

AMERICAN ASSOCIATION FOR RESPIRATORY CARE

Board of Directors Meeting

March 28, 2009

Minutes

Attendance

Tim Myers, BS, RRT-NPS, President
Toni Rodriguez, EdD, RRT, Past President
George Gaebler, MEd, RRT, FAARC, VP/Internal Affairs
Joseph Lewarski, BS, RRT, FAARC, VP/External Affairs
Karen Stewart, MS, RRT, FAARC, Secretary-Treasurer
Frank Salvatore, BS, RRT, FAARC, Past Speaker
Patricia Doorley, MS, RRT, FAARC
Debbie Fox, MBA, RRT-NPS
Lynda Goodfellow, EdD, RRT, FAARC
Michael Hewitt, RRT-NPS, FAARC, FCCM
Denise Johnson, BS, RRT
Douglas Laher, BSRT, RRT, MBA
John Lindsey, RRT
Robert McCoy, RRT, FAARC
Doug McIntyre, RRT
James Taylor, RRT
Michael Tracy, BA, RRT-NPS, RPFT
Brian Walsh, RRT-NPS, RPFT

Guests

Cam McLaughlin
Tom Lamphere
Dawn Rost
Debra Skees

Absent

Kent Christopher, MD, RRT, FAARC, BOMA Chair (Excused)

Consultants

John Hiser, MEd, RRT, FAARC, Parliamentarian
Dianne Lewis, MS, RRT, FAARC, Presidents Council President

Staff

Sam Giordano, MBA, RRT, FAARC, Executive Director
Tom Kallstrom, BS, RRT, AE-C, FAARC, Chief Operating Officer
Ray Masferrer, RRT, FAARC, Associate Executive Director
Steve Nelson, RRT, FAARC, Associate Executive Director
Sherry Milligan, MEd, Associate Executive Director
Cheryl West, MHA, Director of Government Affairs
Miriam O'Day, Director of Federal Government Affairs
Anne Marie Hummel, Director of Regulatory Affairs
William Dubbs, MHA, MEd, RRT, Director of Education and Management
Tony Lovio, Controller
Brenda DeMayo, Administrative Coordinator

CALL TO ORDER

President Tim Myers called the meeting of the AARC Board of Directors to order at 8:00 a.m., CST, Saturday, March 28, 2009.

Secretary-Treasurer Karen Stewart called the roll and declared a quorum.

SPECIAL REPRESENTATIVE REPORTS

AMERICAN ASSOCIATION FOR CARDIOVASCULAR & PULMONARY CARE (AACVPR)

Ruth Krueger moved to accept **Recommendation 09-1-61.1** “That the AARC BOD fund Debra Koehl’s attendance at the AACVPR meeting in Philadelphia in October, 2009.”

Ruth Krueger moved “To accept **Recommendation 09-1-61.1** for information only as this has already been budgeted”

Motion Carried

AMERICAN HEART ASSOCIATION REPORT

Joe Lewarski moved to accept **Recommendation 09-1-63.1** “That the AARC BOD support development of the new 2008 Guidelines for Cardiopulmonary Resuscitation.”

Joe Lewarski moved “To refer **Recommendation 09-1-63.1** back to the Chair, Rich Branson, for clarification.”

Motion to Refer Carried

INTERNATIONAL COUNCIL REPORT

John Hiser reported that the United Arab Emirates has formed our fourth international affiliate. He explained that we have both international affiliates and member countries of the International Council for Respiratory Care. We will start pushing for international affiliates and member countries that will grow into affiliates. Mr. Hiser further stated they do not have a seat in the House of Delegates.

ACCEPTANCE OF ORGANIZATIONAL REPRESENTATIVE REPORTS

Ruth Krueger moved “To accept the Organizational Representative reports as submitted.”

Motion Carried

ROUNDTABLE REPORTS

ASTHMA DISEASE ROUNDTABLE REPORT

George Gaebler moved to accept **Recommendation 09-1-42.1** “That the AARC initiate a survey monkey to members of the AARC to advertise the different roundtables.”

George Gaebler moved “To refer **Recommendation 09-1-42.1** back to the Chair, Eileen Censullo, for clarification.”

Motion to Refer Carried

INFORMATICS ROUNDTABLE REPORT

George Gaebler moved to accept **Recommendation 09-1-47.1** “That resources (human and financial) should be allocated for recruitment of roundtable participants with diverse backgrounds. Group e-mails describing the informatics roundtable and requesting participation should be sent to AARC members.”

George Gaebler moved “To refer **Recommendation 09-1-47.1** back to the Informatics Chair, Constance Mussa.”

Motion to Refer Carried

George Gaebler moved to accept **Recommendation 09-1-47.2** “That the AARC make available to roundtable participants resources such as the AARC Uniform Reporting Manuals for Acute and Subacute Care, the National Board for Respiratory Care’s (NBRC) RRT Examination Matrix, and published, peer-reviewed respiratory care literature.”

Mike Tracy moved “To refer **Recommendation 09-1-47.2** back to the Informatics Chair, Constance Mussa.”

Motion to Refer Carried

ROUNDTABLE REPORT ACCEPTANCE

Ruth Krueger moved “To accept the Roundtable reports as submitted.”

Motion Carried

ROUNDTABLE LIAISONS

President Tim Myers named the Board volunteers who will act as liaisons for the following Roundtables:

Asthma Disease Roundtable	Lynda Goodfellow
Informatics Roundtable	Doug Laher
Military Roundtable	Ruth Krueger
Research Roundtable	Jim Taylor

RECESS

President Tim Myers recessed the meeting of the AARC Board of Directors at 8:55 a.m. CST, Saturday, March 28, 2009.

RECONVENE

President Tim Myers reconvened the meeting of the AARC Board of Directors at 9:15 a.m. CST, Saturday, March 28, 2009.

AD HOC COMMITTEE REPORTS

AD HOC COMMITTEE ON VENTILATOR CARE – HUMAN RESOURCES

George Gaebler moved to accept **Recommendation 09-1-33a.1** “That this entire project be re-focused and redefined as there are a number of serious logistical issues being noted that will severely affect the development of the last three Human Resources charges.”

George Gaebler moved “To refer **Recommendation 09-1-33a.1** to the President.”

Motion to Refer Carried

ACCEPTANCE OF AD HOC COMMITTEE REPORTS

Ruth Krueger moved “To accept the Ad Hoc Committee reports as submitted.”

Motion Carried

Director of State Government Affairs Cheryl West reported that the AARC is still very involved in tobacco regulation and is currently involved in various committees and coalitions, etc. to advance legislation.

FEDERAL REGULATORY AFFAIRS REPORT

CORF Regulation

Director of Federal Regulatory Affairs Anne Marie Hummel reported that CMS is drafting a new CORF personnel regulation and noted that CMS is sensitive to any rule that would regulate CRTs out of a job. A new revised CORF personnel standard that will clarify RRTs and CRTs who are eligible to take the RRT exam and work in CORFs should be issued shortly.

Pulmonary Rehab

CMS has decided to do a proposed rule and national coverage determination (NCD). CMS believes using both regulations and NCD will cover the issue of codes and physician supervision. ATS, ACCP, and NAMDRRC are scheduled to discuss the regulation process with CMS.

Oxygen

AARC along with home care groups, the ALA, and NECA to name a few have been involved in a work group focused on reform of the oxygen benefit under Medicare. The home care community wants Medicare to cease viewing home oxygen as an equipment benefit and view it as a patient-related services benefit.

FEDERAL GOVERNMENT AFFAIRS REPORT

Federal Government Affairs Director Miriam O'Day provided an update on Congressional issues.

Medicare Initiative

Ms. O'Day stated our legislation **HR 1077** and **S 343** – the Medicare RT Initiative was re-introduced in Congress and is gaining support. Representative Mike Ross has committed to approach Representative Henry Waxman (Energy & Commerce Chair) to place additional focus on the Medicare RT initiative. We have support from ACCP, Alpha-One Foundation and the COPD Coalition.

PACT

The 2009 March DC Lobby Day was a success with 104 PACT representatives from 46 states and DC attending and lobbying Congress on our issues. We gained several new co-sponsors from **HR 1077** and **S343** from the PACT meeting. A webinar was conducted prior to the PACT meeting to brief participants on Hill issues. Anyone interested in background materials on our legislative issues may download pertinent materials from the AARC/PACT website.

Congressional Visits

In early April Miriam will make congressional visits to gain guidance on how stimulus money will be distributed and if there are any opportunities for the RT profession.

RECESS

President Tim Myers recessed the meeting of the AARC Board of Directors at 11:15 a.m. CST, Saturday, March 28, 2009.

RECONVENE

President Tim Myers reconvened the meeting of the AARC Board of Directors at 11:35 a.m. CST, Saturday, March 28, 2009.

UNFINISHED BUSINESS

LONG TERM OXYGEN THERAPY

Pat Doorley moved to accept **Recommendation 08-3-83.1** “That the AARC facilitate a physician review of the literature on long term oxygen therapy (LTOT) with recommendation on necessary research to create evidence based procedures for home oxygen therapy: Organize and present an educational conference to review literature on oxygen therapy and equipment currently available for LTOT with an update on evidence based research that is current and identify missing science for the use of equipment and procedures used in LTOT to create a roadmap for future LTOT research.”

Karen Stewart moved “To refer **Recommendation 08-3-83.1** to the President to develop an ad hoc committee to determine key terms and then forward to the Executive Office to conduct the literature search.”

Motion to Refer Carried

POLICY REVIEW

Policy BOD 004

Toni Rodriguez moved to accept **FM 09-2-84.1** “To table Policy BOD 004 as she will update it and bring back to the summer meeting.” (See ATTACHMENT “B”)

Motion to Table Carried

Policy BOD 010

Toni Rodriguez moved to accept **FM 09-1-84.2** “To replace “session” with “process,” and delete “mandatory” as this is at the discretion of the President, and delete #2 under Policy Amplification.” (See ATTACHMENT “B”)

Ruth Krueger moved to “To strike **FM 09-1-84.2** Policy BOD 010.”

Motion to Strike Carried

Policy BOD 013

Update Review Date.

Policy CA 002

James Taylor moved to accept **FM 09-1-84.3** “To strike Policy CA 002.” (See ATTACHMENT “B”)

Ruth Krueger moved “To refer **FM 09-1-84.3** to the Chartered Affiliate Committee to review, revise and update by the summer meeting, with Cam McLaughlin to convey the Board’s wishes to this committee.”

Motion to Refer Carried

Policy FM 001

Update Review Date.

Policy FM 003

Denise Johnson moved to accept **FM 09-1-84.4** “To amend FM 003 to change the ‘2’ to ‘3,’ remove ‘commencing with the 1990 annual budget, all’ and replace with ‘The,’ and Update Review Date.” See ATTACHMENT “B”)

Motion Carried

Policy CT 002

Update Review Date

NEW BUSINESS

PRESIDENTIAL APPOINTMENT RATIFICATION

George Gaebler moved to accept **FM 09-1-21.1** “That the Presidential appointment of Carrie Bourassa to the Federal Government Affairs Committee be ratified by the AARC BOD.”

Motion Carried

END OF LIFE WHITE PAPER

Sam Giordano stated an End of Life White Paper is being developed by Timothy McDonald, MD, JD, along with Wade Jones. George Gaebler volunteered his assistance with the project.

REVENUE SHARING

George Gaebler moved to accept **FM 09-1-84.5** “To continue withholding Tennessee revenue sharing checks during 2009 to help offset the cost of the hired lobbyist.”

Motion Carried – Unanimous

DISASTER RESPONSE

Mike Hewitt moved to accept **FM 09-1-84.6** “That the AARC Board accept opening its disaster fund to the North Dakota and Minnesota areas that were recently declared disaster areas by President Obama.”

Motion Carried

ARCF INVESTIGATOR GRANT FORM

Brian Walsh moved to accept **FM 09-1-84.7** “That the ARCF develop a new investigator grant form and criteria that fosters the development of the respiratory therapist investigator which will include a form that is approximately 4-6 pages in length that explicitly directs the applicant on what is required to successfully apply.”

Motion Carried

ARCF AWARDS NOMINATIONS

Forest M. Bird Lifetime Scientific Achievement Award

Tom Barnes

Nominated by Lynda Goodfellow

Invacare Award for Excellence in Home Respiratory Care

John Loyer Nominated by Frank Salvatore

Sepracor Achievement Award for Excellence in Pulmonary Disease State Management

Rhonda Vosmus Nominated by Tim Myers
Dom Coppollo Nominated by Lynda Goodfellow

Charles H. Hudson Award for Cardiopulmonary Public Health

(No BOD nominations at this time)

NEXT AARC BOARD OF DIRECTORS MEETING

President Tim Myers reported that the next meeting of the AARC Board of Directors will be held July 20-21 in Marco Island, FL.

TREASURER'S MOTION

Secretary-Treasurer Karen Stewart moved "That the expenses incurred at this meeting be reimbursed according to AARC policy."

Motion Carried

ADJOURNMENT

President Tim Myers adjourned the meeting of the AARC Board of Directors at 1:50 p.m. CST, Saturday, March 28, 2009.

ATTACHMENT “A”

Respiratory Therapist Education Position Statement

American Association for Respiratory Care

9425 N. MacArthur Blvd, Suite 100, Irving, TX 75063

Position Statement

Respiratory Therapist Education

~~It is the position of the American Association for Respiratory Care (AARC) that to adequately prepare graduate respiratory therapists to entry level respiratory therapists for clinical practice across a broad spectrum of sites and to prepare professional leaders to meet the demands of providing services requiring complex, cognitive abilities and patient management skills: it is the position of the American Association for Respiratory Care (AARC) that:~~

- The minimum education leading to entry into the practice of respiratory therapy ~~care~~ should be successful completion of an associate degree respiratory ~~care~~ therapy educational program.
- ~~• Programs should prepare graduates as respiratory therapists~~
- Programs that educate respiratory therapists, managers, researchers, faculty, and professional leaders should be accredited through a body, and a process, which will confirm that the programs meet minimum educational requirements.
- Respiratory therapists completing ~~Graduate respiratory therapists, upon completion of the above-described minimum education,~~ advanced training, and/or experience should be eligible to pursue and to obtain a credential that acknowledges the didactic preparation and related skills required for practice ~~as a respiratory therapist~~ in the respective area of specialization.

This position statement is based on prior projects by the AARC, as well as current activities and data, which support the outcomes of those earlier projects. They include:

- The AARC sponsored Delphi study conducted by the AARC Education Committee in 1989. This study engaged acknowledged experts in respiratory care to reach agreement in two areas:
 1. The knowledge, skills, and professional characteristics needed for future respiratory care practitioners, and
 2. The duration of educational preparation necessary to acquire these competencies.
- The 1991 profile of the future respiratory care practitioner created by the AARC Board of Directors.
- The 1992 consensus conference on respiratory care education, which brought together more than fifty participants including foundation representatives, government officials, academicians, and clinical health care professionals to determine:
 1. Curriculum content for the year 2001, and
 2. Implications of that curriculum content for credentialing and accreditation.
- The 1993 consensus conference, which resulted in the creation of an action plan to assist educational programs in developing respiratory therapists prepared to practice in the year 2001.
- The reports published by the Pew Health Professions Commission in 1991 and 1993.

The findings of the education and practice related consensus conferences should be included in resource materials as new standards are developed for the accreditation of respiratory care educational programs. The AARC will continue to support the practice of respiratory care by providing continuing education opportunities, and collecting and sharing information on the changing healthcare environment as it impacts respiratory care education and practice.

Effective 1998

Revised ~~2004~~ 03/2009

ATTACHMENT “B”

Policies

Policy Review

BOD 004 - Continuous Quality Improvement Plan

BOD 010 - Mandatory Orientation Sessions

BOD 013 - Professional Attire

CA 002 - Chartered Affiliate Requirements and Responsibilities

FM 001 - Accounting Systems

FM 003 - Annual Budget

CT 002 - Medical Advisors

American Association for Respiratory Care Policy Statement

Page 1 of 2
Policy No.: BOD.004

SECTION: Board of Directors

SUBJECT: **Continuous Quality Improvement Plan**

EFFECTIVE DATE: December 14, 1999

DATE REVIEWED:

DATE REVISED: May 8, 2004

REFERENCES:

Policy Statement:

The Board of Directors shall meet at a dedicated time and place identified by the President to systematically evaluate its effectiveness as the governing entity of the Association no less than twice annually.

Policy Amplification:

1. As part of this process, the Board of Directors shall use available data, statistical information, and continuous quality improvement methods.

Quality Performance

The Board of Directors is responsible for the efficient use of available resources to operationalize the mission statement and attain the strategic objectives of the AARC. Quality performance occurs through the continuous improvement of key processes and activities that contribute to the advancement of the art and science of respiratory care irrespective of venue.

Quality Precepts

- Continuous improvement of every process of planning operation and service delivery.
- Elimination of barriers which have the effect of adding costs through waste reduction and simplification.

American Association for Respiratory Care Policy Statement

Page 2 of 2
Policy No.: BOD.004

- Alignment with outside organizations as partners.
- Management practices that focus on improvement of the systems in which members work.
- Emphasis on continuous process improvement rather than periodic inspection
- Continuous evaluation and improvement when working with related organizations.
- Promotion of member understanding of their jobs and individual roles in providing quality products.
- Creation of a caring organizational environment that is characterized by trust and integrity and strives to drive out fear and frustration for optimal performance; encourages suggestions for improvement and innovation; and promotes sharing of ideas.
- Communication about organizational goals and progress as essential for enlisting effective participation.
- Creation of budgets and performance management each year for monitoring progress internally.
- Improvement in statistical processes and planning, and application of quantitative methods for continued improvement.

DEFINITIONS:

ATTACHMENTS:

American Association for Respiratory Care Policy Statement

Page 1 of 1
Policy No.: BOD.010

SECTION: Board of Directors
SUBJECT: **Mandatory Orientation Sessions**
EFFECTIVE DATE: December 14, 1999
DATE REVIEWED:
DATE REVISED: **May 8, 2004**

REFERENCES: AARC Policy FM.016 Travel Expenses Reimbursement

Policy Statement:

All persons elected to the Board of Directors shall **participate in** an orientation session.

Policy Amplification:

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1. The newly elected members, along with all continuing members, are encouraged to **participate in** an orientation session as identified by the President.
2. Reimbursement shall be according to AARC Travel Reimbursement Policy.

DEFINITIONS:

ATTACHMENTS:

American Association for Respiratory Care Policy Statement

Page 1 of 1
Policy No.: BOD.013

SECTION: Board of Directors

SUBJECT: **Professional Attire**

EFFECTIVE DATE: December 14, 1999

DATE REVIEWED:

DATE REVISED: May 8, 2004

REFERENCES:

Policy Statement:

All Officers, Directors, and guests shall adhere to appropriate attire requirements when attending business meetings and social gatherings.

Policy Amplification:

1. Unless otherwise determined by the President, business attire shall be required for all meetings of the Board, Finance Committee and Executive Committee meetings.
 - A. This requirement shall also apply to invited guests.
2. Attire worn to receptions and other social gatherings sponsored by other professional organizations (i.e. NBRC) shall be identified by the sponsoring group, unless otherwise defined by the President.

DEFINITIONS:

ATTACHMENTS:

American Association for Respiratory Care Policy Statement

Page 1 of 1
Policy No.: CA.002

SECTION: Chartered Affiliates

SUBJECT: **Chartered Affiliate Requirements and Responsibilities**

EFFECTIVE DATE: December 14, 1999

DATE REVIEWED:

DATE REVISED:

REFERENCES:

Policy Statement:

Chartered affiliates shall be responsible for providing necessary formal documentation required for Chartered Affiliate Membership in the AARC.

Policy Amplification:

1. Chartered Affiliates shall be required to provide the following written documentation to the AARC.
 - A. Proof of state and federal exempt tax status.
 - B. Proof of Chartered Affiliate Treasurers and other checking account signatories being bonded.
2. The Affiliate Charter shall remain the property of the Association, and replacement or additional copies must be purchased at cost plus handling.
3. **It shall be the responsibility of the Chartered Affiliates Committee to solicit and maintain documentation.**

DEFINITIONS:

ATTACHMENTS:

American Association for Respiratory Care Policy Statement

Page 1 of 1
Policy No.: FM.001

SECTION: Fiscal Management

SUBJECT: **Accounting Systems**

EFFECTIVE DATE: December 14, 1999

DATE REVIEWED:

DATE REVISED:

REFERENCES:

Policy Statement:

The Board of Directors shall require the application of appropriate accounting systems and internal auditing procedures.

Policy Amplification:

1. The accounting systems and internal auditing procedures shall provide for the timely and accurate assessment of the budgetary and business operations of the Association.
2. Financial statements shall be:
 - A. Prepared in compliance with generally accepted accounting principles (GAAP)
 - B. Issued in a timely manner to the Board of Directors.

DEFINITIONS:

ATTACHMENTS:

American Association for Respiratory Care Policy Statement

Page 1 of 1
Policy No.: FM.003

SECTION: Fiscal Management

SUBJECT: **Annual Budget**

EFFECTIVE DATE: December 14, 1999

DATE REVIEWED:

DATE REVISED:

REFERENCES:

Policy Statement:

The budgetary process shall include appropriate approval processes and reviews.

Policy Amplification:

1. Commencing with the 1990 Annual Budget, all Association Annual Budgets submitted to the Board of Directors and House of Delegates for approval shall provide supplemental verification that major expenses conform to the approved Strategic Plan of the Association.
2. Annual Budget reviews shall:
 - A. Be presented to the Finance Committee with subsequent presentation to the Board of Directors.
 - B. Provide a detailed budget performance assessment with respect to the Association's Strategic Plan.
2. The Annual Budget shall be approved by the House of Delegates and Board of Directors prior to implementation.

DEFINITIONS:

ATTACHMENTS:

American Association for Respiratory Care Policy Statement

Page 1 of 1
Policy No.: CT.002

SECTION: Committees
SUBJECT: Medical Advisors
EFFECTIVE DATE: December 14, 1999
DATE REVIEWED:
DATE REVISED:

REFERENCES:

Policy Statement:

Committees shall have Medical Advisors as requested by the President, identified by the Chair of the Board of Medical Advisors (BOMA) and appointed by the President.

Policy Amplification:

1. Special Committees and other groups shall have Medical Advisors as determined by the President.
 - A. BOMA shall submit names for Committee Medical Advisors to the President for appointment and ratification by the Board of Directors.

DEFINITIONS:

ATTACHMENTS: