

AMERICAN ASSOCIATION FOR RESPIRATORY CARE

Board of Directors Meeting

November 29 2007

Orlando, Florida

Minutes

Attendance

Guest

Toni Rodriguez, EdD, RRT, President
Michael Runge, BS, RRT, Past President
Ruth Krueger Parkinson, MS, RRT, VP/Internal Affairs
Karen Stewart, MS, RRT, FAARC, VP/External Affairs
Colleen Schabacker, BA, RRT, FAARC, Secretary/Treasurer
Denise Johnson, BS, RRT, Past Speaker
Rick Ford, BS, RRT, FAARC
George Gaebler, MEd, RRT, FAARC
Mari Jones, ARNP, RRT, AE-C, FAARC
Joan A. Kohorst, MA, RRT-NPS
Jim Maguire, PhD
Tim Myers, BS, RRT-NPS
Susan Rinaldo-Gallo, MEd, RRT
Michael Tracy, BA, RRT-NPS
Linda Van Scoder, EdD, RRT
Nicholas Widder, RRT

Absent

Tom Striplin, MEd, RRT (Excused)
Ken Thigpen, BS, RRT
Steven Boas, MD, BOMA Chair

Consultant

John Hiser, MEd, RRT, FAARC, Parliamentarian
Dianne Lewis, MS, RRT, FAARC

Staff

Sam Giordano, MBA, RRT, FAARC, Executive Director
Tom Kallstrom, RRT, Chief Operating Officer
Ray Masferrer, RRT, FAARC, Associate Executive Director
William Dubbs, MHA, MEd, RRT, Director of Education and Management
Cheryl West, MHA, Director Government Affairs
Miriam O'Day, Legislative Affairs
Dale Griffiths, Business Development Director
Tony Lovio, Controller
Brenda DeMayo, Administrative Coordinator

CALL TO ORDER

President Toni Rodriguez called the AARC Board of Directors meeting to order at 8:15 a.m. EST, Thursday, November 29, 2007.

Secretary-Treasurer Colleen Schabacker called the roll and declared a quorum.

ANNOUNCEMENTS/INTRODUCTIONS

President Toni Rodriguez asked members to introduce themselves.

APPROVAL OF MINUTES

Ruth Krueger Parkinson moved “To approve the minutes of the July 16, 2007 meeting of the AARC Board of Directors.”

Motion Carried

Ruth Krueger Parkinson moved “To approve the minutes of the July 17, 2007 meeting of the AARC Board of Directors.”

Motion Carried

E-MOTION ACCEPTANCE

Susan Rinaldo Gallo moved “To ratify the following E-motions conducted over the Board Listserv since July 2007.”

E-Motions

07-3-48.1 “To ratify the appointment of Rick Ford as Chair of the AARC Management Section through December 2008 to fill the vacated position held by Frank Miller.”

07-3-75.1 “That the AARC BOD approve Policy SS 001 as revised (**See Page 3**).”

07-3-75.2 “That the AARC BOD approve Policy CA 005 as revised (**See Page 5**).”

American Association for Respiratory Care

Policy Statement

Page 1 of 2
Policy No.: SS.001

SECTION:	Specialty Sections
SUBJECT:	Specialty Section Operations
EFFECTIVE DATE:	December 14, 1999
DATE REVIEWED:	July 2007
DATE REVISED:	July 2007

REFERENCES:

Policy Statement:

Each Specialty Section shall have a structure in place to assist the Section Chairperson in the accomplishment of the Section's goals and charges.

Policy Amplification:

The Section Chairperson shall seek volunteers from the section membership in order to complete the following section charges:

1. Section Nominations
 - A. Solicit nominations for the office of Section Chairperson-elect
 - B. Submit nominations for the office of Section Chairperson-elect to the AARC Elections Committee in accordance with Association Bylaws.
2. Section Publications
 - A. Solicit information pertinent to Section members and publishing four (4) Section Newsletters each year.
 - B. Actively solicit specialty articles for Association publications, as requested by the President and/or the Executive Director.
3. Section Program

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Policy No.: SS.001

- A. Assist the Association Program Committee as appropriate, with the preparation of a specialty program for the International Congress and Summer Forum.
- B. Make recommendations through the Section Chairperson to the Association Program Committee and the Board of Directors regarding educational programs pertinent to the specialty area that may be considered for presentation to the Association membership.

4. Section Recognition

- A. Recognize exemplary contributions to, or participation in Section activities by, Section members via the Specialty Section Practitioner of the Year Award Program.

5. Specialty Section Consultant Panel

- A. Composed of Section members with recognized expertise in topic areas/issues encompassed by the Specialty Section.
- B. Providing the President and Board of Directors with expert advice and counseling regarding matters pertinent to the respective specialty practice areas and to the specialty practitioners.

6. Each Specialty Section may have other project groups as necessary to complete additional specific charges from the President.

~~7. The Section Chairperson shall publish a list of Specialty Section project groups in the Section publications to encourage Section member participation.~~

8. All Specialty Section members engaged in these functions shall be ~~appointed~~ selected by the Specialty Section Chairperson from among the Section's members.

9. Committees

If a group of section members will work together on an on-going basis then, in accordance with AARC Bylaws, the Section Chairperson must request that the AARC President appoint them to a committee. The activities of such duly appointed section committees, along with the names of the committee members, shall appear in the section's activity reports to the Board of Directors. The Section Chairperson shall publish a list of Specialty Section committees in the Section publications to encourage Section member participation.

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Policy No.: CA 005

SECTION: Chartered Affiliate

SUBJECT: **Chartered Affiliate Travel Grant**

EFFECTIVE DATE: December 2003

DATE REVIEWED: July 2007

DATE REVISED: July 2007

REFERENCES:

Policy Statement:

The chartered Affiliate Travel Fund is to assist affiliates in paying for the travel expenses of AARC officers or executive office staff invited to affiliate meetings to speak about AARC issues. This travel fund will also assist affiliates in paying for the travel expenses of a designated Chartered Affiliate Consultant when an affiliate requests for such services.

Policy Amplification:

1. A grant will be issued which duplicates funding provided by another sponsor or sponsors.
2. Authority:
 - A. The AARC President must approve all Affiliate Travel Fund grants.
 - B. The AARC Executive Director must approve any executive office staff travel.
3. Grant request procedure:
 - A. The Affiliate President sends a completed request form to the AARC Controller, who will forward a copy to the AARC President.
 - B. For grants to assist affiliates in paying for the travel expenses of AARC officers or executive office staff, the AARC President must approve the grant. If the grant is approved, the President will determine the amount of assistance and send the approved request to the AARC Controller.
 - C. For grants to assist the Chartered Affiliate Consultant, the President will consult with the State Affiliate submitting the grant to determine the appropriateness of the request. If the grant is approved, the President will determine the amount of assistance and send the approved request to the AARC Controller.
 - D. All grants will generally be a percentage of total expenses up to a maximum dollar amount. Any other funding received from the other outside parties reduces the total expense to be considered in the grant determination process.

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- E. The AARC Controller will advise the Affiliate President of the grant amount approved.
 - F. The affiliate should acknowledge that it is receiving support from the AARC in its printed materials.
4. Responsibility for expenses:
- A. The affiliate will be responsible for paying all travel expenses.
 - 1. Airfare: The AARC can make flight arrangements, and bill the affiliate.
 - 2. Ground Transportation: The affiliate must provide any necessary transportation between the airport, hotel, and meeting site, and is responsible for the cost of airport transportation or parking in the officer's or staff member's hometown.
 - 3. Hotel: The affiliate must provide the hotel room and taxes.
 - B. Any expenses paid by the AARC will be billed or deducted from the grant.
 - C. Any other non-AARC monies received to defray our speaker's expenses must reduce the amount of expenses ultimately submitted to the AARC under this grant.
5. Payment of the grant:
- A. Copies of paid invoices should be sent to the AARC Controller, who will then issue a check to the affiliate.
6. Expenses (car rental, per diem, airfare, etc.) will be reimbursed in accordance with AARC policy.

DEFINITIONS:

ATTACHMENTS: E: [Chartered Affiliate Travel Grant Application](#)

REQUEST FOR CHARTERED AFFILIATE TRAVEL GRANT

Send this request form to:

Tony Lovio
9425 N. MacArthur Blvd., Suite 100
Irving, TX 75063-4706
Email: lovio@aacrc.org
Fax: (972) 484-2720

Affiliate _____

President _____

Phone _____

Address _____

Fax _____

Email address _____

Person Traveling _____

Dates _____

Purpose of Travel _____

GRANT REQUEST:

Estimated Cost:

Airfare \$ _____

Ground Transportation \$ _____
(Allow \$15/day for hometown airport parking/transportation)

Hotel (including taxes) \$ _____

Per Diem (\$30/day) \$ _____

Total Estimated Cost \$ _____

There are no other sponsors providing funding for this trip.

Affiliate President's Signature _____

GRANT APPROVAL:

Percentage of Expenses _____ % Maximum \$ _____

AARC President's Signature _____

End of E-motions

Motion Carried

PRESIDENT'S REPORT

President Toni Rodriguez reported on the importance of supporting HR 3968 and believes that if this legislation doesn't pass on the Hill, the Association will regret it. She stated that the first 60 years of this Association were spent making a name for respiratory therapists, while the next 60 years will make or break the profession.

EXECUTIVE DIRECTOR REPORT

Sam Giordano commented that President Toni Rodriguez has the ability to deliver a truly motivational speech and members agreed that she has been one of AARC's greatest assets. He stated that respiratory care by protocol is an essential standard for the Association to maintain. The COPD Coalition (patient group) is another voice for our profession that has been an important advantage for AARC. Grace Ann and Ted Koppel have impacted Congress as well as they convey their message about COPD. Dr. Dave Pierson will end his tenure as Editor in Chief of the Journal effective December 31st this year.

Ray Masferrer reported on this year's Congress stating that one of the advantages of having the meeting at the Marriott World Center Hotel was that AARC was not charged for the exhibit space in Orlando. Registration is on target regarding budgeted expenses.

Sam Giordano gave an overview of the purpose and make-up of the RT 2015 and Beyond project which will be comprised of three separate conferences with each having specific purposes. Co-chairs of the first conference to be held March 3-5, 2008 in Dallas are John Walton and Charlie Durbin. Bill Dubbs reported that the list of invitees consists of individuals from over 50 organizations.

Tom Kallstrom reported on the various public awareness programs the AARC currently is involved with to promote the Association, such as the High School project, attendance at the High School Guidance Counselors meeting again this year, Peak Performance Asthma Middle School project, and the Mobile Spirometry Unit in which 8,000 screenings have been performed so far. This program will continue next year with 20 cities participating.

Karen Stewart moved to accept **Recommendation 07-3-1.1** "That the Board of Directors approves revision of AARC's investment policy as presented below:

AARC
PROPOSED
INVESTMENT POLICY AND PROCEDURES
(December 2007)

The Executive Director has been delegated by the Board of Directors the authority for management of the AARC's cash funds. Such investments must be carried within the guidelines provided herein which have been reviewed and approved by the Board of Directors.

Policy Statement

Maximum utilization of Association assets is a primary objective of the Board of Directors. Cash balances represent an available asset that, when effectively managed can contribute to the overall goal of providing services at reasonable costs. Although the investment of cash on either a short or intermediate term basis is not AARC's principal activity, it is the nature of business operations that there will be excess funds available. The objective of the investment guidelines contained herein is to allow the AARC to maximize its return on cash balances while operating within established limitations that will minimize the risk of financial loss.

A matter of primary importance in determining the application of excess cash is ensuring that funds will be available to meet upcoming cash requirements. This can be achieved through the anticipation of cash needs by preparing projections of cash flow. The Executive Office is responsible for the preparation of such projections. However, their accuracy depends on the cooperation and awareness of all directors, officers, committee chairs, etc. All departments should, on a timely basis, provide the Executive Director with any information regarding contractual obligations or other types of arrangements that will significantly affect cash flow.

An additional consideration in the management of cash balances is alternative uses of cash, such as early debt retirement and early payment on accounts in order to receive cash discounts. It is the AARC's position that decisions involving alternative uses of funds will be based on an evaluation and comparison of economic benefits to the Association. After an evaluation, it may dictate that these alternative uses may be more attractive investment alternatives. Generally, in such cases, these alternatives should be pursued. However, should early debt retirement become economically attractive, implementation would require the prior approval of the Board of Directors.

Investment Guidelines

In order to minimize the risk of loss to cash balances, it is necessary to determine levels of risk that are compatible with overall management philosophy. Based on this determination, guidelines can be established for use in the investment of funds. The guidelines set out below establish not only the types of investments that are acceptable,

but also limitations on the amount of any one of those investments that may be held at any point in time.

All investments of Association cash shall fall within the following guidelines:

- Fixed income-type investments
 - Range: 40-60% of entire portfolio; Optimum allocation: 45%
 - Acceptable investments (in no order of importance / use):
 - Bank CD's (FDIC insured ONLY), maximum in any one institution: \$100,000
 - Repurchase agreements collateralized by government securities
 - Bankers Acceptances
 - Federal government or government agency securities
 - Corporate commercial paper with an S & P rating of A-1 or Moody's rating of P-1
 - Money market accounts trading at \$1.00 / unit and comprised of the above type securities
 - Corporate bonds with a rating of no lower than "BBB" by S&P or "Baa " by Moody's.
 - Bond maturities may be staggered over a 10 year period with the average maturity not to exceed 5 years.
 - No one bond may comprise more than 7% of the total fixed income portfolio
 - Bond mutual funds
 - Must be primarily comprised of the above type of investments and
 - Must be judged to be of high quality by considering:
 - S&P or Moody's ratings
 - Past earnings records
 - May include so-called high yield or "junk bonds" (rated below "BBB" by S&P or "Baa " by Moody') but they may not comprise more than 7% of the total BOND PORTFOLIO.
- Equity investments
 - Range: 40-70% of entire portfolio; Optimum allocation: 55%
 - Single issues---Any stock EXCEPT those that are:
 - A Penny Stock (i.e. trading for less than \$1 via OTC (pink sheets))
 - Highly speculative, for example:
 - Be trading with unusually high P/E ratios...50-75++ or
 - Have little or no history of any earnings
 - Stock Mutual funds must be:
 - Primarily comprised of the stock issues allowed for above and
 - Judged to be of high quality by considering:
 - S&P or Moody's ratings
 - Past earnings records / future growth
 - Fund manager experience and track record

- No investment in any security that is related to the tobacco industry is permitted
- No one equity security issue shall comprise more than 5% of the total equity portfolio and no one sector shall comprise more than 15% of the total equity portfolio.
- Alternative investments
 - No more than 5% of portfolio
 - Options, derivatives, future contracts, REITs
 - Range: no more than 2.5% of entire portfolio
 - Each trade must be approved by AARC CEO
 - Real Estate
 - Range: no more than 2.5% of entire portfolio
 - Each purchase must be approved by AARC CEO

Implementation

In implementing the cash management program, the following minimum objective must be retained:

1. Achieve maximum yields on invested funds while insuring reasonable protection of principal.
2. A return on investment / benchmark goal of 2% over the annual Consumer Price Index shall be the long-term (3-5 years) goal

The employment of outside investment counsel may be considered when implementing a part or all of this cash management program. Such professional service must be bound by these same guidelines while undertaking their investment management role. Adequate accounting procedures must be developed, implemented and continually exercised. These procedures will insure adequate forward cash planning, proper controls over transfers of cash, establishment of maturity dates, recording and receipt of interest income and maintenance of individual accounting records for each investment.

All Association held negotiable instruments must be controlled using external safekeeping facilities. Access will be limited and must require a minimum of two appropriately designated representatives.

Any material deviation from these guidelines and their implementation procedures must be submitted to and approved by the Board's Finance Committee."

Motion Carried

RECESS

President Toni Rodriguez recessed the meeting of the AARC Board of Directors at 9:25 a.m. EST, Thursday, November 29, 2007.

RECONVENE

President Toni Rodriguez reconvened the meeting of the AARC Board of Directors at 9:35 a.m. EST, Thursday, November 29, 2007.

STATE GOVERNMENT AFFAIRS REPORT

Cheryl West reported that Capt. Suzanne Pickering, of the US Public Health Service, will be attending this meeting to discuss the new RT commissioned officer status in the PHS, and urged members to introduce themselves to her. In terms of state issues, California may be the next state to address the polysom licensure issue. Scope of practice limitations that arise from polysom licensure efforts can have national impact on what RTs may be able to provide.

FEDERAL GOVERNMENT AFFAIRS REPORT

Miriam O'Day presented an update on health legislation impacting RT issues. The COPD Briefing attracted a high level of participation which focused on Pulmonary Rehab. Legislatively, our bill HR 3968 was introduced by Congressman Mike Ross on October 25th of this year. The Senate companion bill will be introduced in early January 2008.

PRESIDENTS COUNCIL

Dianne Lewis reported that AARC's disaster response program was recently enacted due to the fires in California.

Motion Carried

BYLAWS COMMITTEE REPORT

George Gaebler moved to accept **Recommendation 07-3-10.2** "That the AARC Board of Directors approve the Nebraska State Society bylaws." (See ATTACHMENT "A")

George Gaebler moved to accept **Recommendation 07-3-10.2** "That the AARC Board of Directors approve the Colorado State Society bylaws." (See ATTACHMENT "A")

Motion Carried

Michael Tracy moved to accept **Recommendation 07-3-10.3** "That the AARC Board of Directors approve the Maryland/DC Society bylaws." (See ATTACHMENT "A")

Motion Carried

Karen Stewart moved to accept **Recommendation 07-3-10.4** “That the AARC Board of Directors approve the Virginia Society bylaws.” (See ATTACHMENT “A”)

Motion Carried

George Gaebler moved to accept **Recommendation 07-3-10.5** “That the AARC Board of Directors approve the Utah Society bylaws.” (See ATTACHMENT “A”)

Motion Carried

Joan Kohorst moved to accept **Recommendation 07-3-10.6** “That the AARC Board of Directors approve the Nevada Society bylaws.” (See ATTACHMENT “A”)

Motion Carried

George Gaebler moved to accept **Recommendation 07-3-10.7** “That the AARC Board of Directors approve the attached timeline for states to use as a guide for timely submission of their bylaws changes for committee review and AARC BOD approval and make any changes and approve for addition to the Chartered Affiliate Handbook in the bylaws section.” (See ATTACHMENT “A”)

Motion Carried

EXECUTIVE COMMITTEE REPORT

Toni Rodriguez reported that the Committee met yesterday. She asked that members consider under New Business a change in committee structure for the AARC as there have been recent decreases in activity by the individuals assigned to committees, as well as the fact that large numbers of committees require large numbers of staff support.

FINANCE COMMITTEE REPORT

Nicholas Widder moved to accept **FM 07-3-13.1** “That the AARC BOD ratify the fixed asset purchases since March, 2007 as follows:

- \$38,050.95 – Replace telephone system
- \$ 3,073.66 – Replace failed lap top
- \$ 2,216.59 – New computer – RC Editor
- \$17,500.00 – Basement/office construction for RC Editor”

Motion Carried

Ruth Krueger Parkinson moved to accept **FM 07-3-13.2** “To ratify the following unbudgeted expenses:

\$2845 - Airfare (\$869), hotel and other expenses – Michael Runge to attend the ACCP meeting October 2007

\$1752 - Airfare (\$196) and Hotel for John Hiser to attend ACCP meeting October 2007

\$293 - Airfare – part of 2007 NRP Steering Committee Meeting expenses for Tim Myers to travel to San Francisco - \$629 spent to date (included in \$293)

\$1000 – Donation – HPN Allied Health Professionals Initiative”

Motion Carried

JUDICIAL COMMITTEE REPORT

President Toni Rodriguez commended Chair Trish Blakely and her committee for their work in addressing the high level of complaints this past year.

Joan Kohorst moved “To approve the Standing Committee reports as presented.”

Motion Carried

SPECIAL COMMITTEE REPORTS

AD HOC COMMITTEE ON ETHICS AND PROFESSIONAL BEHAVIOR REPORT

Susan Rinaldo Gallo moved to accept **Recommendation 07-3-28.1** “That the Ad Hoc Committee on Ethics and Professional Behavior be allowed more time in which to complete its charge.”

George Gaebler moved “To accept **Recommendation 07-3-28.1** for information only.”

Motion Carried

AD HOC COMMITTEE ON GERIATRICS REPORT

Karen Stewart moved to accept **Recommendation 07-3-30.1** “That the AARC accept and promote the statement below as a recommendation to the education community for addition to their RT curriculum.”

***A Statement Regarding Respiratory Care Education
Helen M. Sorenson MA RRT FAARC***

Geriatrics is a long standing, relatively neglected area of health care education. However, we are fast approaching a point in the history of our country when adults >65 years will outnumber children <16 years of age. The need for health care educators and health care practitioners versed in geriatric medicine has been termed a "geriatric imperative".

*Geriatricians in the United States are a woefully small group. The American Geriatrics Society has estimated that 36,000 geriatricians will be needed in the next 20 years. Demand far outreaches supply. According to Medical Research News, April 2007, over the last 10 years the number of certified geriatricians in the US has **declined** from 8,800 to 7,100. If this trend continues (which it is likely to) by 2020 there will be approximately 1 geriatrician for every 8,000 - 10,000 adults over age 65 in this country.*

Who will pick up the slack? Who will give bedside care to the elderly? Who will pick up on the subtleties of disease in the elderly? Currently, medical students, nursing students and students in occupational therapy, physical therapy, dental hygiene, pharmacology and clinical lab science programs all include units of study, modules and/or clinical rotations specifically designed to instruct students about clinical care of the elderly. Some respiratory care programs infuse or incorporate units of geriatric study into their curriculum. Some baccalaureate RC programs require their students to take a course in gerontology, the study of aging. What is needed however is geriatrics, the branch of medicine that focuses on health and disease in older adults. As a profession we are not responding to what may be the biggest population we will care for in the near future. What can we do to address this?

There needs to be some required component of geriatric education added to the study of future respiratory therapists. Being an educator I understand the crowded curriculum. What I would propose is that instead of an entire semester course on pediatric/neonatal respiratory care, we require an "age-appropriate" respiratory care course to cover both pediatrics and geriatrics. This may not be as difficult as one might presume. Currently there are at least four respiratory therapy textbooks that have chapters on aging issues. Dr. Petty has just published a new textbook on Diseases of the Elderly, Dana Oakes is working on a Geriatric Pocketbook...there will be resources available for educators. Until and unless there is a required component, we may not be able to add geriatric issues to the board examinations - thus, we have no outcome objectives to show we are training our future therapists in this arena.

Ultimately all health care professional need to be able to practice adequate geriatric bedside care. We are already lagging behind other professions in addressing this. What will be our response?

Colleen Schabacker moved “To refer **Recommendation 07-3-30.1** to the Position Statement Committee and defer action until the findings of the RT 2015 and Beyond Conference have been determined.”

Motion to Refer Carried

**AD HOC COMMITTEE ON VENTILATOR CAPACITY & CAPABILITY
WORKGROUP REPORT**

Karen Stewart moved to accept **Recommendation 07-3-34a.1** “That the AARC BOD approve the 2008 Mechanical Ventilator Capability Survey and that it is implemented to respiratory care department director contacts during the second week of January 2008 for the purpose of determining a baseline number of ventilators currently in use at hospitals and healthcare facilities.”

Karen Stewart moved “To accept **Recommendation 07-3-34a.1** for information only and the project will go forward in January 2008.”

Motion Carried

Karen Stewart moved to accept **Recommendation 07-3-34a.2** “That the AARC Board of Directors approve the 2008 Mechanical Ventilator Capability Survey and implement to national home health and durable medical equipment industry providers during the second week of January 2008 for the purpose of establishing a baseline number of ventilators currently sold and/or leased to hospitals and homebound patients requiring mechanical ventilatory support.”

Karen Stewart moved “To accept **Recommendation 07-3-34a.2** for information only.”

Motion Carried

INTERNATIONAL COMMITTEE REPORT

Colleen Schabacker moved to accept **Recommendation 07-3-23.1** “That the AARC consider developing an international web based membership rate that is based upon the gross national income (GNI) of the country in which the member lives.”

Tim Myers moved “To refer **Recommendation 07-3-23.1** to the Executive Office.”

Motion to Refer Carried

POSITION STATEMENT COMMITTEE REPORT

Linda Van Scoder moved to accept **Recommendation 07-3-26.1** “That the position statement entitled ‘Fraudulent Practices in Respiratory Care’ (ATTACHMENT “B”) be retired and the ‘Ethics and Professional Conduct’ position statement be revised as

identified in ATTACHMENT “C” to assure that the topic of fraud is addressed in the statement.”

Motion Carried

Linda Van Scoder moved to accept **Recommendation 07-3-26.2** “That the position statement entitled ‘Home Respiratory Care Services’ be revised to incorporate the changes identified in ATTACHMENT “D”.”

Motion Carried

Linda Van Scoder moved to accept **Recommendation 07-3-26.3** “That the position statement entitled ‘Respiratory Care Scope of Practice’ be revised to incorporate the changes identified in ATTACHMENT “E”.”

Michael Tracy moved “To amend **Recommendation 07-3-26.3** to substitute the word ‘Care’ for ‘Therapy.’”

Motion to Amend Carried

Amended Motion Carried

Linda Van Scoder moved to accept **Recommendation 07-3-26.4** “That a single Cultural Diversity position statement incorporating both the issues impacting patients and AARC members be published by the AARC.”

Motion Carried

Linda Van Scoder moved to accept **Recommendation 07-3-26.5** “That the position statement entitled ‘Cultural Diversity’ be revised to incorporate the changes identified in ATTACHMENT “F”.”

President Toni Rodriguez ruled **Recommendation 07-3-26.5** out of order.

Susan Rinaldo Gallo moved to accept **Recommendation 07-3-26.6** “That the newly developed position statement entitled ‘Pre-Hospital Ventilator Management Competency’ be approved (see ATTACHMENT “G”).

Motion Carried

Linda Van Scoder moved “To accept **Recommendation 07-3-26.7** “That the Board of Directors approve the Position Statement Review Schedule as presented in ATTACHMENT “H” to be used by the Position Statement Committee to systematically review, revise or delete (as appropriate) all current AARC position statements.”

Motion Carried

Linda Van Scoder moved “That the AARC BOD accept the Special Committee reports as presented.”

Motion Carried

RECESS

President Toni Rodriguez recessed the meeting of the AARC Board of Directors at 11:20 a.m. EST, Thursday, November 29, 2007.

JOINT SESSION

President Toni Rodriguez convened the meeting of the AARC Board of Directors at 1:40 p.m. EST, Thursday, November 29, 2007.

Secretary-Treasurer Colleen Schabacker called the roll and declared a quorum.

COMMITTEE ON ACCREDITATION FOR RESPIRATORY CARE (CoARC) REPORT

Shelley Mishoe and Bill Goding reported that as of November 1, 2007, there were 383 accredited RC programs of which 39 are certificate level programs. She announced NBRC’s newly elected officials for the coming year and advised that the search for an Executive Director for CoARC was recently narrowed by just a few candidates and the new Executive Director will be announced soon.

ELECTIONS COMMITTEE REPORT

Election Committee Chair Cam McLaughlin reported that there was a lower voter turnout, possibly due to the new online voting submission program.

FEDERAL GOVERNMENT AFFAIRS REPORT

Legislative Affairs Director Miriam O’Day gave a brief update on current bills affecting the Association. She stated negotiations are occurring in the Senate and therefore we may see a Medicare package this year. HR 3968 was introduced by Representative Mike Ross (D-AR) and is now before the Energy and Commerce Committee. A Senate companion bill is not yet introduced but there is a commitment to do so. Senator Mike Crapo (R-ID) also supports it. The PACT meeting will be held in March. After many years of work the AARC was able to obtain commissioned officer status in the Public Health Service for those RRTs holding a bachelor’s degree.

STATE GOVERNMENT AFFAIRS REPORT

Government Affairs Director Cheryl West reported that most state governments are out of session but will be back in January. She advised we will see a surge in tobacco tax, public smoking restrictions and asthma education bills. She also advised legislative efforts by the sleep community will be ongoing.

435 PLAN UPDATE

Frank Salvatore reported that there are still six states not in the green. However 25,000 messages have gone to Washington DC since January 2007.

RECESS JOINT SESSION

President Toni Rodriguez recessed the meeting of the AARC Board of Directors at 2:30 pm EST, Thursday, November 29, 2007.

RECONVENE JOINT SESSION

President Toni Rodriguez reconvened the meeting of the AARC Board of Directors at 2:45 pm EST, Thursday, November 29, 2007.

Karen Stewart moved "To enter into Executive Session."

Motion Carried

EXECUTIVE SESSION

President Toni Rodriguez convened Executive Session at 2:50 pm, EST, Thursday November 29, 2007.

Susan Rinaldo Gallo moved "To adjourn Executive Session."

EXECUTIVE SESSION ADJOURNED

President Toni Rodriguez adjourned the Executive Session at 3:05 pm, EST, Thursday, November 29, 2007

JOINT SESSION

AARC 2008 BUDGET

Ruth Krueger Parkinson moved "To accept the AARC 2008 Budget as presented."

Motion Carried

JOINT SESSION ADJOURNED

President Toni Rodriguez adjourned the Joint Session of the AARC Board of Directors at 3:10 p.m. EST, Thursday, November 29, 2007.

REGULAR SESSION

President Toni Rodriguez reconvened the Regular Session of the AARC Board of Directors at 3:30 p.m. EST, Thursday November 29, 2007.

HOUSE OF DELEGATES REPORT

House Speaker Debbie Fox stated that communication is the most important component of interaction between the HOD and BOD. Budget approval process has gone well. She advised that the House implemented a reward program instead of disciplinary programs for getting states to sign revenue sharing contracts. Ms. Fox thanked all AARC staff for their support. It was discussed that the Secretary-Treasurer present a report at the HOD as an official agenda item next year.

SPECIALTY SECTIONS

CONTINUING CARE SECTION

Linda Van Scoder moved to accept **Recommendation 07-3-44.1** “That the AARC participate in the preparation and writing of Performance Measures for Pulmonary Rehabilitation programs with the AACVPR and the ACCP.”

Linda Van Scoder moved “To amend **Recommendation 07-3-44.1** to include the ATS.”

Motion to Amend Carried

Amended Motion Carried

Ruth Krueger Parkinson and Karen Stewart will ask the representatives to these organizations if the AARC has been invited to participate.

SLEEP SPECIALTY SECTION REPORT

George Gaebler moved to accept **Recommendation 07-3-51.1** “That the Board of Directors considers establishing an Ad Hoc Committee or task force charged with developing clinical standards and personnel qualifications for the management of sleep disordered breathing to include a focus on two key areas: the peri-operative setting and the ambulatory setting. The committee should include but not be limited to representatives from the Executive Office, external organizations, and the specialty sections.”

Motion Carried – President Rodriguez will address this.

SURFACE TO AIR SPECIALTY SECTION REPORT

Karen Stewart moved to accept **Recommendation 07-3-52.1** “That the AARC explore the establishment of a formal liaison with the Association of Air Medical Services (AAMS). This recommendation was referred to President Rodriguez for consideration to appoint in January of 2008.”

President Toni Rodriguez ruled **Recommendation 07-3-52.1** out of order as the Executive Office is already working on this. President Rodriguez charged Sam Giordano to report back at the March meeting.

Colleen Schabacker moved “To approve the specialty section reports as presented.”

Motion Carried

PROGRAM COMMITTEE REPORT

Mari Jones reported that there were several complaints about the Reno Convention site and added that the Program Committee considers this a learning experience.

AD HOC COMMITTEE ON ASTHMA EDUCATION ACCREDITATION REPORT

Mari Jones stated that the committee developed 10 standards that would reflect a competent asthma self-management program. It was then given to the Executive Office for follow-up and to determine the best method of moving forward.

Karen Stewart moved to accept **Recommendation 07-3-37.1** “That the AARC take on the business of certifying Asthma Education Programs with the AACVPR and the ACCP.”

Ruth Krueger Parkinson moved “To refer **Recommendation 07-3-37.1** to the Executive Office to work out a formal plan of implementation and report back at the March meeting.”

Motion to Refer Carried

ROUNDTABLES

ASTHMA DISEASE MANAGEMENT ROUNDTABLE REPORT

Tim Myers stated he is in the process of searching for a 2008 chair for the Disease Management Roundtable.

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

Motion Carried

AD HOC COMMITTEE ON OFFICER STATUS REPORT

Sam Giordano reported that Dr. Mike Morris, a Colonel and pulmonologist in the U.S. Army, is a willing participant in moving forward the officer status issue with the support of his superior Col. Jackie A. Hayes. The AARC took on the job of making the Army respiratory education consistent with their civilian counterparts to bring military therapists into the 21st century.

RECESS

President Toni Rodriguez recessed the meeting of the AARC Board of Directors at 4:40 p.m. EST, Thursday, November 29, 2007.