AMERICAN ASSOCIATION FOR RESPIRATORY CARE Board of Directors Meeting

July 20, 2018 • San Antonio, TX

Minutes

Attendance

Brian Walsh, PhD, RRT, FAARC, President

Karen Schell, DHSc, RRT-NPS, RRT-SDS, RPFT, RPSGT, AE-C, CTTS, President-elect

Frank Salvatore, MBA, RRT, FAARC, Past President

Sheri Tooley, BSRT, RRT-NPS, CPFT, AE-C, VP External Affairs

Natalie Napolitano, MPH, RRT-NPS, AE-C, CTTS, FAARC, VP Internal Affairs

Lynda Goodfellow, EdD, RRT, FAARC, Secretary/Treasurer

Carl Hinkson, MS, RRT-NPS, FAARC

Cheryl Hoerr, MBA, RRT, CPFT, FAARC

John Lindsey, Jr., MEd, RRT-NPS, FAARC

Doug McIntyre, MS, RRT, FAARC

Timothy Op't Holt, EdD, RRT, AE-C

Susan Rinaldo Gallo, MEd, RRT, CTTS, FAARC

Georgianna Sergakis, PhD, RRT, FAARC

Steve Sittig, BSRT, RRT-NPS, FAARC

Deb Skees, MBA, RRT, CPFT

Pattie Polakow, BS, RRT

Lisa Trujillo, DHSc, RRT

John Wilgis, MBA, RRT

Consultants

Dianne Lewis, MS, RRT, FAARC, President's Council President Cam McLaughlin, BS, RRT, FAARC, Parliamentarian Jakki Grimball, MA, RRT, AE-C, Past Speaker

Excused

Lori Conklin, MD, BOMA Chair

Staff

Tom Kallstrom, MBA, RRT, FAARC, Executive Director

Tim Myers, MBA, RRT-NPS, FAARC, Chief Business Officer

Doug Laher, MBA, RRT, FAARC, Associate Executive Director

Tim Myers, MBA, RRT-NPS, FAARC, Associate Executive Director

Shawna Strickland, PhD, RRT-NPS, AE-C, FAARC, Associate Executive Director

Anne Marie Hummel, Associate Executive Director

Kris Kuykendall, Executive Administrative Assistant

CALL TO ORDER

President Brian Walsh called the meeting of the AARC Board of Directors to order at 9:10am CDT. President Walsh asked Board members to introduce themselves. Secretary/Treasurer Lynda Goodfellow called the roll and declared a quorum. Students who were visiting the Board meeting were introduced.

DISCLOSURE

President Walsh reminded members of the importance of disclosure and potential for conflict of interest and directed them to review the COIs in the AARConnect Board of Directors library.

APPROVAL OF MINUTES

Susan Gallo moved to approve the minutes of the March 24, 2018 meeting of the AARC Board of Directors.

Motion carried

Susan Gallo moved to approve the minutes of the March 25, 2018 meeting of the AARC Board of Directors.

President Walsh moved to add the horizon goals to the meeting minutes of March 25, 2018.

Motion carried

CONSENT AGENDA

President Walsh explained that this Board meeting would include a Consent Agenda.

President Walsh asked Board members if they had any questions regarding any of the reports without recommendations.

President Walsh informed the Board that the Vision Grant Committee and Ad Hoc Committee on BS Entry to Practice reports would be removed from the Consent Agenda.

President Walsh asked Board members if they wish to move any consent agenda items to the regular agenda for further discussion.

Natalie Napolitano moved to accept the Consent Agenda as modified.

Motion carried

GENERAL REPORTS

President

President Walsh gave highlights of his submitted report.

Natalie Napolitano moved to ratify Lori Shoman on the AARC Bylaws Committee for Gary Smith until he can resume his duties.

Motion carried

Past President

Past President Frank Salvatore gave highlights of his written report.

Advocacy & Government Affairs

Anne Marie Hummel reported on the status of our telehealth pilot which will be called the "Better Respiration through Expanding Access to TeleHealth Act (BREATHE Act)." The bill is expected to be dropped soon and a Virtual Lobby Campaign will be planned accordingly.

Erika Miller of CRD joined the meeting via phone and explained some of the recent bills in Congress related to respiratory therapists.

Executive Director

Tom Kallstrom gave highlights of his written report. He announced the keynote speaker for Congress would be Z Dogg, MD. Steve Nelson retired June 21 and his position should be filled over the summer. Ada Morton is the new senior accountant and doing spectacular work. Financial statements are almost caught up.

Tom Kallstrom reviewed the Executive Office referrals from the last Board of Directors meeting.

RECESS

President Walsh called a recess of the AARC Board of Directors meeting at 10:15am CDT.

RECONVENE

President Walsh reconvened the meeting of the AARC Board of Directors at 10:30am CDT.

House of Delegates

Speaker Keith Siegel gave the Board a verbal update to his submitted written report.

OLD BUSINESS

Frank Salvatore led a discussion regarding the Mission and Vision development from the Spring meeting and reviewed the strategies for each business unit.

Susan Gallo moved to accept <u>FM 18-2-16.1</u> "That the AARC Board of Directors ratify the new mission and vision statement – Mission: *The AARC is the foremost professional association promoting respiratory therapists.* Vision: *The AARC advances professional excellence and science in the practice of respiratory therapy, serving the profession, patients, caregivers, and the public.*"

Motion carried

Susan Gallo moved to accept <u>FM 18-2-16.2</u> "That the AARC Board of Directors ratify as presented the horizon goals and strategies listed for each business unit."

Motion carried

(see Attachment "A")

Frank Salvatore moved to accept <u>FM 18-2-16.3</u> "That the AARC Board of Directors task the AARC Executive Office to work on tactical objectives for the business unit strategies and present a preliminary report at the December 2018 Board meeting and complete and prioritize the tactics for all strategies at the March 2019 Board meeting."

Motion carried

Karen Schell moved to accept <u>FM 18-2-16.4</u> "That the AARC Board of Directors task the Executive Office with updating all publications with the newly ratified Mission and Vision Statements."

Karen Schell withdrew her floor motion. Bylaws must be changed. It was suggested that the Bylaws no longer include Mission and Vision Statement.

Natalie Napolitano moved to accept <u>FM 18-2-16.5</u> "That the AARC Board of Directors task the AARC Executive Office with communication to the State Society presidents and House of Delegates representatives the ratified horizon goals and strategies no later than December 2018."

Motion carried

NEW BUSINESS

Policy BOD.027 – Policy for Surveys Conducted by the Association

John Wilgis moved to refer Policy BOD.027 to the Executive Committee and Section Chairs to determine further policy development and implementation and report back at the December 2018 Board meeting.

Motion carried

RECESS

President Walsh called a recess of the AARC Board of Directors meeting at 11:50am CDT.

JOINT SESSION

Joint Session was called to order at 1:35pm CDT. Lynda Goodfellow called roll and declared a quorum.

President Walsh presented his president report and focused on membership.

Anne Marie Hummel provided updates to her written submitted report on Advocacy & Government Affairs.

Elections Committee Chair Jim Lanoha presented the slate of nominees for the election ballot

AARC Directors at Large (4 slots to be filled)

- Dana Evans
- Jakki Grimball
- John Lindsey
- Curt Merriman
- Raymond Pisani
- Debra Skees
- Pattie Stefans
- Kari Woodruff

Secretary - Treasurer

- Lynda Goodfellow
- Gary Wickman

Vice President - Internal

- Cheryl Hoerr
- Lisa Trujillo

Vice President - External

- Tim Op't Holt
- Sheri Tooley

Neo-Peds Chair

Bradley Kuch

Sleep Section Chair

• Jessica Schweller

Post-Acute Care Chair

• Adam Mullaly

Executive Session was called to order at 2:30pm CDT and concluded at 2:45pm CDT.

President Walsh adjourned Joint Session at 2:50pm CDT.

RECONVENE

President Walsh reconvened the meeting of the AARC Board of Directors at pm 3:00pm CDT.

Karen Schell moved to accept the General Reports as presented.

Motion carried

NEW BUSINESS CONTINUED

Policy CT.003 – Elections Committee – Nominations Process

Tom Kallstrom will discuss the policy with Tony Dewitt.

RECESS

President Walsh called a recess of the AARC Board of Directors meeting at 4:15pm CDT.

RECONVENE

President Walsh reconvened the meeting of the AARC Board of Directors at 4:25pm CDT.

Doug Laher inquired if the Board would like him to continue discussions with Chicago for Congress 2022 in December. The Board was split. President Walsh suggested Jakki Grimball ask the House of Delegates for their thoughts. They were not in favor of Chicago in 2022. Discussions with Chicago have ceased.

OLD BUSINESS CONTINUED

Frank Salvatore moved to accept <u>FM 18-2-16.6</u> That the AARC Board of Directors advise the AARC Bylaws Committee of a proposed bylaws amendment to 1.) delete current Article II, Section 1 and 2.) replace with "The AARC is the foremost professional association promoting respiratory therapists. The AARC advances professional excellence and science in the practice of respiratory therapy, serving the profession, patients, caregivers, and the public."

Motion carried

NEW BUSINESS CONTINUED

Policy CA.008 – AARC Affiliate AARConnect Community Policy/Procedure President Walsh led a discussion about adding an item to the policy from a member suggestion, but the Board decided against it. No changes to be made to this policy.

RECESS President Walsh called a recess of the AARC Board of Directors meeting at 5:00pm CDT.	
Meeting minutes approved by AARC Board of Direction	rectors as attested to by:
Lynda Goodfellow AARC Secretary/Treasurer	Date

Attachment "A"

Strategic Planning Committee – Strategic Plan 2019-2020

Strategic Planning Committee

Strategic Plan – 2019-2020

Current AARC Mission Statement: The American Association for Respiratory Care (AARC)

will continue to be the leading national and international

professional association for respiratory care

Proposed New Mission Statement: <u>The AARC is the foremost professional association</u>

promoting respiratory therapists.*

Current AARC Vision Statement: The AARC will encourage and promote professional

excellence, advance the science and practice of respiratory care, and serve as an advocate for patients, their families, the public, the profession and the

respiratory therapist.

Proposed New Vision Statement: The AARC advances professional excellence and science

in the practice of respiratory therapy, serving the profession, patients, caregivers, and the public.*

* - Although the above has been ratified by the AARC Board of Directors, it needs to go through the AARC By-laws amendment process to become active and will be listed as "proposed" until then.

Advocacy:

1. Respiratory care provided by Respiratory Therapists is recognized and supported in all healthcare settings.

Strategy:

- 1.1. Promote RTs in federal policies as the best-educated, competency-tested healthcare professionals to provide respiratory care services.
- 1.2. Respiratory Therapists will advocate locally, nationally, and globally on issues facing our patients, our practice, and our members.
- 1.3. Respiratory Therapists will be recognized for providing the highest quality and the safest care of patients with cardiopulmonary conditions
- 1.4. Collaborate with other like-minded organizations to improve the health of the communities and to reinforce the value of RTs.
- 1.5. Introduce legislation as appropriate to advance the profession.

Communications/marketing:

2. AARC consistently delivers the right message, to the right audience, at the right time, through the right channel.

Strategy

- 2.1. Identify all key stakeholders and create targeted messaging for each audience.
- 2.2. The AARC will market the value of the Respiratory Therapist to all customers and stakeholders. (Positioning)
- 2.3. Consistently make the content and value of the Board and the Association's work visible to the members.
- 2.4. AARC effectively deploys all possible channels for communicating to its stakeholders.
- 2.5. AARC Times connects the association to its members and inspires engagement.
- 2.6. The Respiratory Care Journal is the premier scientific publication for respiratory care.
- 2.7. The Respiratory Care Education Annual Journal is the premier education publication for respiratory care.
- 2.8. AARC social media channels will be used to create engagement and interactivity with multiple targeted audiences.

Education/professional development:

3. AARC offers engaging, valuable professional education that advances the professional practice of respiratory therapy and supports elevation of the profession.

Strategy

- 3.1. The AARC will explore innovative ways to educate the workforce that continually increases the level of competency within the profession.
- 3.2. Increase the educational levels of the profession.
- 3.3. Provide education on acute, chronic and co-morbid conditions related to cardiopulmonary health.
- 3.4. Promote educational opportunities to both members and nonmembers to drive maximum use and engagement.

Events/Meetings:

4. The AARC is recognized as the #1 provider of world-class educational and research conferences that attract respiratory therapists and inter-professional audiences.

Strategy

4.1. The AARC will find ways to make conferences more accessible to all members of our profession.

4.2. The AARC will explore ways to increase domestic and international conference attendees annually.

Membership:

5. AARC has an engaged, diverse membership comprised of a majority of respiratory therapists.

Strategy

- 5.1. Create and communicate the value of AARC membership to each community of interest.
- 5.2. Engage and Increase involvement of AARC members through a variety of media.
- 5.3. Monitor membership patterns and retention to identify opportunities for growth.
- 5.4. Analyze RT populations that do not join to understand unmet needs and opportunities.

Revenue and finance:

6. The AARC produces ample revenues from diverse sources, which are managed to the highest standards.

Strategy

- 6.1. Secure new sources of revenue, consistent with mission, that supplements education, sponsorship, and membership as the majority of income.
- 6.2. Grow program offerings, membership numbers and rates to ensure ample revenue to tackle an ever-changing profession, to support extensive surveys and to fund exploratory grants demonstrating the value of additional education and professional pathways.
- 6.3. The AARC will work to be the leading manager and provider of respiratory care related industry sponsored grants.