p>The Board Chair then discussed the following educational opportunities:</p> <ol style="list-style-type: none"> 1) The 2nd Annual Respiratory Therapy Spring Tune-Up by the Bay Conference on April 20, 2017 at Anne Arundel Hospital in Annapolis, Md. 2) The American Lung Association conference on April 27, 2017 at Martin’s West in Baltimore, Md. 	
OS-0213-05	<p><u>OPEN SESSION MINUTES</u> Board Action: The Open Session Minutes of the December 12, 2016 meeting were approved.</p>	
OS-0213-06	<p><u>REGULATIONS UPDATE</u> Board Action: The Board agreed that Member Tim Mahoney will head the subcommittee that will recommend amendments to update the regulations.</p> <p>The Open Session closed at 9:51 a.m.</p>	

**DEFINITION
OF THE PRACTICE
FROM "HEALTH OCCUPATIONS REVISION ACT" (HORA)
Revising April 2017**

(17A) "Practice of respiratory care" means the ~~performance in collaboration with a licensed physician, of actions responsible for the treatment, management, diagnostic testing, control, and care of patients with deficiencies and abnormalities associated with the cardiopulmonary system, including, but not limited to:~~

~~(A) Therapeutic and diagnostic use of medical gases, humidity, and aerosols, including the maintenance of associated apparatus;~~

~~(B) Administration of medications to the cardiorespiratory system; provision of ventilatory assistance, ventilatory control, including high frequency ventilation; postural drainage, chest physiotherapy, breathing exercises, and other respiratory rehabilitation procedures;~~

~~(C) Cardiopulmonary resuscitation and maintenance of natural airways, the insertion and maintenance of artificial airways and the transcription and implementation of a physician's written or verbal orders pertaining to the practice of respiratory care;~~

~~(D) Testing techniques utilized in respiratory care to assist in diagnosis, monitoring, treatment, and research; and~~

~~(E) Measurement of ventilatory volumes, pressures and flows, specimen collection of blood and other materials, pulmonary function testing pH and blood gas analysis, hemodynamic and other related physiological monitoring of the cardiopulmonary system, diagnostic evaluation, assessment, care and treatment, management, or rehabilitation of patients who have deficiencies and abnormalities which affect the pulmonary system and associated aspects of the cardiopulmonary or other systems.~~

**DISTRICT OF
COLUMBIA
MUNICIPAL
REGULATIONS
for
RESPIRATORY
THERAPY**

CHAPTER 76 RESPIRATORY THERAPY

Secs.

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 apply to any person who applies for or holds a license to practice respiratory therapy in the District of Columbia (“District”).

7600.2 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 midnight 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.

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 Committee on Allied Health Education and Accreditation (CAHEA), upon the recommendation of the Joint Review Committee for Respiratory Therapy Education (JRCRTE), or their successor organizations.

7602.2 For purposes of this section, proof satisfactory to the Board of successful completion of an educational program shall be an official transcript, notarized diploma, 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 National Board Examination (“NBE”) developed and administered by the National Board for Respiratory Care (“NBRC”). The passing score for the NBE for 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 NBE results, which shall be certified or validated by the NBRC.

7605 LICENSURE BY ENDORSEMENT

7605.1 The Board shall issue a license to practice respiratory therapy, by endorsement to an applicant who:

- (a) Is currently licensed or certified by another state;
- (b) Is 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; and
- (c) Pays the applicable fee.

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 not apply to applicants for an initial District of Columbia license, nor to applicants for the first renewal of a license granted by examination.

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.

7606.4 To qualify for reinstatement of a license, an applicant shall submit proof of having 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.

7606.5 To qualify for renewal of a license an applicant shall:

- (a) 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;
- (b) 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.

7606.6 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.

7606.7 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.

7606.8 The Board shall conduct a random audit of continuing education credits at the completion of each renewal period.

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 licensee 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, the Board shall only grant CEUs for continuing education programs and activities administered or approved by organizations listed in § 7607.8 of this chapter.
- 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 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.

- 7607.4 The Board may approve CEU credit for an applicant who serves as an instructor or speaker at a seminar, workshop, or program that is approved by one of the organizations listed in § 7607.8 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;
 - (b) The maximum number of approved CEUs that may be granted pursuant to this subsection is fifty percent (50%) of an applicant's CEU requirement;
 - (c) If an applicant has previously received a credit in connection with a particular presentation, the Board shall not grant 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.
- 7607.5 The Board may approve the following independent home studies and distance learning continuing education activities:
- (a) Publication of an article in a professional journal, publication of a book or a chapter in a book, or publication of a book review in a professional 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 teleconferences offered by accredited colleges or universities, or pre-approved by the AARC or MD/DC Society.
- 7607.6 The Board may grant continuing education credit under § 7607.5.(a) only if the applicant proves to the satisfaction of the Board that the work has been published or accepted for publication during the period for which credit is claimed.
- 7607.7 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.
- 7607.8 To qualify for approval by the Board, a continuing respiratory care education seminar, workshop, or program shall be administered 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
 - (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
 - (11) The American Lung Association
 - (12) The National Society for Cardiopulmonary Technologists

7607.9 The Board shall not grant CEU credit for basic life support courses or training, or for CPR courses or training.

7607.10 The applicant shall verify that a seminar, workshop, or program is approved by the Board pursuant to this section, prior to attending the seminar, workshop or program.

7608 PRACTICE OF RESPIRATORY CARE BY STUDENTS OR APPLICANTS

- 7608.1 This section shall apply to:
- (a) A student enrolled in an approved school or college as a candidate for a degree or a certificate in respiratory therapy; and
 - (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.
- 7608.2 A student or applicant may practice respiratory therapy only in accordance with the Act and this section.
- 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.
- 7608.4 An applicant may practice respiratory therapy 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 under the licensed practitioner's or physician's supervision and shall be subject to disciplinary action for any act or omission by the supervised student or applicant that constitutes 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.
- 7608.10 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, revoke, suspend, or restrict the privilege of the student or applicant to practice

respiratory therapy.

7609 STANDARDS OF CONDUCT AND ETHICS

7609.1 A **licensed respiratory care practitioner** 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;
- (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;
- (l) Wear an identifying tag or badge that includes the practitioner's full name and the words "licensed respiratory care practitioner" when practicing respiratory 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.

7610 SCOPE OF PRACTICE

7610.1 A respiratory therapist may practice only in collaborative agreement with a licensed physician, nurse practitioner, 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) The administration of prescribed analgesic agents including substances listed in Schedule IV as defined in Criminal Law Article, §5-405, Annotated Code of Maryland, by subcutaneous injection or inhalation for the performance of respiratory care procedures;
- (4) Nonsurgical intubation, maintenance, and extubation of artificial airways;
- (5) Advanced cardiopulmonary measures;
- (6) Chest needle decompression;
- (7) Cardiopulmonary rehabilitation;
- (8) Mechanical ventilation or physiological life support systems;
- (9) Collection of body fluids and blood samples for evaluation and analysis, including collection by intraosseous access;
- (10) Insertion of diagnostic arterial access lines, including large bore intravenous access; or
- (11) 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.

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).

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