



**Item: 2017-2021 Strategic Plan**

**Item Summary:** The Board's final Strategic Plan 2017-2021 is submitted for the Board's review and approval.

- Board Action:
1. President calls the agenda item and it is presented by or as directed by the President.
  2. President requests motion:
    - to approve the Board's 2017-2021 Strategic Plan as submitted.
    - any other appropriate motion.
  3. President requests a second to motion (if not already made).
  4. Board member discussion/edits (if applicable).
  5. Inquire for public comment / Further Board discussion as applicable
  6. Repeat motion and vote: 1) aye, in favor, 2) no, not in favor, or 3) abstain

Attached is the final draft of the Board's 2017-2021 Strategic Plan for the Board's review and approval. Upon the Board's approval of the plan, it will be posted on the Board's website.



# Strategic Plan

**2017 - 2021**



Alan Roth, MS, MBA, RRT-NPS, FAARC, President

Thomas Wagner, BS, RRT, FAARC, Vice President, Board Member

Mary Ellen Early, Board Member

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Laura C. Romero, PhD, Board Member

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Edmund G. Brown, Jr., Governor

Alexis Podesta, Secretary, Business Consumer Services and Housing Agency

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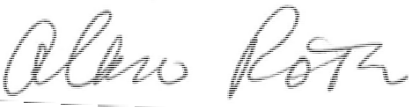
## Message from the President

I am very pleased to present our strategic plan for 2017-2021. This plan represents our revised priorities and goals attained through a culmination of work by our very dedicated executive officer, staff, Board members, DCA, and other stakeholders, both professionals and individuals. This collaborative effort ensured all stakeholders have a voice in guiding the Respiratory Care Board to achieve its mandate of consumer protection.

The Board's highest priority is protection of the public. Thus, the Board continually strives to attain meaningful improvements in our programs and the respiratory care profession in line with this priority. As the healthcare environment continues to evolve, we will need to focus on strengthening our commitment to our stakeholders and encouraging increased participation.

This strategic plan sets realistic and achievable goals for the period 2017-2021. As President of the Board, I look forward to our stakeholders participating actively in our board meetings and discussion, and achieving sustainable results. The future of the profession demands that we all commit ourselves to be leaders of our profession. I welcome this continued effort moving forward.

Respectfully submitted,



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Alan Roth MS MBA RRT-NPS FAARC FCCP  
President, Respiratory Care Board of California

# Respiratory Care Board of California

## About

The Respiratory Care Board of California (Board or RCB) is part of the California Department of Consumer Affairs, whose mission is to ensure the protection of the public in exercising its licensing, regulatory, and disciplinary functions. The Board carries out the following to ensure it meets its mandate:

- Screens each application for licensure to ensure minimum education and competency standards are met and conducts a thorough criminal background check on each applicant.
- Investigates complaints against licensees primarily as a result of updated criminal history reports (subsequent rap sheets) and mandatory reporting (licensees and employers are required to report violations).
- Aggressively monitors respiratory care practitioners (RCPs) placed on probation.
- Exercises its authority to penalize or discipline applicants and licensees which may include: 1) issuing a citation and fine; 2) issuing a public reprimand; 3) placing the license on probation (which may include suspension); 4) denying an application for licensure, or 5) revoking a license.
- Addresses current issues related to the unlicensed and/or unqualified practice of respiratory care.
- Promotes public awareness of its mandate and function, as well as current issues affecting patient care.

## History

The enabling statute to license RCPs was signed into law in 1982, thus establishing the Respiratory Care Examining Committee. In 1994, the name was changed to the Respiratory Care Board of California.

The Board was the eighth “allied health” profession created “within” the jurisdiction of the Medical Board of California (MBC). Although created within the jurisdiction of the MBC, the Board had sole responsibility for the enforcement and administration of the Respiratory Care Practice Act (RCPA). At the time the Board was established, the MBC had a Division of Allied Health Profession (DAHP) designated to oversee several allied health committees. It was believed that this additional layer of oversight (in addition to the Department of Consumer

Affairs (DCA)) was unnecessary and ineffective. Therefore, the DAHP subsequently dissolved on July 1, 1994.

The Board is comprised of a total of nine members, including four public members, four RCP members and one physician and surgeon member. Each appointing authority, the Governor, the Senate Rules Committee and the Speaker of the Assembly, appoints three members. This current framework helps prevent quorum issues and provides a balanced representation needed to effectuate the Board's mandate to protect the public from the unauthorized and unqualified practice of respiratory care and from unprofessional conduct by persons licensed to practice respiratory care (B&P, § 3701). The Board is further mandated to ensure that protection of the public shall be the highest priority in exercising its licensing, regulatory, and disciplinary functions. Whenever the protection of the public is inconsistent with other interests sought to be promoted, the protection of the public shall be paramount (B&P, § 3710.1).

The Board continually strives to enforce its mandate and mission in the most efficient manner, through exploring new and/or revised policies, programs, and processes. The Board also strives to increase the quality or availability of services, as well as regularly provide courteous and competent service to its stakeholders.

## Mission

To protect and serve consumers by licensing qualified respiratory care practitioners, enforcing the provisions of the Respiratory Care Practice Act, expanding the availability of respiratory care services, increasing public awareness of the profession; and supporting the development and education of respiratory care practitioners.

## Vision

The Board's vision is that all California consumers are aware of the Respiratory Care profession and its licensing Board, and receive competent and qualified respiratory care.

## Values

**Ethical** – Possession of the morals and values to make decisions with integrity that are consistent with the Board's mandate and mission.

**Diversity** – Recognize the rights of all individuals to mutual respect and acceptance of others without biases based on differences of any kind.

**Dignity** – Conduct business honorably without compromise to the Board or individual values.

**Individual Growth** – Strive to continually excel and learn both personally and professionally.

**Quality** – Strive for superior service and products and meaningful actions in serving stakeholders.

**Flexibility** – Provide sincere considerations of other interests, factors, and conditions and be willing and/or able to modify previous positions for the betterment of the Board and its mandate and mission.

**Teamwork** – Strive to work cooperatively and in a positive manner to reach common goals and objectives.

**Efficiency** – Continually improve our system of service delivery through innovation, effective communications, and development, while mindful of the time, costs, and expectations stakeholders have invested.



## Strategic Goal Areas

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<b>1</b>	<b>Enforcement</b> Protect consumers by preventing violations and effectively enforcing laws and regulations when violations occur.
<b>2</b>	<b>Education</b> Ensure the initial and continuous competency of all licensed Respiratory Care Practitioners (RCPs).
<b>3</b>	<b>Practice Standards</b> Establish regulatory standards for respiratory care practice in California and ensure the professional qualifications of all Respiratory Care Practitioners (RCPs).
<b>4</b>	<b>Organizational Effectiveness</b> Enhance organizational effectiveness and improve processes and the quality of customer service in all programs.

## Goal 1: Enforcement

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*Protect consumers by preventing violations and effectively enforcing laws and regulations when violations occur.*

1. Seek regulatory amendment to provide that “Commission of an act or conviction of a crime involving neglect, endangerment, or abuse involving a person under 18 years of age, a person 65 years of age or older, or a dependent adult as described in Section 368 of the Penal Code, without regard to whether the person was a patient” shall be considered to be substantially related to the qualifications, functions or duties of a respiratory care practitioner, in order to ensure the Board may take disciplinary action against a licensee for such crimes and to increase consumer protection.
2. Research the legalization of marijuana in the State of California and its impact on applicants and licensees to effectively regulate the new law and ensure consumer protection.
3. Seek legislation to require an individual petitioning for reinstatement of licensure to pass the current licensing exams to ensure competency at the current minimum required level.
4. Recruit and train 2-5 additional subject matter experts (SMEs) to maintain investigative cycle times and ensure consistency amongst SMEs and cases.
5. Create detailed disciplinary action summaries to post on Board’s website to provide transparency to consumers.
6. Collect data related to discipline and educational institutions to identify institutions that may be graduating a significant number of students, later subject to disciplinary action.
7. Increase the number of Continuing Education audits to 10% to ensure compliance.
8. Research and evaluate whether BreEZe can be modified to increase efficiencies in auditing licensees for continuing education compliance.
9. Revise and strengthen contract language to require bodily fluid collection sites be available closer to a probationer’s home or work to promote compliance.
10. Update disciplinary guidelines to ensure they are current and reflect current laws.
11. Seek legislation to clarify that once an applicant is placed on probation, the applicant is subject to monthly probation monitoring costs in order to recover costs associated with monitoring probationers that are newly licensed.
12. Eliminate the submission of a Department of Motor Vehicles history as a standard application requirement to increase efficiency in the application process.

## Goal 2: Education

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*Ensure the initial and continuous competency of all licensed Respiratory Care Practitioners (RCPs).*

1. Develop an action plan to establish laws and regulations or accrediting standards for student clinical requirements to increase consumer protection and improve education outcomes.
2. Develop an action plan to incorporate a baccalaureate degree provision in the Respiratory Care Practice Act (RCPA) to ensure education requirements meet the demand of the respiratory care field.
3. Revise continuing education (CE) regulations to provide clarity and improve program effectiveness.
4. Upon completion of CE revision requirements, develop brochures to be posted to Board's website, and mailed to each licensee to ensure awareness of current CE requirements.
5. Seek legislative authority to approve/disapprove a school based on clinical practice and/or exam pass/fail rates] and/or accreditation status to ensure poor performing programs are not continuing to move unprepared students through their programs.
6. Educate students pursuing RCP licensure about the consequences of having convictions and violations of the RCPA.

## Goal 3: Practice Standards

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*Establish regulatory standards for respiratory care practice in California and ensure the professional qualifications of all Respiratory Care Practitioners (RCPs).*

1. Enforce the RCPA against facilities allowing unlicensed or unqualified personnel to perform respiratory care, to cease unsafe practice and ensure patient safety.
2. Identify mechanisms in institutions to fully utilize the respiratory care scope of practice through an educational campaign to decrease costs.
3. Increase communication with the Medical Board of California as it relates to standards of practice for MDs to fully utilize RCPs.
4. Research and collaborate with other state agencies to potentially establish patient care ratios, define a respiratory care unit under Title 22, encourage the use of evidence based protocols, and prohibit concurrent therapy to ensure patient safety and health.

## Goal 4: Organizational Effectiveness

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*Enhance organizational effectiveness and improve processes and the quality of customer service in all programs.*

1. Establish a program to provide training to new board members in reviewing and applying the Business and Professions Code to enforcement cases.
2. Establish regulations to distinguish documentation required to prove an honorable discharge to codify the process in accordance with Senate Bill 1226 (statutes of 2014) to expedite applications from military personnel that were honorably discharged.
3. Seek a legislative amendment to accurately reflect the name(s) of examinations for licensure to ensure clarity in the law.
4. Develop a module within BreEZe<sup>1</sup> to provide clarity and efficiency to Board members in regard to case discipline.
5. Update office equipment to promote efficient and effective execution of daily tasks and responsibilities.
6. Research the integration of BreEZe to a paperless application for licensure in order to improve customer satisfaction by improving processing times and reducing paperwork.

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<sup>1</sup> BreEZe is the Board's licensing and enforcement tracking system.

## Strategic Planning Process

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To understand the environment in which the Board operates as well as identify factors that could impact the Board's success in carrying out its regulatory duties, the Department of Consumer Affairs' SOLID Unit conducted an environmental scan of the Board's internal and external environments by collecting information through the following methods:

- One-on-one interviews conducted with eight Board Members during April 2017.
- Management focus group conducted with the Board's two managers and Executive Officer in April 2017.
- Staff focus group was conducted with 12 staff members participated during in April 2017.
- Email survey conducted where three staff members participated during in May 2017.
- An online survey sent to external stakeholders received 159 responses in April 2017.

The most significant themes and trends identified from the environmental summary were discussed with the Executive Officer, management, and Board members during a strategic planning session facilitated by SOLID on June 30, 2017. This information guided the Board in the development of its strategic objectives outline in this 2017-2021 strategic plan.



## Respiratory Care Board of California

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*This strategic plan is based on staff, management, board member, and stakeholder information and discussions facilitated by SOLID for the Respiratory Care Board of California in June 2017. Subsequent amendments may have been made after the RCB's adoption of this plan.*