

AMERICAN ASSOCIATION FOR RESPIRATORY CARE

Board of Directors Meeting

October 14, 2016 – San Antonio, TX

Minutes

Attendance

Frank Salvatore, RRT, MBA, FAARC, President
Brian Walsh, PhD, RRT-NPS, RRT-ACCS, AE-C, RPFT, FAARC, President-elect
George Gaebler, MEd, RRT, FAARC, Past President
Cynthia White, MS, RRT-NPS, AE-C, CPFT, FAARC, VP External Affairs
Lynda Goodfellow, EdD, RRT, FAARC, VP Internal Affairs
Karen Schell, DHSc, RRT-NPS, RPFT, RPSGT, AE-C, CTTS, Secretary/Treasurer
Timothy Op't Holt, EdD, RRT, AE-C
Lisa Trujillo, DHSc, RRT
Doug McIntyre, MS, RRT, FAARC
John Lindsey, Jr., MEd, RRT-NPS, FAARC
Deb Skees, MBA, RRT, CPFT
Pattie Stefans, BS, RRT
Cheryl Hoerr, MBA, RRT, CPFT, FAARC
Keith Lamb, BS, RRT-ACCS, FCCM
Natalie Napolitano, MPH, RRT-NPS, FAARC
Ellen Becker, PhD, RRT-NPS, FAARC
Kimberly Wiles, BS, RRT, CPFT
Camden McLaughlin, BS, RRT, FAARC

Consultants

Mike Runge, BS, RRT, FAARC Parliamentarian
Dianne Lewis, MS, RRT, FAARC, President's Council President
Terence Carey, MD, BOMA Chair
John Wilgis, MBA, RRT, Past HOD Speaker

Staff

Tom Kallstrom, MBA, RRT, FAARC, Executive Director
Doug Laher, MBA, RRT, FAARC, Associate Executive Director
Tim Myers, MBA, RRT-NPS, FAARC, Associate Executive Director
Steve Nelson, MS, RRT, FAARC, Associate Executive Director
Shawna Strickland, PhD, RRT-NPS, AE-C, FAARC, Associate Executive Director
Cheryl West, MPH, Director of Government Affairs
Anne Marie Hummel, Director Regulatory Affairs
Kris Kuykendall, Executive Administrative Assistant

Guests

Steve Sittig, RRT-NPS, FAARC
Mike Madison, MBA, RRT

CALL TO ORDER

President Frank Salvatore called the meeting of the AARC Board of Directors to order at 9:10am CDT.

President Salvatore introduced 6 students who came to observe the Board of Directors meeting.

Secretary-Treasurer Karen Schell called roll and declared a quorum.

John Wilgis announced the House election results:

Speaker-elect – Teri Miller

Treasurer – Dana Evans

Secretary– Kerry McNiven

Bylaws Chair-elect – Brian Cayko

Bylaws Committee - Raymond Pisani

Elections - Ed Borza

OLD BUSINESS CON'T

George Gaebler began a discussion about the new AARC Affiliate AARConnect Community Policy/Procedure. (See Attachment “A”)

FM16-3-1.3 Brian Walsh moved that the AARC Executive Office develop the means and methods to enforce the revenue sharing agreement by the end of 2016.

Motion carried

NEW BUSINESS

POLICY UPDATES

BOD.024 – Board of Directors – AARC Disaster Relief Fund

Karen Schell moved to accept with date change.

Motion carried

President Salvatore introduced 5 students who came to observe the Board of Directors meeting.

RECESS

President Salvatore recessed the meeting of the AARC Board of Directors at 10:15am CDT.

RECONVENE

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

BOD.027 – Board of Directors – Surveys Conducted by the Association

Natalie Napolitano moved to accept as amended and date change.

Motion carried

CT.009 – Committees – AARC Fellowship Selection Committee

George Gaebler moved to accept as amended and date change.

Motion carried

(See attachment “A” for amended policies.)

RECESS

President Salvatore recessed the meeting of the AARC Board of Directors at 11:15am CDT.

RECONVENE

President Salvatore reconvened the meeting of the AARC Board of Directors at 11:23am CDT.

John Wilgis provided the outcomes of House of Delegates resolutions.

67-16-2 “Resolve that the AARC HOD only meet once per year, prior to the fall AARC Congress. The AARC Bylaws state that only one HOD meeting per year is required.” **Defeated**

John Wilgis moved to accept **67-16-3** “Resolve that the AARC develop a mechanism to encourage affiliates to become more involved with the mission of the AARC. Plan to include but not be limited to encouraging more affiliates to change their affiliate bylaws to allow their president to be seated as a delegate and attend HOD meeting.” **Passed**

Natalie Napolitano moved to refer to president-elect.

Motion carried

John Wilgis moved to accept **67-16-4** “Resolve that the AARC work in concert with the HOD Officers and the Delegate Assistance Committee to increase the assistance offered to affiliates and the needs of the HOD.” **Passed**

Brian Walsh moved to refer to the Executive Office.

Motion carried

President Salvatore reviewed the Board Self-Assessment Survey. The majority of the comments stated that mentors would be helpful for new Board members.

Strategic Workgroups gave updates of their work from this morning.

President Salvatore stated that \$585 was collected for the disaster relief fund by the Board of Directors today.

Treasurers Motion

Karen Schell moved that expenses incurred at this meeting be reimbursed according to AARC policy.

Motion carried

MOTION TO ADJOURN

Karen Schell moved to adjourn the meeting of the AARC Board of Directors.

Motion carried

ADJOURNMENT

President Salvatore adjourned the meeting of the AARC Board of Directors at 12:50pm CDT.

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

Karen Schell

Date

Attachment “A”

Policy No. CA.008 – Chartered Affiliates – Affilate AARConnect Community Policy/Procedure
Policy No. BOD.027 – Board of Directors – Policy for Surveys Conducted by the Association
Policy No. CT.009 – Committees – AARC Fellowship Selection Committee

American Association for Respiratory Care Policy Statement

Page 1 of 2
Policy No.:CA.008

SECTION: Chartered Affiliates

SUBJECT: **AARC Affiliate AARConnect Community Policy/Procedure**

EFFECTIVE DATE: October 14, 2016

DATE REVIEWED: October 14, 2016

DATE REVISED:

Definition of an AARC Affiliate AARConnect Community: A place for affiliate members to share information that supports the mission and vision of the state society and AARC. AARC staff provides oversight of the AARConnect platform. The Affiliate Communities by the nature of the discussions are a reflection of the Affiliate and its members and is monitored by the affiliate leadership. This document is subject to change, according to evolving membership consensus and interaction. The following guidelines cover all messages sent – whether to an entire discussion or to an individual community member.

1. **Have a clear topic in mind and state it in the subject line.** Clear subjects enable members to relate to content easier. It also makes messages easier to find when searching.
2. **Post only content that you are authorized to post.** When acting on behalf of the Leadership of the Affiliate, clearly state your position and who authorized the posting. If posting with a personal message, note that the post is not an authorized Affiliate post. Avoid posting copyright protected materials. Official posts should not include advertising events or products that compete with the AARC and/or affiliate.
3. **Safeguard privacy.** Participation is limited to AARC members and affiliate leadership. However, online forum security cannot be guaranteed and as such your posts may not remain private. Ensure posts meet HIPAA and other relevant guidelines and regulations.
4. **Stay on topic.** Posts should be relevant to the Affiliate forum. Posts are subject to moderation or deletion if found to be off topic, if reported as inappropriate, or if they fail to support the mission and vision of the affiliate or AARC.
5. **Be professional.** Discuss issues, not people. Posts should be professional. Discussions should not include political messaging.
6. **Follow guidelines for surveys.** If you are interested in surveying members for research purposes, please contact the affiliate leadership to receive permission to post surveys. Surveys posted without permission will be removed. Oversaturation of community members with surveys for industry or personal gain, often result in members removing themselves from the list.
7. **Do not post commercial messages.** This includes job postings, products, services, or meetings or events. Official affiliate sponsored events are allowed when posted by the appointed/elected leadership of the affiliate.

Policy Amplification:

1. Affiliate President must agree to code of conduct, which will be sent annually with Affiliate Affirmation. State Societies who do not sign the affiliate affirmation will not be eligible to have an Affiliate Community.
 - a. On the initial implementation, the AARC will provide an interim Affiliate Community Agreement that will cover the period between the implementation and the 2017 Affiliate Agreement completion date.
2. The Affiliate Community will replace listserv and/or the need to contact the AARC HOD Liaison in order to post to its members within the state.
3. Leadership of the affiliate must appoint a member of their executive committee or board to manage, create and monitor all posts for the affiliate.
 - a. When officially posting as an affiliate officer, authors should identify themselves as acting on behalf of the elected officers. Personal opinions should be identified as such and it should be made clear that they are not the official statement of the affiliate. AARC urges caution when posting on the state forum in that capacity.
4. Job postings are not allowed. These types of posts constitute advertising which is not permitted on AARConnect.
5. No direct solicitation of any type for meetings, events, products or services is allowed, either through lists or direct messaging to other members. These types of posts constitute advertising which is not permitted on AARConnect. This is already stated in #7 above
6. Use caution when discussing any services or products. Information posted on the lists is available for all to see, and comments are subject to libel, slander, and antitrust laws.
7. **AARC reserves the right to modify postings.** Affiliate officers are held to a high level of excellence and accountability. Repeat offenders may be subject to moderation or restricted access.
 - a. **Individual Violations (e.g. – allowing individuals to post non-sanctioned state affiliate events or inappropriate use/responses by individuals):**
 - i. First Violation – Depending on the severity, a message may be deleted. A message informing the poster will be sent.
 - ii. Second Violation – Depending on the severity, a message may be deleted. The poster will be put on moderation, and messages will be reviewed before being potentially posted online.
 - b. **State Affiliate Violations (e.g. – postings that violate the affirmation agreement between the state affiliate and AARC):**
 - i. First Violation – Depending on the severity, a message may be deleted. The state affiliate will lose their access to the AARConnect community for six months and forfeit their AARC revenue sharing for that time period.
 - ii. Second Violation – Depending on the severity, a message may be deleted. The state affiliate will lose their access to the AARConnect community for a year and forfeit their AARC revenue sharing for that time period.
 - c. Disposition of withheld State Affiliate Revenue sharing. The AARC will hold the funds in a holding account and at the end of the year will disburse the funds equally to the state affiliates that had no violations during the preceding year.
8. All affiliates are required to follow all policy application definitions for AARC Connect Community and revenue sharing requirements. Failure to follow these policy application definitions shall result in withholding of these affiliate benefits.
9. Section 7 a,b,c will be followed as written. The AARC has the right to rescind the community's right, revenue sharing and chartered affiliates co-marketing.
10. The AARC BOD will be the determinate body when violations occur. The withholding of these revenues shall be reserved in a protected account.

American Association for Respiratory Care Policy Statement

Policy No.: BOD.027
Page 1 of 4

SECTION: Board of Directors
SUBJECT: Policy for Surveys Conducted by the Association
EFFECTIVE DATE: March 2001
DATE REVIEWED: October 2016
DATE REVISED: October 2016
REFERENCES: CT.0688b Revised

Policy Statement:

1. All surveys of the AARC membership must be reviewed by the Executive Office and approved by the Executive Board before permission will be granted for conducting them.

Policy Amplification:

Definition of Surveys: For the purposes of this policy a survey is a document requesting information that may be used to comprehensively consider an area of subject matter for the purposes of gathering data where the analysis could be considered for academic pursuit, publishing ~~or corporate use.~~

Definition of Listserve Questionnaires: Any question or questions posed that would be considered for one's own personal/professional use as information gathering for projects in their area of interest, practice, or job. Information gathered in this way would not be used for publication outside of one's institution.

1. Questionnaires/Information requests occurring within AARC Section mail lists (AARConnect) do not require Executive review provided that they adhere to the rules governing them. See attachment A below

Survey Request Procedure

1. The requestor must be an AARC Member for > 1 year and in good standing.
2. The requester must submit a copy of the survey plus communication stating the intent of the survey to the AARC Executive Office, no less than 30 days prior to the requested distribution date. Incomplete applications will be rejected. Please include the following information within the request:
 - a. A copy of the proposed survey, preferably a link to the actual survey.
 - b. The membership group you wish to survey.
 - c. The survey introduction.
 - d. A description of how you intend to assure confidentiality of information supplied by members.

American Association for Respiratory Care Policy Statement

Policy No.: BOD.027
Page 2 of 4

- e. A description of how you intend to disseminate the findings to members who participated.
- f. Definitions for abbreviations used in the survey.
- g. A disclosure of possible conflict of interest.
- h. Whether you have Institutional Review Board approval (if applicable)

Note: Surveys will be circulated only on groups that currently exist on AARConnect. These include all AARC Specialty Sections, Roundtables, and, if a cross section of respiratory therapists is needed, the Help Line. Special requests for segmentation of AARC members cannot be accommodated.

3. The Executive Director or designee will evaluate the survey based upon the following criteria:
- a. Overall appearance.
 - b. Have similar surveys have been done within the last 24 months? If so, proponent of that survey will be shared with the requestor.
 - c. Clarity of questions and appropriateness of format.
 - d. No redundancy of questions.
 - e. No blatant disregard for the wellbeing of our members or association.
 - f. **Have** the appropriate questions been developed to draw reasonable conclusions.
 - g. Has a survey been sent to the same population of AARC members during the last six months? Duplicate surveys will be rejected.
 - h. Does the survey provide information about our members or organization that could be used by our competitors or negatively affects our members or business?

4. After Executive Office review and approval a designee will notify the Secretary/Treasurer of the AARC BOD and seek Executive Board approval. The requester will be informed of the decision. If revisions are needed, the requester shall resubmit. Unsatisfactory revisions will be rejected. Once approved, the survey will be labeled with the following “This survey has been approved by the AARC for distribution. Please contact the survey proponent, as indicated in the message below, with questions and comments.”

5. Approved Surveys will be distributed using web based survey systems (ex: Survey Monkey) that direct participants away from AARConnect. AARConnect will not be utilized to respond to surveys, unless it is questionnaire.

6. A brief summary of survey results will be made available within one year to AARC members within the AARConnect library. Summary pdf files (output) provided by the survey tool are acceptable. Most summaries provide the response rate and percentages of responses for each question. If you plan on publishing, please check with the journal to ensure this is not considered a publication. If the journal considers this a publication, the surveyor can wait until publication to provide a citation.

7. The Executive Office can seek assistance from the Executive Committee of the Board of Directors at any time by the following method:

American Association for Respiratory Care Policy Statement

Policy No.: BOD.027

Page 3 of 4

- a. Request for Executive Committee support will be sent to the Secretary/Treasurer for distribution, discussion and vote.
- b. The Executive Committee has the right to make exception to the survey policy on behalf of the Board of Directors.

Attachment A

AARC Participant Listserv (AARConnect) Rules

General

1. Message content must be clinically or operationally relevant to the intent of the AARConnect group.
2. The following are not permitted to be posted. Members posting or contributing to these postings will be notified of their violation, censored, and then removed if their inappropriate behavior continues. Continued violations will be reported to the judicial committee for additional action.
 - a. Advertisements or motions for products, services, job
 - b. Meetings and events not sponsored by AARC or affiliate
 - c. Poems, jokes and other forms of personal expression, chain mail, virus warnings, etc.
 - d. Copyrighted material from a source other than the AARC
 - e. Inquiries and promotions related to products/services by consultants, manufacturers, marketing firms and other similar entities outside of the AARC.
 - f. Discussions relating to pricing or cost of goods as this may be considered price fixing and is a federal offense.
3. The AARC reserves the right to remove anyone for any reason from the AARC electronic mailing list. This includes the archival entries on the Listserv that pertain to a subject considered inappropriate or in violation of the Listserv guidelines.

The Exchange of Information:

1. AARC members may use the Listserv to exchange information between other Listserv Subscribers.
2. When you post a question, or series of questions, be sure that you title it with a good, concise, explanatory title in the subject line to clearly differentiate the message from others being posted or responded to.
3. Regarding information requests posted by Listserv clients, the Section Chair or Executive Office determine if the Listserv posting represents a survey that requires approval. The following guidelines can be utilized to differentiate Listserv information requests from query requests.
 - 3.1 Surveys often include the capturing of user specific information and hospital/department demographics for comparison reporting.
 - 3.2 The creator of a survey will embed a separate link to ask specific questions so

American Association for Respiratory Care Policy Statement

Policy No.: BOD.027

Page 4 of 4

participants do not have the option to view other responses. If the creator of this type of inquiry tool has not expressly indicated results will be shared and accessible to all Listserv participants, the Section Chair will refer the individual to the Executive Office as per Policy BOD 027.

4. The sender of the information request may instruct section participants to reply to the Listserv, click on a link or reply directly to their personal email.

4.1 In the event responses are sent directly to the personal email or automated survey service (e.g. SurveyMonkey) of the individual who posted the information request, a summary of those responses should be posted so all Listserv participants may share the information. These summaries can be placed in the AARConnect library for future reference.

4.2 If your reply is simply a request to receive a copy of what someone has offered to share, or simply to agree with someone (such as: "Me too"), please do not reply to the entire group. Instead, send your response directly to the person who posted the message.

American Association for Respiratory Care Policy Statement

Page 1 of 3
Policy No.: CT.009

SECTION: **Committees**

SUBJECT: **AARC Fellowship Selection Committee**

EFFECTIVE DATE: January 1, 2011

DATE REVIEWED: **October 2016**

DATE REVISED: **October 2016**

REFERENCES:

Policy Statement: The AARC Fellowship Program was established to recognize active or associate members **in good standing** who have made profound and sustained contributions to the art and science of respiratory care and to the AARC.

Policy Amplification: This policy sets forth the eligibility requirements, criteria for nomination, the selection process and rules governing the AARC Fellowship Program.

Eligibility:

- Be an active or associate member of the AARC in good standing for at least ten consecutive years prior to the deadline for receipt of nominations.
- Possess the RRT credential issued by the NBRC **and licensed within their state of employment** or, be a licensed physician with a respiratory care-related specialty.
- **First term** members of the AARC Board of Directors or Officers of the House of Delegates are not eligible.

Criteria:

- Must be nominated by **at least two AARC members, one of which is required to be a Fellow** of the AARC with membership in good standing.
- Must have demonstrated national prominent leadership, influence and achievement in clinical practice, education or science.
- Must possess documented evidence of significant contribution to the respiratory care profession and the AARC.

Rules:

- All nominations for Fellow, and associated supporting documents, must be submitted online through the AARC website.
- Upon receipt of a nomination, the Executive Office will confirm each nominee satisfies the minimum criteria for 10 consecutive years of AARC membership, and that each nominator continues to maintain eligibility to submit nominations for Fellow.
- For those nominees not meeting the 10-year requirement, the nominator will be so informed and the nomination not accepted. Nominators not eligible to submit nominations will likewise be notified.
- Deadline for receipt of nominations and all supporting documentation will be the last working day of August of the calendar year in which the nomination is to be **considered or, by pronouncement, an earlier deadline as determined by the dates of the AARC's Annual Congress**. Nominations not received by the established date will not be accepted.
- The Fellowship Selection Committee, consisting of a Chair and **up to six current Fellows** appointed by the AARC President, will evaluate nominations annually.
- During the first week of September, Selection Committee members will be provided an electronic folder containing all accepted nominations and supporting documents in alphabetical order. Committee members will also receive a ballot to indicate which nominees they consider worthy of induction as a Fellow. Completed ballots will be returned to the Chair **anonymously** for final tabulation.
- Committee members are to evaluate each nominee independently and make their determination based upon the contributions of the respective nominee to the profession, and most importantly, to the AARC. Committee members **will not** collaborate with anyone during the selection process.
- Nominees receiving an affirmative vote from all five committee members will be inducted as a Fellow of the AARC.
- Nominees selected for induction will be formally notified upon completion of the selection process, with their nominators receiving a blind copy of the congratulatory letter.
- An overriding goal of the Selection Committee is to minimize any embarrassment or discomfort to members not selected for induction. Therefore, for those nominees not selected, a letter so stating will only be sent to the nominators.
- Once the final tabulation is completed, the results of the balloting for induction shall remain confidential and will not be subject to outside review or discussion.

- New Fellows will be inducted during the Awards Ceremony held in conjunction with the annual AARC International Respiratory Congress.
- Newly inducted Fellows will receive a pin, a certificate suitable for framing and will have their names added to the list of Fellows on the AARC website.
- Upon induction, Fellows are expected to maintain their AARC membership in good standing.

Addendum

- Examples of profound and sustained contributions may include but are not limited to;
 - Specific evidence of outstanding contributions to the improvement of respiratory care at the national or international level or illustration of how regional impact demonstrates potential for national application.
 - Evidence includes but is not limited to documentation of the following:
 - Consistent outstanding contributions over time
 - Contributions with significant, measurable impact
 - Dissemination of important information about the contributions
 - Substantive honors, awards, and recognition by AARC or affiliates
 - Adoption of research findings and/or innovations that guide changes in education, research, administration, policy, or respiratory care practice