

North Carolina Respiratory Care Board

Meeting Minutes

January 6, 2005

Members Present:

Joseph Coyle, MD
Mary Lou Fleming
Nancy M. Hall
Margaret A. Mitchell, RRT, RCP
Thomas Goodin, MD
Bruce K. Rubin, MEngr, MD
Ralph Webb, RRT, RCP
William Croft, RRT, RCP
Lisa Fox

Others Present:

Floyd Boyer, RRT, RCP –Executive Director
William Shenton –Board Counsel
Jane Carter – Administrative Secretary
Judy Green – Board Investigator

Absent:

Wayne Beauford, MD

Call to Order:

Dr. Coyle called the meeting to order at 10:00 AM.

Conflict of Interest Notice:

Dr. Coyle read the North Carolina Board of Ethics' Conflict of Interest Reminder. If there are any conflicts of interest on any votes, Board members should refrain and inform the Chair at that time.

Dr. Coyle reminded the audience that the Board meetings are recorded and are a matter of public record. Comments and questions raised by the audience are recorded and may be part of the minutes.

Election of Officers:

Mr. Croft nominated Dr. Coyle to serve as Chairman. The nomination was seconded and carried unanimously. Dr. Rubin nominated Mr. Webb to serve as Vice-Chair. The nomination was seconded and carried unanimously. Mr. Croft nominated Ms Fleming to serve as Secretary/Treasurer. The nomination was seconded and carried unanimously.

Committee Appointments:

Dr. Coyle made a recommendation that the committees remain as they are currently. There was no objection by the Board, and Dr. Coyle then confirmed that he would re-appoint the same persons to each of the standing committees.

Approval of Minutes:

Dr. Coyle presented the minutes from the October 7, 2004 Board meeting. Ms Fleming made the motion to approve the minutes as written. The motion was seconded and was carried unanimously.

Treasurer's Report:

Ms. Fleming reported that there is \$140,962.24 in the checking and savings accounts. Total assets are \$149,017.95. Revenue is below budget due to the online registration lag time for money being transferred into the checking account. Expenses are above budget due to the approval of a new computer system, travel, payroll, and telephone expenditures. Ms Fleming presented a budget for January 2005 through June 2005. She indicated that it was advisable for the Board to adopt a budget that paralleled the State's fiscal year, which runs from July 1 through June 30 of each year. Ms. Fleming recommended that the budget be accepted. The Board approved the recommendation unanimously.

Executive Director's Report:

Since the last Board meeting, Mr. Boyer and Board staff have completed the following:

- Met with 3 CPA firms to discuss auditing of the Board's financial records as charged by the Board Chair. Two proposals were received and will be presented during the Unfinished Business Session.
- Met with Tommy Williams, RCP of the NC Society for Respiratory Care on October 29, 2004. He has been appointed by the Society as the liaison to the Board. He will report all Board actions to the Society in order to help keep the membership up to date.
- Ms Green completed 112 visits to facilities to check for compliance with Board Statutes and Rules or as a result of complaints received by the Board. Eight facilities and/or individuals were found to be out of compliance. Mr. Boyer completed 18 investigations resulting from complaints with 7 individuals being out of compliance. There are currently 23 ongoing investigations.
- As of December 31, 2004: there have been 4137 Respiratory Care Practitioner licenses issued. There are 3389 Active, 72 Inactive, 3 Temporary, and 103 Provisional licenses. Currently there are 126 Respiratory Care Assistant Registrations. There are 24 pending applicants, 518 expired licenses, 10 deceased practitioners, 11 withdrawn applications, 1 voluntarily surrendered license, 2 revoked licenses, and 5 denied applications.

Ethics Committee Report:

There was no report.

Practice Committee Report: Dr. Rubin presented a draft Declaratory Ruling in response to a request from Heritage Hospital regarding RCP's administering pharmacologic agents as related to cardiac stress testing. Following a discussion by the Board, the word "direct" was added to "under medical supervision" on page 3. The committee recommended the approval of the declaratory ruling with the addition of under "direct" medical supervision. The recommendation was seconded and was carried unanimously.

Dr. Rubin presented a position statement relating to the dispensing of CPAP and BiPAP devices for home use by Home Medical Equipment Companies. It has come to the attention of the Board that some companies may be dispensing CPAP and BiPAP devices for home use with limited or no involvement by RCP's licensed by the Board and without appropriate patient education except over the telephone. Following a discussion by the Board and public comments on this issue, Dr. Coyle recommended tabling the position statement to allow the committee to do some revisions. Mr. Boyer was charged to write a cease and desist letter to Rotech because the Board had received some information to the effect that Rotech was dispensing CPAP and BiPAP devices for home use without the involvement of RCP's licensed by the Board.

Dr. Rubin presented a revision to the declaratory ruling regarding Polysom Techs. The definition of direct supervision was added to page 3. He reported that the committee recommended accepting the ruling with the change. After discussion by the Board and public, the Board voted unanimously to adopt the ruling with the change.

Rules Committee Report: Mr. Webb recommended a change to 21 NCAC 61.0305 to allow individuals to remain on Inactive Status for 60 months instead of 24 months. Then if they wish to change to Active status, they would have to complete 10 CE's per each year of inactivity as required by 21 NCAC 61.0201. Proposed changes to 21 NCAC 61.0308 add the responsibility of supervising RCP's to report terminations and violations for RCP's under their supervision to the Board. Reports must be made with 15 days of the occurrence. Mr. Webb presented the timeline for the rules changes. Following discussion by the Board, the recommendation was seconded and passed unanimously.

Mr. Webb also presented a letter from Wanda Marlowe, of Pitt County Memorial Hospital, requesting that the renewal period be changed from 1 year to 2 years. The recommendation from the committee is to leave the renewal period as it is for now and to look further into the request. It would involve a Statute change. Following a discussion by the Board, the recommendation was accepted.

Mr. Webb presented a letter from Edith Helms, who is 85 years old, requesting that a retired status be considered. The Board recommended that an Emeritus Status be considered at the next point when the Board believed that changes to the Respiratory Care Practice Act should be proposed to the General Assembly.

**Education Committee
Report:**

Mr. Croft presented the BSRT update. RCP's attending the NC Society of Respiratory Care Symposium in Asheville were surveyed to determine the need for a BS degree program. A survey will now be sent to managers and administrators.

Mr. Croft also reported on the status of the refresher course for therapists.

The NBRC has adopted a new admission policy which allows students in accredited respiratory care education programs to apply for and attempt the CRT exam 30 days prior to actual graduation. There is a three year limit on the length of time an individual may remain eligible for the RRT exam following graduation from an accredited advanced level education program.

**Investigation and Informal
Settlement Committee:**

Ms Mitchell reported that the committee met on January 5, 2005 and interviewed 9 individuals. Five individuals did not show. Any disciplinary actions are pending and awaiting the closed session of today's meeting.

Ms Mitchell presented recommended changes to the Disciplinary Manual. Following a discussion by the Board, the recommended changes were accepted unanimously.

Unfinished Business:

Mr. Boyer interviewed 3 CPA firms regarding an audit. One firm declined to submit a proposal. Koonce Wooten & Haywood and Stancil & Company submitted proposals. Mr. Boyer noted that at the suggestion of Board counsel, a letter responding to the recent request for audited financial statements had been sent back, with detailed financial data, and the suggestion that in light of the Board's meticulous

record-keeping, no audited financial statements were necessary for prior years. Following a discussion by the Board, it was decided to have an audit done for July 1, 2004 through June 30, 2005 and then to have one done annually. Dr. Goodin made a motion to hire the firm of Koonce Wooten & Haywood to perform the audit. The motion was seconded and passed unanimously.

New Business:

The Board has been made aware by e-mail of interest in Anesthesiologist Assistant licensure in North Carolina. Dr. Coyle asked Mr. Boyer to stay informed about the issue.

There was a request from Cape Fear Valley Medical Center for a declaratory ruling on RCP's training family members to change tracheotomy tubes on patients who are being discharged to their homes. Following a discussion by the Board, Mr. Boyer was charged with notifying Cape Fear Valley that this activity falls within the scope of practice of RCP's.

Mr. Boyer informed the Board that the SBI requires each Board member to read the rules regarding receipt of criminal history record information.

Dr. Coyle requested that each Board member read the information on access to health care records in the memorandum prepared by Board Counsel and the newsletter from the NC Board of Ethics.

Mr. Boyer presented the revised expense voucher.

Mr. Croft presented a request to put the RCA verifications on the website. After a discussion by the Board, it was decided to leave the registrations as they are.

Mr. Boyer introduced Diana Statler who was sitting in for Tommy Williams, as the representative of the NC Society for Respiratory Care.

Other New Business:

There being no further business, Dr. Coyle recessed the meeting for lunch at 11:44 AM.

Executive Session:

At 12:04 PM Ms Fleming made a motion to go into Executive session The motion was seconded by Dr. Goodin and was carried unanimously.

At 1:29 PM Dr. Goodin made a motion to go into General session The motion was seconded by Mr. Croft and was carried unanimously.

Adjournment:

The meeting was adjourned at 1:30 PM.