

American Association for Respiratory Care
Board of Directors Meeting
November 29-30, 2007
Orlando, Florida

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American Respiratory Care Foundation
Activity Report
Fall 2007

Chair: Michael Amato

The Foundation presented the 41th **Respiratory Care** Journal Conference entitled “Meeting the Challenges of Asthma,” co-chaired by Neil MacIntyre, MD, FAARC and Timothy R. Myers, BS, RRT-NPS, convening on September 28-30, 2007 at the JW Marriott Camelback Resort & Spa in Scottsdale, Arizona. The 42nd **Respiratory Care** Journal Conference “Non-Invasive Ventilation in Acute Care: Controversies and Emergency Concepts” will be presented by Scott K. Epstein, MD
And Robert M. Kacmarek, PhD, RRT, FAARC on March 7-9, 2008. Site to be determined.

The following ARCF awards will be presented at the 53rd International Congress, December 1-4, 2007 in Orlando, Florida.

Achievement Awards

Robert L. Chatburn, RRT-NPS, FAARC Achievement	Forrest M. Bird Lifetime Scientific
Sergio Zuffo, PT Excellence in	Hector Leon Garza, MD Award for International Respiratory Care
Senator Michael D. Crapo	Dr. Charles H. Hudson Award for Cardiopulmonary Public Health
Claude Dockter, BS, RRT	Invacare Award for Excellence in Home Respiratory Care
Bruce K. Rubin, MD, FAARC	Sepracor Award for Excellence in Pulmonary Disease State Management

Fellowships

Kevin Ryan, BS	GlaxoSmithKline for Asthma Care Management Education
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Ken Thigpen, BS, RRT

Monaghan/Trudell for Aerosol
Technique
Development

Pavanasam Ramesh, MRCPCH

Respironics Non-Invasive Respiratory
Care

John S. Emberger, Jr., BS, RRT

Charles W. Serby COPD Research

Melanie A. Stein, RRT

VIASYS Healthcare for Neonatal and
Pediatric Therapists

Education Recognition Awards

Saamy Joseph, BS

William F. Miller, MD Postgraduate

Caitlin E. Fincher

Morton B. Duggan, Jr. Memorial

Education Recognition Awards (Continued)

Tsai-ying Wang

Jimmy A. Young Memorial

Melissa D. Hrinya

NBRC/AMP William W. Burgin, Jr.,
MD

John Salazar, BS, RRT

NBRC/AMP Gareth B. Gish, MS,
RRT Memorial

Rhonda Baumberger

NBRC/AMP Robert M. Lawrence,
MD

RESPIRATORY CARE Literary Awards

Raymond P. Tuttle, RRT

Allen DeVilbiss Best Paper

Mark H. Cohen, RRT

Albert J. Augustine, RRT

Dana F. Novotny, RRT

Edgar Delgado, RRT

Thomas A. Dongilli

John W. Lutz

Michael A. DeVita, MD

Anne E. Holland, PhD

IKARIA (formerly INO Therapeutics)
Best First Author

Linda Denehy, PhD

Catherine A. Buchan, BN

John W. Wilson, MBBS, PhD

2007 INTERNATIONAL FELLOWSHIP PROGRAM

November 18 – December 5, 2007

Arrive in the First City: Sunday, November 18

First City Rotation: Monday, November 19 – Friday, November 23

Second City Rotation: Monday, November 26 – Thursday, November 29

Arrive in Orlando, FL: Friday, November 30

AARC International Congress: Saturday, December 1 – Tuesday, December 4

Fellowship Program ends: Wednesday December 5

FELLOWS

First City/Host

Second City/Host

Gabriela Ferreyra, Turin, ITALY

Cleveland, OH
Doug Orens

Rochester, MN
Kris Hammel

Zujin Luo, Beijing, CHINA

Seattle, WA

Chicago, IL
Celeste Stubbs

Craig Leonard

Alda Marques, Coimbra, PORTUGAL
TN

Meriden, CT

Elizabethton,

Nancy Merkouriou

Douglas

Masini

FELLOWS (Continued)

First City/Host

Second City/Host

Valdone Miseviciene, Kaunas, LITHUANIA

Durham, NC
John Davies

Cincinnati, OH
Jerry Edens

Mohanumar Thekkinkattil, Coimbatore, INDIA

Kailua, HI
Ron Sanderson

Boise, ID
David Shuldes

Claudia Oliveira, Lisboa, PORTUGAL
NC
Sells

Philadelphia, PA
Raymond Malloy

Winston-Salem,
Rick

Jose Landeros, Santiago, CHILE

Macon, GA

Miami, FL

	Tom Madrin	Michelle Grassi
<i>Akira Tamaki</i> , Kobe, JAPAN	Loma Linda, CA	Omaha, NE
	Kate Gattuso	Jane Matsui
<i>Ronald Taylor</i> , Plymouth, ENGLAND	Lawrence, MA	Peoria, IL
Crawford-Jones	Jackie Long-Goding	Kelly
<i>Qixing Wang</i> , Shanghai, CHINA	Tucson, AZ	Chattanooga,
TN	Yvonne Lamme	Ernest Fraire

The Ventilator 5K

Respiratory Therapist, ***PUSH THAT VENT!***



No, this isn't "Extreme Makeover, Respiratory Care Edition." You won't find a new house at the end of the American Respiratory Care Foundation's upcoming Ventilator 5K.

What you will find, however, is a great way to raise much needed funds for respiratory needs in your own community while having a great time with colleagues and friends.

ARCF Trustee **Steven B. Nelson, MS, RRT, CPFT, FAARC**, explains in the following Q&A —

What is the Ventilator 5K, and why did the ARCF decide to have this event?

The basic premise is to assemble and register a team of pushers, obtain pledges for pushing a ventilator five kilometers, optionally make the ventilator look speedier, get media lined up to cover it, then “Push that vent!” -- it lacks some of the panache of “Move that bus!”, but you get the idea.

There are two main objectives: 1. Raise community awareness of respiratory disease by performing a public event, and 2. Raise money for the ARCF to support local grants for health promotion and disease prevention.

Who can participate in the event?

Teams can be formed by state societies, Better Breathers Clubs, hospital departments, etc. Teams will consist of at least five people, one designated as crew chief, the rest the pit crew. There is no maximum number — if 5,000 people get together and each one pushes one meter, great! There will be a minimum level of \$500 worth pledges to be obtained. Once the team has been registered, the crew chief will be responsible for setting out a 5K course.

What kind of ventilators can be used in the event?

Ventilators can be anything from an antique Puritan Bennett TV2P, Bird Mark 8, or Emerson, to the latest model in your hospital. The only requirement is that it must have wheels to allow it to be pushed — although the wheels do not need to be the original manufacturer’s wheels. They can be modified to make pushing easier. The vent cannot have any means of propulsion other than being pushed by hand. Each group has to provide its own ventilator.

Will there be prizes or awards? If so, what do you have planned?

There will be points awarded for most creative ventilator, most creative 5K course, best media coverage (adjusted for the size of the market), most money raised for the ARCF, and possibly a few more. We’ll be announcing the specific awards shortly.

How will the ARCF be using the money that is raised?

The money raised will be targeted at supporting local efforts. Since we have no idea how big a response we will get, it is a little hard to say what will be done specifically, but I envision most of the funds being sent out as grants for everything from sponsoring speakers at community meetings to direct assistance to patients. There will be a short and simple, expedited grant request process.

When will the event take place?

The individual 5Ks can be held any time, but all forms will have to be submitted to the ARCF office prior to November 10. The winners will be announced during the AARC annual business meeting at the 53rd Congress in Orlando, FL.

Coarc



MEMORANDUM

Date: November 2, 2007

To: AARC Board of Directors, Board of Medical Advisors and House of Delegates

From: Theodore Oslick, MD, President

Subject: NBRC Report

I appreciate the opportunity to provide you my final update on activities of the NBRC as President. The Board of Trustees will meet on November 10 to conduct its examination development activities and discuss business related items pertinent to the credentialing system, as well as elect a new slate of officers for 2008. The following details the current status of examinations and significant activities in which the Board and staff are currently involved.

Sleep Disorders Testing and Therapeutic Intervention Job Analysis

Job analysis meeting #1 for an examination for respiratory therapists performing sleep disorders testing and therapeutic intervention was conducted in Kansas City on August 3 and 4, 2007. The committee, chaired by Dr. Brian Carlin, reviewed background information and began development of the task list to be formalized as the job analysis survey which was released at the end of October. Other members of the job analysis advisory committee include Tom Smalling, PhD, RRT, RPFT, RPSGT (CoARC), Linda Napoli, RRT, RRT-NPS, RPFT (NBRC), Suzanne Bollig, RRT, RPSGT (AARC), Carie Smith, RRT, RPSGT (AARC), Mark Rogers, RRT (Viasys), Teri Barkoukis, MD (ATS), Kent Christopher, MD, RRT (NAMDR), Paul Selecky, MD (ACCP) and Alphonso Quinones, RRT (AARC). Survey responses are due by mid-December and the Board will then likely proceed to the test development process.

Respiratory Therapy Job Analysis

Surveys were mailed in August to 5,000 potential respondents each for the CRT and RRT Examinations, and to another 5,000 for response to a combined CRT/RRT survey instrument. Surveys were due to be returned by September 23, 2007. The job analysis committee will review the survey results at its November 2007 meeting which will yield new test specifications for the Entry Level CRT, Therapist Written and Clinical Simulation Examinations over the next year. The revised content based on this job analysis will be available in 2008 and will affect examinations administered in mid 2009 for the CRT Examination and early 2010 for the RRT Examinations.

Adult Critical Care Personnel Survey

The personnel survey for an adult critical care examination is underway. Postcard invitations to participate in the survey were mailed in early September to therapists and employers. We received 478 survey responses from therapists and 187 responses from employers by the cut-off date of October 12, 2007. The NBRC's Specialty Examinations Committee will review the personnel survey report in early 2008 and determine whether or not to recommend to the Board of Trustees to move to the next step in the examination development process – a job analysis.

16th Annual State Licensure Liaison Group Meeting

The NBRC continues to foster the partnership between voluntary and legal credentialing to ensure the CRT Examination remains the basis for licensure in all states and jurisdictions which regulate respiratory therapy practice. We hosted our largest State Licensure Liaison Group Meeting since its inception with 36 attendees from 30 states; we experienced excellent participation and discussion from the group. The CRT Examination continues to be the basis for licensure in all states (currently 48) that regulate the practice of respiratory therapy, as well as the District of Columbia and the territory of Puerto Rico. Only two states (Alaska and Hawaii) remain without any form of licensure or registration.

International and External Activities Report

The Board of Trustees has a long range goal to expand our international initiative to promote a worldwide standard for development of credentialing examinations. To that end, Board and staff representatives continue to represent the NBRC on the international front by attending the ERS meeting and responding to inquiries from various countries interested in establishing a certification program. We also continue our support of the Latin American Board for Professional Certification in Respiratory Therapy (LABPCRT), including facilitating an agreement between the LABPCRT, AMP and Spain and adding Chile to the list of countries participating in the LABPCRT. Efforts are also being made to include Peru in the LABPCRT in the near future.

Board and staff representatives continue to develop our relationship with our sponsoring organizations through attendance at the respective annual meetings (AARC, ASA, ATS, ACCP), as well as ongoing communication through other mechanisms regarding topics of mutual interest including patient care issues and the licensing of sleep technologists and other state licensure specific areas of concern.

Continuing Competency Program

We have fully implemented the Continuing Competency Program with the first group of credentials subject to expiration having occurred in July 2007. An online Continuing Education (CE) submission program was developed and released earlier this year, whereby credentialed practitioners subject to the CCP can enter their CE information on an ongoing basis. The table below indicates the number of credentials subject to expiration by month, the number renewed by CE vs. by taking a higher level examination, the number that failed to comply, and the number audited.

	Total subject to expiration	Renewed by CE	Renewed by Exam	Failed to Comply	Audited
July	481	253	98	130	6
August	445	249	91	105	6
September	417	263	57	97	6
October	366	226	39	101	4

December 31, 2007 Deadline/Eligibles Mailings

The deadline for advanced program graduates having earned the CRT credential and/or taken and/or passed a portion of the Registry Examination prior to January 1, 2005 to earn the RRT credential is quickly approaching. We have seen an increased number of applicants for the RRT Examination this year likely because of this impending deadline, but anticipate there will be a significant number who do not comply. At last run, we estimated about 14,000 individuals who fall into this category of whom approximately 6,000 have taken and/or passed a portion of the Registry Examination. An eligibles mailing has been made every quarter this year, with the last one being mailed in October, outlining the deadline and the ramifications for those individuals who are affected by this policy.

2007 Examination and Annual Renewal Participation

Receipt of applications for the credentialing examinations has exceeded those received in 2006. Through the end of October, over 29,000 applications had been received. Annual renewal has exceeded actual 2006 numbers. Through the end of October, nearly 28,000 credentialed practitioners had renewed their active status with the NBRC.

Examination Statistics – January 1 –October 31, 2007

The NBRC has administered over 26,000 examinations across all credentialing programs through October 31, 2007. Pass/fail statistics for the respective examinations follow:

<u>Examination</u>	<u>Pass Rate</u>	
<u>CRT Examination</u> – 9,654 candidates		
	<u>Entry Level</u>	
<u>Advanced</u>		
First-time Candidates	76.0%	80.2%
Repeat Candidates	25.9%	31.3%
<u>Therapist Written Examination</u> – 7,983 candidates		
First-time Candidates	71.4%	
Repeat Candidates	36.6%	
<u>Clinical Simulation Examination</u> – 7,903 candidates		
First-time Candidates	60.9%	
Repeat Candidates	51.5%	
<u>Neonatal/Pediatric Examination</u> – 515 candidates		
First-time Candidates	73.7%	
Repeat Candidates	47.0%	
<u>CPFT Examination</u> – 240 candidates		
First-time Candidates	66.7%	
Repeat Candidates	45.8%	
<u>RPFT Examination</u> – 74 candidates		
First-time Candidates	60.7%	
Repeat Candidates	41.2%	

Your Questions Invited

If you have any questions or concerns about any credentialing related matter, the NBRC and I are interested in providing whatever information you need to be fully informed. In addition, the Board of Trustees is committed to maintaining positive relationships with the AARC and all of the sponsoring organizations of the NBRC, as well as the accrediting agency. We have significant issues to consider in the future, and I am confident that by working together and promoting understanding of the topics under discussion we will continue to advance the profession and ensure the integrity of the credentialing process.