Agenda Item: 6 Meeting Date: 10/26/18

Item: Update on Proposed Continuing Education Regulatory Language

Item Summary: Staff are presenting feedback received thus far on proposed continuing

education regulation changes. Comment period remains open until

December 1, 2018.

Board Action: 1. President calls the agenda item and it is presented by or as directed

by the President.

2. Item presented for discussion purposes.

Background: At its May 2018 meeting, the Board moved to circulate draft language and obtain stakeholder feedback prior to initiating the rulemaking (regulation)

process to revise continuing education requirements.

Board staff issued the attached "NOTICE" in August with a requested date

of December 1, 2018 to provide comments. Also attached are comments

received through October 15, 2018.

Information is presented to the Board for discussion.





RESPIRATORY CARE PRACTITIONER (RCP) PROPOSED CONTINUING EDUCATION REGULATION CHANGES

The Respiratory Care Board (Board) is amending regulations concerning Continuing Education (CE) requirements. Given that these changes may have a significant impact on RCP license renewals, the Board is reaching out to stakeholders for feedback prior to pursuing legal regulatory changes.

All comments and suggestions are welcome and providing an explanation for your suggested change(s) would be appreciated, but is not required. Please keep in mind that "protection of the public is the highest priority" of the Board. The Board is mandated to protect the public from the unauthorized and unqualified practice of respiratory care.

The following pages include proposed changes based on public comment and the Board's most recent workforce study. Language identifying significant changes is highlighted in yellow. Those items identified in grey-filled boxes as an "Additional Suggested Change" were made subsequent to the original changes proposed. You are welcome to comment or make suggestions on these as well.

Please note that <u>underlined</u> text represents new proposed text and strikeout text represents text that is proposed to be deleted.

Changes may be submitted by email or in writing to:

Please submit comments no later than December 1, 2018

Respiratory Care Board 3750 Rosin Court, Suite 100 Sacramento, CA 95834 E-mail: rcbinfo@dca.ca.gov

Note: Final regulatory changes will not go into effect prior to 2020 and will be implemented using a roll out method allowing RCPs a full two year cycle to adhere to changes prior to their license renewals.

California Code of Regulations, Title 16. Division 13.6. Article 5
Respiratory Care Board. Continuing Education
PROPOSED LANGUAGE

§ 1399.349. Continuing Education Defined.

§ 1399.349. Continuing Education Defined.

"Continuing Education" means the variety of forms of learning experiences, including, but not limited to, lectures, conferences, academic studies, in-service education, institutes, seminars, home study, internet courses, and workshops, taken by respiratory care practitioners for licensure renewal. These learning experiences are meant to enhance the knowledge of the respiratory care practitioner in the practice of respiratory care in direct and indirect patient care. Continuing education does not include basic education or training needed to become a licensed RCP.

Note: Authority cited: Sections 3719 and 3722, Business and Professions Code. Reference: Sections 3719 and 3740, Business and Professions Code.

§ 1399.350. Continuing Education Required.

§ 1399.350. Continuing Education Required.

- (a) Each respiratory care practitioner (RCP) is required to complete 30 hours of approved continuing education (CE) every 2 years <u>by an approved provider as identified in section 1399.351</u>, <u>as follows:</u>

 <u>At least two-thirds of the required CE hours shall be directly related to clinical practice.</u>
- (1) A minimum of 10 hours must be directly related to practitioner leadership, case

 managment, or health-care financial reimbursement, cost containment or management. Successful completion of the Law and Professional Ethics Course as provided in section 1399.352, may be counted toward this requirement
 - (2) A minimum of 15 hours must be directly related to the clinical practice of respiratory care. Successful completion of credentialling or certification examinations may be counted toward this requirement as provided in section 1399.353.
 - (3) Up to 5 hours may be earned through physical attendance at Respiratory Care Board,
 California Society for Respiratory Care, or American Association for Respiratory Care meetings
 open to the public or courses related to the role of a health care practitioner or indirectly related to
 - 72 <u>story care as may be included in section 1399.354.</u>

Comments

(b) A minimum of 15 hours of CE as outlined in subdivision (a) must be earned from courses or meetings provided in a live, in-person format requiring physical attendance.

ADDITIONAL SUGGESTED CHANGE [01]

Eliminate proposed change found in subdivision (b) of section 1399.350

Petition with 66 signatures (from the Modesto area) was presented to the Board at its 5/14/18 meeting in support and urgence that the Board continue to accept CE certificates from online sources and eliminate any suggestion of requiring live, inperson course attendance.

- (c) Completion of courses or successful completion of credentialling or certification examinations may not be repeated for credit during any one renewal cycle period.
- (b) (d) To renew the license, each RCP shall report compliance with the CE requirement. Supporting documentation showing evidence of compliance with each requirement under this Article, shall be submitted if requested by the board. Upon the board's request, the licensee shall provide the board with documentation as provided in subdivision (b) of section 1399.356 or for courses completed through an approved post-secondary institution, an official transcript showing successful completion of the course accompanied by the catalog's course description.
- (e) (e) CE supporting documentation shall be retained by the licensee for a period of four years. Note: Authority cited: Sections 3719 and 3722, Business and Professions Code. Reference: Section 3719, Business and Professions Code.

§ 1399.351. Approved Providers.

§ 1399.351. Approved Providers.

- (a) CE providers approved to provide courses or directly issue continuing education credit for on-line or live, in-person courses include:
- (1) Any post-secondary institution accredited by a regional accreditation agency or association recognized by the United States Department of Education.
 - (2) A general acute care hospital licensed by the California Department of Public Health.
 - (3) The American Association for Respiratory Care.
- (4) The California Society for Respiratory Care (and all other state societies directly affiliated with the American Association for Respiratory Care).
 - (5) The American Medical Association.
 - (6) The California Medical Association.
 - (7) The California Thoracic Society.
 - (8) The American College of Surgeons.
 - (9) The American College of Chest Physicians.
 - (10) The American Heart Association.

ADDITIONAL SUGGESTED CHANGE [02]

Add the following providers to subdivision (a) of Section 1399.351:

- (11) American Lung Association
- (12) Allergy and Asthma Network
- (13) Society for Critical Care Medicine(SCCM)
- (14) National Asthma Educator Certification Board
- (b) Additional CE providers approved to provide live, in-person courses include any provider approved or accredited by:
 - (1) any entity identified in subdivion (a),
 - (2) the Accreditation Council for Continuing Medical Education, or
 - (3) the California Board of Registered Nursing.

§ 1399.352. Law and Professional Ethics Course.

§ 1399.350.5. 1399.352. Law and Professional Ethics Course.

- (a) As part of required continuing education, every person licensed under this chapter shall successfully complete a course in law and professional ethics as provided in section 1399.352.7 1399.357 of this division, during every other license renewal cycle.
- (b) Continuing education units earned in accordance with this section shall represent three hours of continuing education towards the requirement in subdivision (a)(1) of section 1399.350. units toward the non-clinical practice requirements set forth in section 1399.350(a). However, the course may be taken for continuing education credit only once during any renewal period.

Note: Authority cited: Sections 3719.5 and 3722, Business and Professions Code. Reference: Sections 3719 and 3719.5, Business and Professions Code.

§ 1399.353. Credentialling and Certification Exams.

§ 1399.351. Approved CE Programs. 1399.353. Credentialling and Certification Exams.

- (a) Any course or program meeting the criteria set forth in this Article will be accepted by the board for CE credit.
- (b) Passing an official credentialling or proctored self-evaluation examinations Successful completion of an examination leading to one of the following credentials awarded by the National Board for Respiratory Care, shall be approved for 15 hours of continuing education (CE): as follows:
- (1) Adult Critical Care Specialist Specialty Examination (ACCS) 15 hours;
- (2) Certified Pulmonary Function Technologist (CPFT) 15 CE hours;
- (3) Registered Pulmonary Function Technologist (RPFT) 15 CE hours;
- (4) Neonatal/Pediatric Respiratory Care Specialist (NPS) 15 CE hours;
- (5) Sleep Disorders Testing and Therapeutic Intervention Respiratory Care Specialist (SDS) 15-hours;

ADDITIONAL SUGGESTED CHANGE [03]

Add the following credential to subdivision (a) of Section 1399.353:

(6) Registered Respiratory Therapist

Comment

- (b) Successful completion of the following certification examinations, approved by an entity listed in section 1399.351, shall be approved for 15 hours of CE for initial certification and 5 hours of CE for recertification:
- (6) (1) Advanced Cardiac Cardiovascular Life Support (ACLS) number of CE hours to be designated by the provider;
- (7) (2) Neonatal Resuscitation Program (NRP); number of CE hours to be designated by the provider; and
- (8) (3) Pediatrics Advanced Life Support (PALS) number of CE hours to be designated by the provider.
- (9) (4) Advanced Trauma Life Support (ATLS) number of CE hours to be designated by the provider

ADDITIONAL SUGGESTED CHANGE [04]

Add the following certification to subdivision (b) of Section 1399.353:

(5) Asthma Educator Certified (AE-C) [provided by the National Asthma Educator Certification Board]

(c) CE credit will not be granted for:

- (1) any review and/or preparation courses for credentialing or certification examinations,
- (2) basic life support credentialling, or
- (3) the recredentialling of any certification not expressly identified in subdivision (b).

ADDITIONAL SUGGESTED CHANGE [05]

- D) Modify Section 1399.353 to acknowledge the following specific certifications for CE credit for <u>initial certification only</u> and for the number of hours given by the provider:
 - Pulmonary Rehabilitation Certified [provided jointly by the AARC and the AACVPR (American Association of Cardiovascular and Pulmonary Rehabilitation); currently for 12 hours]
 - Tobacco and Smoking Cessation-Certified (provided by the AARC; currently 5 hours)
 - COPD Educator-Certified (provided by the AARC; currently 10 hours)
- (c) Any course including training regarding the characteristics and method of assessment and treatment of acquired immune deficiency syndrome (AIDS) meeting the criteria set for in this Article, will be accepted by the board for CE credit.
- (d) Examinations listed in subdivisions (b)(1) through (b)(5) of this section shall be those offered by the National Board for Respiratory Care and each successfully completed examination may be counted only once for credit.
- (e) Successful completion of each examination listed in subdivisions (b)(6) through (b)(9) of this section may be counted only once for credit and must be for the initial certification. See section 1399.352 for re-certification CE. These programs and examinations shall be provided by an approved entity listed in subdivision (h) of Section 1399.352.
- (f) The board shall have the authority to audit programs offering CE for compliance with the criteria set forth in this Article.

Note: Authority cited: Sections 3719 and 3722, Business and Professions Code. Reference: Sections 32 and 3719, Business and Professions Code.

§1399.354. General Continuing Education.

§ 1399.352. Criteria for Acceptability of Courses. §1399.354. General Continuing Education.

Courses related to the role of a health care practitioner or indirectly related to respiratory care include, but are not limited to the following:

Acceptable courses and programs shall meet the following criteria:

- (a) The content of the course or program shall be relevant to the scope of practice of respiratory care. Credit may be given for a course that is not directly related to clinical practice if the content of the course or program relates to any of the following:
- (1) Those activities relevant to specialized aspects of respiratory care, which activities include education, supervision, and management.
- (2) Health care cost containment or cost management.
- (3) (1) Preventative health services and health promotion.

ADDITIONAL SUGGESTED CHANGE [06]

Add the following language to subdivision (1) of section 1399.354:

- (1) Preventative health services and health promotion, including tobacco and smoking cessation counseling.
- (4) (2) Required abuse reporting.
- (5) (3) Other subject matter which is directed by legislation to be included in CE for licensed healing arts practitioners.
- (4) Any course including training regarding the characteristics and method of assessment and treatment of acquired immune deficiency syndrome (AIDS).
- (6) Re-certification for ACLS, NRP, PALS, and ATLS.
- (7) Review and/or preparation courses for credentialing examinations provided by the National Board for Respiratory Care, excluding those courses for entry-level or advance level respiratory therapy certification.
- (b) The faculty shall be knowledgeable in the subject matter as evidenced by:
- (1) A degree from an accredited college or university and verifiable experience in the subject matter, or
- (2) Teaching and/or clinical experience in the same or similar subject matter.
- (c) Educational objectives shall be listed.
- (d) The teaching methods shall be described, e.g., lecture, seminar, audio-visual, simulation.
- (e) Evaluation methods shall document that the objectives have been met.
- (f) Each course must be provided in accordance with this Article.
- (g) Each course or provider shall hold approval from one of the entities listed in subdivision (h) from the time the course is distributed or instruction is given through the completion of the course.
- (h) Each course must be provided or approved by one of the following entities. Courses that are provided by one of the following entities must be approved by the entity's president, director, or other

appropriate personnel:

- (1) Any post-secondary institution accredited by a regional accreditation agency or association recognized by the United States Department of Education.
- (2) A hospital or health-care facility licensed by the California Department of Health Services.
- (3) The American Association for Respiratory Care.
- (4) The California Society for Respiratory Care (and all other state societies directly affiliated with the American Association for Respiratory Care).
- (5) The American Medical Association.
- (6) The California Medical Association.
- (7) The California Thoracic Society.
- (8) The American College of Surgeons.
- (9) The American College of Chest Physicians.
- (10) Any entity approved or accredited by the California Board of Registered Nursing or the Accreditation Council for Continuing Medical Education.
- (i) Course organizers shall maintain a record of attendance of participants, documentation of participant's completion, and evidence of course approval for four years.
- (j) All program information by providers of CE shall state: "This course meets the requirements for CE for RCPs in California."
- (k) All course providers shall provide documentation to course participants that includes participant name, RCP number, course title, course approval identifying information, number of hours of CE, date(s), and name and address of course provider.
- (I) For quarter or semester-long courses (or their equivalent) completed at any post-secondary institution accredited by a regional accreditation agency or association recognized by the United States Department of Education, an official transcript showing successful completion of the course accompanied by the catalog's course description shall fulfill the requirements in subdivisions (i), (j) and (k).
- (m) The board may audit providers offering CE for compliance with the criteria set forth in this Article. Note: Authority cited: Sections 3719 and 3722, Business and Professions Code. Reference: Section 3719, Business and Professions Code.

§1399.355. CE Hours.

§ 1399.352.5. <u>1399.355.</u> CE Hours.

The board will accept hours of approved CE as follows:

- (a) The number of hours designated by those entities identified in subdivision (h) of Section 1399.352 1399.351 as it pertains to their own course or a course approved by them.
- (b) Notwithstanding subdivision (a), one (1) academic quarter unit is equal to ten (10) CE hours and one (1) academic semester unit is equal to fifteen (15) CE hours.
- (c) Providers may not grant partial credit for any CE course. Partial credit is defined as any time segment less than the total designated course duration or time period.

Note: Authority cited: Sections 3719 and 3722, Business and Professions Code. Reference: Section 3719, Business and Professions Code.

§ 1399.356. Provider Obligations.

§ 1399.356. Provider Obligations.

- (a) Approved providers shall ensure faculty is knowledgeable in the subject matter as evidenced by a degree from an accredited college or university and verifiable experience in the subject matter, or teaching and/or clinical experience in the same or similar subject matter.
- (b) Upon successful completion of a course, CE providers shall provide documentation to the course participant that includes:
 - (1) the participant's name,
 - (2) the participant's RCP license number,
 - (3) the course title,
 - (4) the course delivery method (e.g. on-line, live-in person),
- (5) the course approval identifying information (for those providers identified in subdivision (b) of section 1399.351).
 - (6) the number of CE hours awarded,
 - (7) the date CE hours were awarded, and
 - (8) the name and address of the course provider.
- (c) Course providers shall maintain records identified in subdivision (b) for a period of four years as well as a description and details of the course.
- (d) Courses completed at an approved post-secondary institution are exempt from this section provided the courses are reported on an offical transcript.

Note: Authority cited: Sections 3719 and 3722, Business and Professions Code. Reference: Section 3719, Business and Professions Code.xx

§ 1399.357. Law and Professional Ethics Course Criteria.

§ 1399.352.7. § 1399.357. Law and Professional Ethics Course Criteria.

An acceptable course in law and professional ethics shall meet the following criteria and be approved by the board's executive or education committee:

- (a) The course shall be provided by the American Association for Respiratory Care or the California Society for Respiratory Care.
- (b) The course shall be three hours in length. One hour of instruction shall consist of not less than 50 minutes of actual classroom time or actual time spent by the licensee completing the coursework on the internet.
- (c) The course shall include:
 - (1) a course description,
 - (2) course objectives,
- (3) references (as applicable),
 - (4) legal disclosures (as applicable),
- (5) course content,
- (6) a post-examination,
 - (7) an optional survey,
- (8) and a certificate of completion with information as identified in subdivision (b) of section 1399.356.
- (e) The delivery and format of the course shall be user-friendly.

- (f) The provider shall not charge more than thirty dollars (\$30) for board applicants and sixty dollars (\$60) for board licensees or petitioners for reinstatement.
- (g) The provider shall ensure that procedures are in place to address Americans with Disabilities Act (ADA) requests.
- (h) The course title shall be "Law and Professional Ethics."
- (i) The course content shall consist of a minimum of thirty (30) pages of written material and a minimum of two (2) hours dedicated to professional ethics with a concentration in:
 - (1) Obligations of licensed respiratory care practitioners to patients under their care and
- (2) Responsibilities of respiratory care practitioners to report illegal activities occurring in the work place.
- (j) The course content may also include, as directed by the board, up to one hour of material with a concentration in:
 - (1) Current activities of the profession and
 - (2) Acts that jeopardize licensure and licensure status.
- (c) The content of the course shall consist of the following subject areas:
 - (1) Obligations of licensed respiratory care practitioners to patients under their care;
- (2) Responsibilities of respiratory care practitioners to report illegal activities occurring in the work place, and
 - (3) Acts that jeopardize licensure and licensure status.
- (d) The course shall meet all of the following requirements:
- (1) (d) The course shall consist of two (2) hours dedicated to professional ethics and one (1) hour toward California law. The board may opt to prepare or edit in full or part, any portion of the course.
- (2) The course title shall be "Law and Professional Ethics."
- (3) Delivery and format of the course shall be user-friendly.
- (4) The course will be at least thirty (30) pages of written material with at least twenty (20) test questions related to professional ethics and ten (10) related to California law.
- (5) Course content must include course description, course objectives, references, scenarios, questions, certificate of completion and legal disclosures, as applicable.
- (6) (k) The course <u>content</u> shall provide several segments. Each segment must include a narrative or discussion, a scenario, and at least one <u>question</u> and at least one scenario-based <u>question</u> requiring <u>critical thinking skills</u>. For each question there must be between three and six possible responses with only one correct answer. Each response must include an explanation as to why the response is incorrect or correct. The number of questions tied to each segment may vary, as each component will differ in length and content.
- (7) The course will include at least thirty (30) scenario-based questions that require critical thinking skills.
- (8) The provider shall submit course test scores, names and other course related information to the board, as requested by the board.
- (9) The provider shall not charge more than thirty dollars (\$30) for board applicants and sixty dollars (\$60) for board licensees or petitioners.
- (10) The provider shall ensure that procedures are in place to address Americans with Disabilities Act (ADA) requests.
- (11) (1) The participant shall be allowed one (1) year to complete the course/exam after enrollment.
- (m) The post examination shall consist of at least thirty (30) questions related to the materials presented.
- (12) (n) The participant shall not be able to exit the post examination once commenced.
- (13) (o) The participant shall not have a time limit to take the post examination.
- (14) (p) The minimum post examination passing score shall be 70%. The post examination shall be scored on all cumulative components, not by each section.
- (15) (q) As applicable, the provider shall offer and allow participants who failed the initial post examination to retake the post examination free of charge. There shall be no wait time to retake the

post examination if previously failed.

- (16) (r) The course will include a survey, optional to participants, to gather feedback for the board.
- (s) The provider shall submit course test scores, names and other course related information to the board, as requested by the board.
- (t) The board may opt to prepare or edit in full or part, any portion of the course.
- (e) (u) The course is solely the product of the provider and the provider assumes full responsibility for the course.
- (f) (v) The course must be revised once every four years. Each revision must be approved by the board.
- (g) (w) The board's Education Executive Committee may rescind the approval of a course at any time if it believes it has been altered or finds that the course does not meet the requirements as provided for in this article.
- (h) (x) The provider may advertise and or reference that an approved course is "approved" by the board.

Note: Authority cited: Section 3722, Business and Professions Code. Reference: Sections 3719 and 3719.5, Business and Professions Code.

§ 1399.353. Audit and Sanctions for Noncompliance.

§ 1399.353. Audit and Sanctions for Noncompliance.

- (a) The board shall audit a random sample of RCPs for compliance with the <u>continuing education</u> (CE) requirements.
- (b) If documentation of the CE requirement is improper or inadequate, or the licensee fails to provide the requested documentation within 30 days, the license becomes inactive. The practice of respiratory care, or representation that one is an RCP, is prohibited while the license is inactive. Practice on an inactive license shall constitute grounds for appropriate disciplinary action pursuant to the B&P.
- (c) Notwithstanding subdivision (b), if the board determines that through no fault of the licensee the CE completed does not meet the criteria set forth in this article, the board may grant an extension, not to exceed six months, for the licensee to complete approved CE.
- (d) Misrepresentation of compliance shall constitute grounds for disciplinary action.
- (e) Documentation supporting compliance with CE requirements shall be available to the board upon request during the four year period following relicensure.

Note: Authority cited: Section 3722, Business and Professions Code. Reference: Sections 3719, 3719.5 and 3750, Business and Professions Code.

§ 1399.354. Waiver of Requirements.

§ 1399.354. Waiver of Requirements.

At the time of making application for renewal of a license, an RCP may request a waiver from completion of the <u>continuing education (CE)</u> requirements. The board shall grant a waiver only if the RCP verifies in writing that, during the two year period immediately prior to the expiration date of the license, he or she:

- (a) Upon receipt of military orders or other verifiable documention, the board shall grant a waiver of CE if (a) the licensee has Has been absent from California for at least one year during the two-year period immediately prior to the expiration date of the license, because of military service reasonably preventing completion of the CE requirements; or
- (b) <u>Upon receipt of verification by a licensed physician and surgeon, the board shall grant a waiver of CE if the licensee has Has</u> been prevented from completing the CE requirements for reasons of health or other good cause <u>for at least one year during the two-year period immediately prior to the expiration date of the license, which includes:</u>
- (1) Total medical disability of the RCP for at least one year; or
- (2) Total medical disability of an immediate family member for at least one year where the RCP has had total responsibility for the care of that family member.

Verification of the disability under subsection (b) shall be verified in writing by a licensed physician and surgeon.

Note: Authority cited: Sections 3719 and 3722, Business and Professions Code. Reference: Section 3719, Business and Professions Code.

§ 1399.355. REPEALED.

§ 1399.355. Renewal After Inactive or Delinquent Status.

- (a) For the renewal of an expired license up to more than two years and within three years of the date of expiration, the applicant shall provide documentation of completion of the required 30 hours of CE during the four-year period preceding the application for renewal.
- (b) For the renewal of an expired license two years or less from the expiration date, the applicant shall provide documentation of completion of the required 15 hours of CE during the two-year period preceding the application for renewal.
- (c) After a license has been expired for three years, it will be cancelled and the applicant must make application just as for an initial license and meet all the current criteria required for licensure

 Note: Authority cited: Sections 3719 and 3722, Business and Professions Code. Reference: Sections 3719 and 3774, Business and Professions Code.

§ 1399.356. License Status.

§ 1399.356. License Status.

A licensee may request, in writing, to change the status of his/her license as follows:

- (a) To change the status of a license from active to inactive, the licensee shall make application to the board for such a change.
- (b) To change the status of a license from inactive to active, the licensee shall request such in writing, pay all current, delinquent and accrued renewal fees, and provide documentation of completion of 45 30 hours of CE-continuing education during the two-year period preceding the request for active status.

Note: Authority cited: Sections 701, 704, 3719 and 3722, Business and Professions Code. Reference: Sections 3719, 3774 and 3775, Business and Professions Code.

Agenda Item: 6 Meeting Date: 10/26/18

Continuing Education Comments through October 15, 2018

§ 1399.350. Continuing Education Required.

(a)(1) (1) A minimum of 10 hours must be directly related to practitioner leadership, case management, or health-care financial reimbursement, cost containment or management. Successful completion of the Law and Professional Ethics Course as provided in section 1399.352, may be counted toward this requirement

Received From	Date	Comment or Summary of Comment	
Emily Brandt	8/28/18	Suggestion for item 1399.350 (1). Could the minimum of 10 hours in number one include CEUs related to respiratory care educators? I attended a summer forum conference with an educator track. As an educator, I believe it is important to include education related CEUs as an option.	
Dale E. Claes 8/29/		I object to the potential revision 1399.350 section (a) (1) A minimum of 10 hours must be directly related to practitioner leadership, case management, or health-care financial reimbursement, cost containment or management. This revision has nothing to do with patient care, except for case management. Those subjects are covered in management courses and should not be part of our license requirements.	
		I also believe that all requirements and references to the Law and Professional Ethics Course should be removed. To my knowledge; We are the only licensed profession that requires all their members to routinely attend such a course.	
Lisa Halsey	8/30/18	I recently read through the proposed changes to the CEU requirements and have some concerns. Just a few years ago the Respiratory Care Board increased the number of CEUs required for renewal. I believe this action was done despite the concerns of those in the field. Now further changes are being proposed that again will burden those of use practicing respiratory care within this state.	
		RCPs are already required to complete an Ethics course during every other license renewal cycle which is 3 CEUs. Requiring 10 hours to this subject every renewal cycle then decreases the number of valuable education hours an RCP would use to increase their knowable and skills that would then benefit their patients. It is my understanding that we are wanting more knowledgeable and skilled RCPs in the field providing care for patient's.	
		The majority of RCPs are not in a management position that would require leadership training, case management, reimbursement or cost containment/management. I also have a question. Would it even be ethical to place the burden on an RCP to worry about reimbursement or cost containment while trying to provide quality and effective care to patient's?	

§ 1399.350. Continuing Education Required.

(b) A minimum of 15 hours of CE as outlined in subdivision (a) must be earned from courses or meetings provided in a live, in-person format requiring physical attendance.

Received From	Date	Comment or Summary of Comment
Saraa Tawfeek	9/26/18	Reduce In-Person CEs: 17 to 7
Richard Dyer	9/11/18	Eliminate In-Person CE requirement
Kellie Butler-Ormond	9/11/18	Eliminate In-Person CE requirement
Daryl Jonathan Redmon	9/13/18	Eliminate In-Person CE requirement
Angelica Padre	10/1/18	Eliminate In-Person CE requirement
Lisa Halsey	8/30/18	[I recently read through the proposed changes to the CEU requirements and have some concerns. Just a few years ago the Respiratory Care Board increased the number of CEUs required for renewal. I believe this action was done despite the concerns of those in the field. Now further changes are being proposed that again will burden those of use practicing respiratory care within this state.]
		This section creates a hardship on not only the Respiratory practitioner but also on the facilities they are employed by. The cost of live CEU events is costly to the practitioner is several hundreds of dollars for registration fees which do not include travel and lodging expenses. Most facilities do not provide any reimbursement for education so this expense is covered by the participant. These events are normally over several days which is an inefficient use of valuable time. It also creates a burden on the facilities that employ them as they need to provide appropriate coverage which could include the expense of overtime to the facility as well as employee fatigue. This could place a facility at risk of providing poor patient care and costly mistakes.
		For example the upcoming Focus Conference is a 2 day conference the registration fees are \$300.00 and participants will receive 14 CEUs for this in person educational experience. These fees do not cover meals, travel or lodging during this event. This means facilities that employ individuals attending need to provide staff to cover their tour of duty and participants are having to pay for this even out of pocket. I'm not sure about you but for me this is a financial impact to my family. I could easily find quality online education for about half of the registration fees for this educational event.
Janet Fantazia Petition TOTAL OF 66 SIGNATURES	Presented at May 2018 Board Meeting	Eliminate in-person CE requirement. Limits RCPs ability to obtain CEUs in appropriate subjects for concentrations such as ACCS, PFTS, NPS and AE-C.

1399.353. Credentialling and Certification Exams.

- (b) Successful completion of the following certification examinations, approved by an entity listed in section 1399.351, shall be approved for 15 hours of CE for initial certification and 5 hours of CE for recertification:
- (6) (1) Advanced Cardiac Cardiovascular Life Support (ACLS) number of CE hours to be designated by the provider;
- (7) (2) Neonatal Resuscitation Program (NRP); number of CE hours to be designated by the provider; and
- (8) (3) Pediatrics Advanced Life Support (PALS) number of CE hours to be designated by the provider.
- (9) (4) Advanced Trauma Life Support (ATLS) number of CE hours to be designated by the provider.

Robert Wood 9/11/18	I am looking for clarification of item 1399.353 (b) on page 4. Is the Initial approved for 15 hours of CE each or a maximum no matter how many were completed? Same question for recertification. (b) Successful completion of the following certification examinations, approved certification by an entity listed in section 1399.351, shall be approved for 15 hours of CE for initial certification and 5 hours of CE for recertification: (1) Advanced Cardiovascular Life Support (ACLS) (2) Neonatal Resuscitation Program (NRP) (3) Pediatrics Advanced Life Support (PALS) (4) Advanced Trauma Life Support (ATLS)
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Entire Regulation Proposal- Comment in Support

Kevin Hamilton	8/29/18	I am commenting in support of the proposed CEU requirement rules change for Title IV; Sect. 1399.349.
		I have been a Registered Respiratory Therapist and RCP in California for over 35 years. During that time my career has offered me a variety of opportunities that I am grateful for, though have not always felt were supported by the existing CME structure. It is critical that RCP's thoroughly understand the "business" of medicine and the underlying policies that support their work and right to practice while protecting our patients'. This change was identified as a strategic part of physician training and implemented in medical schools across the nation by the mid-90's. The various American Academy's of Medicine included credentialing and CME credit to support those physicians who felt called away from patient care and into leadership positions, to better advocate for their colleagues and patients by ensuring good health policy was drafted and passed at the state and federal level. For too long the our profession has largely avoided this responsibility and recognition of the need to engage in this great work. I'm excited to see that evolving and changing in a way that encourages members of our great profession to take on leadership roles in both in the clinical and public arena.