

AMERICAN ASSOCIATION FOR RESPIRATORY CARE

Board of Directors Meeting

March 25, 2018- Grapevine, TX

Minutes

Attendance

Brian Walsh, PhD, RRT-NPS, RRT-ACCS, AE-C, RPFT, 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 Stefans, BS, RRT
Lisa Trujillo, DHSc, RRT

House Officers

Keith Siegel, MBA, RRT, CPFT, Speaker
Teri Miller, MEd, RRT, CPFT, Speaker-elect
Kerry McNiven, RRT, Secretary
Dana Evans, MHA, RRT-NPS, Treasurer

Consultants

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

Excused

John Wilgis, MBA, RRT

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
Steve Nelson, MS, RRT, FAARC, Associate Executive Director
Shawna Strickland, PhD, RRT-NPS, AE-C, FAARC, 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 8:10am CDT. Secretary-Treasurer Lynda Goodfellow called the roll and declared a quorum.

Bylaws Committee

Natalie Napolitano moved to accept Recommendation 18-1-9.1 “That the AARC Board of Directors find that the Iowa Society for Respiratory Care Bylaws are not in conflict with the AARC Bylaws.”

Motion carried

Natalie Napolitano moved to accept Recommendation 18-1-9.2 “That the AARC Board of Directors find that the Maine Society for Respiratory Bylaws are not in conflict with the AARC Bylaws.”

Motion carried

Natalie Napolitano moved to accept Recommendation 18-1-9.3 “That the AARC Board of Directors find that the Arizona Society for Respiratory Care Bylaws are not in conflict with the AARC Bylaws.”

Motion carried

Natalie Napolitano moved to accept Recommendation 18-1-9.4 “That the AARC Board of Directors find that the North Dakota Society for Respiratory Care Bylaws are not in conflict with the AARC Bylaws.”

Motion carried

Natalie Napolitano moved to accept Recommendation 18-1-9.5 “That the AARC Board of Directors find that the Tennessee Society for Respiratory Care Bylaws are not in conflict with the AARC Bylaws.”

Motion carried

Program Committee

Natalie Napolitano moved to accept Recommendation 18-1-15.1 “That the AARC Board of Directors approve Bonita Springs, FL and the Hyatt Regency Coconut Pointe Resort & Spa as the host city/hotel to the 2021 Summer Forum.”

Motion carried

Natalie Napolitano moved to accept Recommendation 18-1-15.2 “That the AARC Board of Directors approve the following members for the 2018 AARC Student Sputum Bowl Committee: Renee Wunderley – Committee Chair, Sherry Whiteman - Score Keeper / Time Keeper, Angie Switzer – Moderator / Question Writer / Score Keeper / Time Keeper, Rick Zahodnic - Moderator / Question Writer / Score Keeper / Time Keeper, 1-2 Volunteer committee helpers.”

Motion carried

Frank Salvatore moved to accept the Standing Committee Reports as presented.

Motion carried

SPECIALTY SECTION REPORTS

Susan Gallo moved to accept the Specialty Section Reports as presented.

Motion carried

SPECIAL COMMITTEE REPORTS

International Committee

Natalie Napolitano moved to accept Recommendation 18-1-23.1 “That the AARC investigate methods of teaching international members how to renew their membership.”

Lynda Goodfellow moved to refer to the Executive Office.

Motion carried

Natalie Napolitano moved to accept Recommendation 18-1-23.2 “That the AARC initiate a marketing campaign directed towards past international members and that the campaign includes and highlight the previously approved membership rates based on income levels where potential members reside.”

Lynda Goodfellow moved to refer to the Executive Office.

Motion carried

Natalie Napolitano moved to accept Recommendation 18-1-23.3 “That the AARC offer country specific list-serves as a benefit to members from countries that have International Affiliate Status.”

Natalie Napolitano moved to refer back to the International Committee to develop a policy.

Motion carried

Natalie Napolitano moved to accept Recommendation 18-1-23.4 “That the AARC in collaboration with the ICRC to develop resources aimed at advancing the practice of respiratory care outside the US and at developing resources to assist with advocating for development of the profession in other countries.”

Frank Salvatore moved to refer back to the International Committee for development and report back at the 2018 Fall meeting.

Frank Salvatore moved to withdraw his motion.

Natalie Napolitano moved to refer to the president-elect.

Motion carried

Natalie Napolitano moved to accept Recommendation 18-1-23.5 “That the AARC offer reduced rates for educational products, registration for meetings, and all other products based upon the income levels where potential international members reside and that these discounts be highlighted in marketing campaign presented in recommendation 18-1-23.2.”

Motion defeated

Position Statement Committee

Natalie Napolitano moved to accept Recommendation 18-1-26.1 “That the position statement entitled ‘Respiratory Therapist Education’ (11/2015) with noted revisions (language to be removed appears as ~~striketrough~~ and language to be inserted appears as **bold and underlined**) be approved.”

Motion carried

Natalie Napolitano moved to accept Recommendation 18-1-26.2 “That the position statement entitled ‘Telehealth and Respiratory Therapy’ (04/2013) with noted revisions (language to be removed appears as ~~strike through~~ and language to be inserted appears as **bold and underlined**) be approved.”

Motion carried

Natalie Napolitano moved to accept Recommendation 18-1-26.3 “That the position statement entitled ‘Home Respiratory Care Services’ (07/13) be approved without revisions, and the words ‘Reviewed 03/18’ be added to the date list at the bottom of the document.”

Motion carried

Natalie Napolitano moved to accept Recommendation 18-1-26.4 “That the issue paper entitled ‘Utilization in Respiratory Care’ (no date) be retired.”

Motion carried

Vision Grant Committee

Natalie Napolitano moved to accept Recommendation 18-1-22.1 “That the AARC Board of Directors accept and approve the LOI and application guidelines for 2018 as presented.”

Motion carried

Natalie Napolitano moved to accept the Special Committee Reports as presented.

Motion carried

SPECIAL REPRESENTATIVES REPORTS

Coalition for Baccalaureate and Graduate Respiratory Therapy Education (CoBGRTE)

Sheri Tooley moved to accept Recommendation 18-1-68.1 “That the AARC Board of Directors appoint a CoBGRTE representative to the Ad Hoc Committee on Advanced Practice RT Practices, Credentialing, and Education.”

Frank Salvatore moved to refer to President Walsh to discuss with CoBGRTE President Shelledy.

Motion carried

Sheri Tooley moved to accept the Special Representatives Reports as presented.

Motion carried

RECESS

President Walsh recessed the meeting of the AARC Board of Directors at 9:55am CDT.

RECONVENE

President Walsh reconvened the meeting of the AARC Board of Directors at 10:05am CDT.

NBRC Report

NBRC Executive Director Lori Tinkler and NBRC President Kathy Fedor gave highlights of their written report and answered questions from Board members.

Life Membership Nominee

Karen Schell moved to nominate Shelley Mishoe– nominated by Karen Schell.

Motion carried

Honorary Member Nominee

Karen Schell moved to nominate Grace Anne Dorney Koppel – nominated by Frank Salvatore.

Motion carried

Legends of Respiratory Care Nominee

Karen Schell moved to nominate Barry Shapiro, MD - nominated by Doug McIntyre.

Motion carried

Karen Schell moved to nominate Paul Selecky - nominated by Sheri Tooley.

Motion carried

Karen Schell moved to nominate Joseph Priestly - nominated by Frank Salvatore.

Motion carried

Karen Schell moved to nominate Dr. Robert Aranson, Sr. - nominated by Keith Siegel.

Motion carried

Karen Schell moved to nominate Dr. Edward Levine - nominated by Frank Salvatore.

Motion carried

ARCF AWARD NOMINEES

The Board brought forth the following nominees for the ARCF Awards in 2018:

Mitch Barron Clinical Excellence in Aerosol and Airway Clearance Therapies

Karen Schell moved to nominate Arzu Ari – nominated by Susan Gallo.

Motion carried

Forrest M Bird Lifetime Scientific Achievement Award

Karen Schell moved to nominate Alex Adams – nominated by Deb Skees.

Motion carried

Charles H. Hudson Award for Cardiopulmonary Public Health

Karen Schell moved to nominate Suzan Michelle Collins – nominated by Keith Siegel.

Motion carried

Mike West, MBA, RRT Patient Education Award

Karen Schell moved to nominate Kim Bennion – nominated by Lisa Trujillo.

Motion carried

Thomas L. Petty, MD Invacare Award for Excellence in Home Respiratory Care

Karen Schell moved to nominate John Tamasitis – nominated by Natalie Napolitano.

Motion carried

Karen Schell moved to destroy the ballots.

Motion carried

Ad Hoc Committee on Advanced Practice RT Practices, Credentialing, and Education

Sheri Tooley moved to accept Recommendation 18-1-31.1 “That the AARC Board of Directors fund an expanded needs assessment to determine geographic location, physician specialty, and density of workforce need for non-physician advanced practice providers explicitly trained to provide care to patients afflicted with cardiopulmonary disease.”

Lynda Goodfellow moved to make a friendly amendment to add to the end “through the proposed Option B in the Phase II Proposal from JBS International.”

Motion carried

UNFINISHED BUSINESS

CoBGRTE referral to President-elect:

17-3-68.2 “That the AARC and CoBGRTE jointly sponsor a research project that would document the value of attaining a baccalaureate and/or graduate degree.”

Frank Salvatore moved that the president-elect work with the president to put together a committee to work with CoBGRTE on a research collaboration idea and report back by February 15, 2018.

Result: President-elect Karen Schell contacted Georgiana Sergakis (Education Chair) to assist in helping find key individuals from CoBGRTE to assist with the projects. Will provide verbal update at the meeting.

Karen Schell and Georgianna Sergakis handed out a “Collaboration Plan for Research between AARC & CoBGRTE” and reviewed it with the Board of Directors.

Original motion (17-3-68.2) carried

Lynda Goodfellow moved to accept the Ad Hoc Committee reports as presented.

Motion carried

Lynda Goodfellow moved to accept the Other Reports as presented.

Motion carried

Tabled ELSO recommendations:

Natalie Napolitano moved to accept 17-3-69.1 “That FM17-2-83.1 (Natalie Napolitano moved that the VP of External Affairs discuss with the ELSO rep to provide specific information as to the barriers and the states these are occurring in and so we can provide assistance up to and including a joint position statement with ELSO and suggested RT state licensure wording structures.) be tabled until the April 2018 BOD meeting.”

Motion defeated

Tabled ECMO Specialist recommendation:

Natalie Napolitano moved to accept **FM16-3-26.1** “That the Position Statement/Issue Paper Committee develop a resource for best practices to include licensure requirements for practice of the respiratory therapist as an ECMO specialist.” Natalie Napolitano moved to keep it tabled until Spring 2018 Board meeting.

Motion defeated

FM 18-1-83.1 Natalie Napolitano moved “That the AARC Board of Directors develop a joint issue paper with ELSO entitled ‘The Respiratory Therapist as an ECMO Specialist’ and that three members from the AARC be appointed to a joint working group.”

Motion carried

Recommendation 17-3-26.6 “That the section of BOD Policy CT.008, Amplification Statement # 6 that reads ‘Each statement or paper will begrouped in categories such (as) ethics and human rights, disease, consumer advocacy, practice, quality or safety.’ be clarified providing the purpose of the categorization and how the categories are to be used by the AARC.”

Referred to Executive Office with an E-vote by 1/15/2018.

Tim Myers created the document, discussed with AARC president, past president, and president-elect on a conference call. President Brian Walsh sent to Position Statement Cahir Pat Doorley. No E-vote took place.

Lynda Goodfellow moved to accept the document as presented.

Motion carried

(See Attachment “A”)

FM17-2-83.2 “To identify managers who found a way to convince their Human Resources departments to hire only BS graduates and to share with other managers how to make these changes through AARC initiatives.”

Cheryl Hoerr to operationalize (from Oct 2017 meeting).

Cheryl Hoerr will bring back an action plan at the Summer 2018 meeting.

FM17-2-83.3 “To identify at least 6 associate degree program directors in Category IV (CoARC report) and develop best practices to help them move to Category III.”

Georgianna Sergakis to operationalize (from Oct 2017 meeting).

Lynda Goodfellow moved to refer to the Ad Hoc Committee on BS Entry to Practice Collaborative.

Motion carried

NEW BUSINESS

Ad Hoc Committee on BS Entry to Practice Collaborative

Lynda Goodfellow moved to accept **Recommendation 18-1-29.1** “That the AARC Board of

Directors ratify the Ad Hoc Committee on BS Entry to Practice Collaborative.”

Motion carried

Lynda Goodfellow moved to accept Recommendation 18-1-29.2 “That the AARC Board of Directors approve the BS Entry to Practice Collaborative ‘Recruitment’ work group plan to survey current baccalaureate programs regarding successes, challenges and best practices with progress reports to be reviewed at the 2018 summer and fall BOD meeting.”

Motion carried

Lynda Goodfellow moved to accept Recommendation 18-1-29.3 “That the AARC Board of Directors approve the BS Entry to Practice Collaborative ‘Category II and Category III’ work group plan to successfully convert AS programs to BS programs with progress reports to be reviewed at the 2018 summer and fall BOD meeting.”

Motion carried

Lynda Goodfellow moved to accept Recommendation 18-1-29.4 “That the AARC Board of Directors approve the BS Entry to Practice Collaborative ‘80% BSRT by 2020’ work group plan and solicit AARC Vision Grant RFPs that demonstrate improved effectiveness and patient outcomes of baccalaureate prepared respiratory therapists. Progress reports will be reviewed at the 2018 summer and fall BOD meeting.”

Motion carried

RECESS

President Walsh recessed the meeting of the AARC Board of Directors at 12:06pm CDT.

RECONVENE

President Walsh reconvened the meeting of the AARC Board of Directors at 12:30pm CDT.

POLICY REVIEW

MP.001 – Membership – General Operating Policies

Frank Salvatore moved to accept the changes as presented.

Motion carried

MP.002 – Membership – Membership Challenge Policy

Karen Schell moved to accept the changes as presented.

Motion carried

BOD.003 – Board of Directors – Use of AARC Corporate Credit Card

Frank Salvatore moved to accept the changes as presented.

Motion carried

BA.001 – Board of Medical Advisors – Medical Advisors

Frank Salvatore moved to accept the changes as presented.

Motion carried

(See Attachment “B” for all revised policies above.)

President-elect Karen Schell gave the Board of Directors ideas of how to find future leaders of the AARC.

RECESS

President Walsh recessed the meeting of the AARC Board of Directors at 1:20pm CDT.

RECONVENE

President Walsh reconvened the meeting of the AARC Board of Directors at 1:30pm CDT.

Michele Packard-Milam of Packard Business Strategies, LLC gave a presentation to the Board of Directors entitled “Powerful Leaders Powerful Boards”. The Board created “Business Units” of Advocacy, Education/Professional Development, Membership, Marketing/Communications, Events/Meetings, Finance/Revenue. Each unit has a mission statement.

Goals of each business unit:

1. **Advocacy** - Respiratory care provided by Respiratory Therapists is recognized and supported in all in healthcare settings.
2. **Communications/Marketing** - AARC consistently delivers the right message, to the right audience, at the right time, through the right channel.
3. **Education/professional development** - AARC offers engaging, valuable professional education that advances the professional practice of respiratory therapy and supports elevation of the profession.
4. **Events/Meetings** - The AARC is recognized as the #1 provider of world-class educational and research conferences that attract respiratory therapists and inter-professional audiences.
5. **Membership** - AARC has an engaged, diverse membership comprised of a majority of Respiratory Therapists.
6. **Revenue and Finance** - The AARC produces ample revenues from diverse sources, which are managed to the highest standards.

Michele explained that The Board of Directors creates the mission/vision, the Strategic Planning Committee creates the strategy, and the Executive Office staff creates/completes the tasks.

RECESS

President Walsh recessed the meeting of the AARC Board of Directors at 4:10pm CDT.

RECONVENE

President Walsh reconvened the meeting of the AARC Board of Directors at 4:20pm CDT.

President Walsh discussed with the Board the next steps moving forward after Michele’s presentation of ideas and thoughts on the AARC Strategic Plan.

The goals of the business units will be given to President-elect Karen Schell and the Strategic Planning Committee to create the strategies for the Executive Office staff.

FM18-1-16.1 Frank Salvatore moved to accept the business units as presented and give to the Strategic Planning Committee and report back at the July 2018 meeting.

Motion carried

Treasurer's Motion

Frank Salvatore moved that expenses incurred at this meeting be reimbursed according to AARC policy.

Motion Carried

President Walsh adjourned the meeting of the AARC Board of Directors at 5:00pm CDT.

Meeting minutes approved by AARC Board of Directors as attested to by:

Lynda Goodfellow
AARC Secretary/Treasurer

Date

Attachment “A”
Categories for Position Statements

Categories for Position Statements

	Ethics	Disease	Consumer Advocacy	Clinical Practice	Quality or Safety	Management	Govt / Regulatory	Education / Competency
Position Statements								
Statement of Ethics and Professional Conduct	X	X	X	X	X	X	X	X
Best Practices in Respiratory Care Productivity and Staffing	X	X	X	X	X	X		
Competency Requirements for the Provision of Respiratory Therapy Services	X		X	X	X	X		X
Continuing Education			X	X	X	X	X	X
Cultural Diversity	X		X					
Definition of Respiratory Care		X		X	X		X	X
Delivery of Respiratory Therapy Services in Skilled Nursing Facilities Providing Ventilator and/or High Acuity Respiratory Care			X	X	X	X	X	
Electronic Cigarette		X	X					
Health Promotion and Disease Prevention		X	X					X
Home Respiratory Care Services		X	X	X			X	X
Insertion and Maintenance of Arterial Lines by Respiratory Therapists			X	X	X			X
Insertion and Maintenance of Vascular Catheters by Respiratory Therapists			X	X	X			X
Interstate Transport License Exemption				X			X	X
Licensure of Respiratory Care			X	X			X	X

Personnel								
Pre-Hospital Ventilator Management Competency				X	X			X
Pulmonary Rehabilitation		X	X	X	X			X
Respiratory Care Scope of Practice			X	X	X		X	X
Respiratory Therapist Education		X	X					X
Respiratory Therapists as Extracorporeal Membrane Oxygenation (ECMO) Specialists			X	X	X			X
Respiratory Therapists in the Emergency Department			X	X	X	X		X
Respiratory Therapy Protocols				X	X	X		
Telehealth and Respiratory Therapy		X	X	X	X		X	X
Tobacco and Health		X	X	X	X			
Administration of Sedative and Analgesic Medications by Respiratory Therapists			X	X	X	X	X	X
Transport of the Mechanically Ventilated, Critically Injured or Ill, Neonate, Child or Adult Patient			X	X	X			X
Guidance Documents								
Scope of Practice			X	X	X		X	X
Regarding RRT Entry to Licensure			X	X	X		X	X
Smallpox Guidance Document		X	X	X	X		X	
Issue Papers								
Best Practices in Respiratory Care Productivity and Staffing	X		X	X	X	X	X	X
Safe Initiation And Management Of Mechanical Ventilation			X	X	X	X		X

Utilization in Respiratory Care			X	X	X	X	X	X
RRT Credential				X	X			X
Respiratory Care: Advancement of the Profession Tripartite Statements of Support								X
Improving Access to Respiratory Care		X	X	X	X			X
Guidelines for Acquisition of Ventilators to Meet Demands for Pandemic Flu and Mass Casualty Incidents	X	X	X	X	X	X		

Attachment “B”

- MP.001 – Membership – General Operating Policies
- MP.002 – Membership – Membership Challenge Policy
- BOD.003 – Board of Directors – Use of AARC Corporate Credit Card
- BA.001 – Board of Medical Advisors – Medical Advisors

American Association for Respiratory Care Policy Statement

Page 1 of 2
Policy No.: MP.001

SECTION: Membership

SUBJECT: **General Operating Policies**

EFFECTIVE DATE: December 14, 1999

DATE REVIEWED: ~~December 2009~~ **March 2018**

DATE REVISED: ~~December 2009~~ **March 2018**

REFERENCES: Bylaws, Code of Ethics, House Rules for Special Recognition

Policy Statement:

The Association's membership shall be subject to the provisions of Association Bylaws and Association policy.

Policy Amplification:

1. All personal records of Association members shall be the property of the Association and shall be held in strict confidence.
2. Members whose AARC membership has lapsed may reactivate their membership in the Association by payment of the current year's membership dues plus the fee set in the Annual Budget subject to the following conditions:
 - A. The lapse in membership has been for a maximum time period of one year.
 - B. The member must meet current Bylaws requirements for appropriate membership classification
3. AARC members shall be granted reciprocity of chartered affiliate membership without inter-affiliate transfer of current chartered affiliate dues paid.
4. All new and renewing members shall be required to complete the AARC membership application and subsequent renewal cards in their entirety.
5. The Membership Committee shall assure that a request for medical direction, when applicable, be included on the membership application.

American Association for Respiratory Care Policy Statement

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Policy No.: MP.001

6. All AARC Members shall receive a communication of congratulations and thanks from the President and Executive Director at 20 years and each subsequent decade of continuous membership.
7. All nominations for Life Membership submitted to the House of Delegates by a delegation shall include curriculum vitae as justification, and a resolution recommending such action shall be submitted to the House at least sixty (60) days prior to the Annual Meeting of the Association.
8. Life Membership shall automatically be bestowed upon an AARC President upon completion of his/her term as Immediate Past-president.
9. All Active and Life Members of the Association employed within the boundaries of chartered affiliates shall be permitted to vote in the election of the delegation of that affiliate, regardless of their separate affiliate membership status.
- ~~10. That students enrolled in an accredited respiratory therapy education program be permitted to join AARC as student members at no charge with the following qualifications:
 - a. —Access to *AARC Times* and *RESPIRATORY CARE* will be limited to the internet.
 - b. —That 100% of the faculty in the program where the student is enrolled be either an active or associate member of AARC.”~~

DEFINITIONS:

ATTACHMENTS:

American Association for Respiratory Care Policy Statement

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Policy No. MP.002

SECTION: Membership
SUBJECT: **Membership Challenge Policy**
EFFECTIVE DATE:
DATE REVIEWED: ~~July 2005~~ **March 2018**
DATE REVISED: ~~July 2005~~ **March 2018**
REFERENCES Bylaws, MP.0791

Policy Statement:

Requests may be received by the Executive Office challenging a member's status.

Policy Amplification:

1. A written request must be received at the AARC Executive Office addressed to the chair of the Judicial Committee. This request must include the following:
 - A. Name of the individual being challenged.
 - B. **The specific reason or reasons the** challenge is being made.
 - C. Signature of individual initiating the challenge.

2. The Chair of the Judicial Committee will decide if the challenge is **preliminary** valid. If valid, a non-confrontational request for information will be sent to the individual being challenged, as well as the section of the Bylaws, highlighting Article III, Section 2, containing the definition of Active Member. This request will attempt to obtain the following information from the individual:
 - A. Job description(s) for the past 12 months
 - B. Explanation of the percentage of time spent on the job
 - C. Medical Director/~~Spouse~~-name
 - D. Request for **a written** response within ten (10) business days

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Policy No. MP.002

3. The following are the time frames for the challenge process:
 - A. Five days to inform the challengee
 - B. Ten days for the challengee to return information
 - C. Fifteen days to send the information to full committee and vote on a decision at the end of the 15 days.
 - D. Notify both parties ~~immediately~~ **as soon as possible, but no later than 48 hours after the vote is taken.**
4. The decision will be based on **the documents, affidavits, statements, and other evidence gathered by the Judicial Committee; the outcome will be by** a majority vote of the Judicial Committee. ~~Anonymity~~ **Names** of both the challengee and the challenger will be kept from the committee and all others involved. **As a result, the chair of the judicial committee may take no role in decision because the chair knows who the parties' names are. In the event of a tie vote the challenge fails.**
5. Any appeal of the Judicial Committee decision will be forwarded to the AARC Board of Directors.
6. The verification of active status for those nominated for an AARC office will be required before the candidate is placed on the ballot.

DEFINITIONS:

Challenge: To contest the validity of a member's qualifications for membership and status in the AARC.

Challenger: The person who challenges the membership of another.

Challengee: The person whose membership is challenged.

Decision: The final, written decision of the Judicial Committee transmitted in writing to both parties and the AARC President.

Preliminarily Valid: A challenge is preliminarily valid if, on its face, it raises a question about the qualifications of a subject member. A determination that a challenge is preliminarily valid only imposes a duty to respond; it is not a decision on the merits, and the Judicial Committee Chair's decision carries no evidentiary weight.

ATTACHMENTS:

American Association for Respiratory Care Policy Statement

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Policy No.: BOD.003

SECTION: Board of Directors
SUBJECT: Use of AARC Corporate Credit Card
EFFECTIVE DATE: December 14, 1999
DATE REVIEWED: ~~November 2015~~ March 2018
DATE REVISED: ~~July 2005~~ March 2018

REFERENCES:

Policy Statement:

Only the President, President-elect, Past President and selected Executive Office personnel shall be authorized to carry Association corporate credit cards.

Policy Amplification:

1. Use of Association corporate credit cards shall require proper detailed reports.
2. The Executive Director shall determine which members of the Executive Office may use Association corporate credit cards.
 - a. All individuals issued corporate credit cards should use these cards for **ALL** business-related expenses without exception.
 - b. Credit card expenses should be reconciled within 30 days of receiving monthly credit card statements.
 - c. Monthly “reconciliation” includes (is defined as) sending receipts and accounting charge codes/departments to the accounting department at the Executive Office.
3. The Board of Directors shall travel under the official travel policy of the Association.
4. The Controller shall be responsible for monitoring the use of corporate credit cards and assuring that use is properly reported.

DEFINITIONS:

ATTACHMENTS:

American Association for Respiratory Care Policy Statement

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Policy No.: BA.001

SECTION: Board of Medical Advisors

SUBJECT: **Medical Advisors**

EFFECTIVE DATE: ~~December 14, 1999~~ **March 2018**

DATE REVIEWED: ~~November 2013~~ **March 2018**

DATE REVISED:

REFERENCES:

Policy Statement:

~~Upon the President's request, t~~ The Chairperson of the Board of Medical Advisors (BOMA) shall identify Medical Advisors for Committees, Specialty Sections, and other appropriate Association Groups.

Policy Amplification:

1. Medical Advisors shall be limited to:
 - A. Members of the Board of Medical Advisors
 - B. Physicians approved by the Board of Medical Advisors
2. Medical Advisors so identified shall be ~~appointed by the President,~~ subject to ratification by the Board of Directors.

DEFINITIONS:

ATTACHMENTS: