

LSBME
RESPIRATORY CARE ADVISORY COMMITTEE MINUTES

Date: December 14, 2015 Time 9:00 am Location: LSBME Office Recorder: Diana Merendino

Present: Ken Alexander, Sue Davis, Elizabeth Hamilton, Mike Nolan, Diana Merendino, Raymond Pisani, Brett Stafford, Dave Vicknair

AGENDA ITEM	DISCUSSION	RECOMMENDATIONS / ACTIONS
Call to order / establish quorum	Call to order 9:03am; quorum established	
Approval of Minutes: 6-29-2015 and 9-21-2015.	Minutes reviewed – no changes indicated	Motion was made by Mike Nolan to approve minutes from 6-29-15; seconded by Sue Davis. All in attendance voted yes. Motion was made by Ken Alexnader to approve minutes from 9-21-15; seconded by Sue Davis. All in attendance voted yes.
<p>Old Business:</p> <p>Current Credential for licensure renewals</p>	<p>Diana Merendino provided email from Cheryl West regarding other states and licensure renewal requirements with current NBRC credentials (see attached email). The only 2 states that require current credentials is North Carolina and Nevada. Dave stated at this time there are 2 other Allied Health professions that have to renew credentials: Athletic Trainers and Occupational Therapy. Ken Alexander commented that the competency of a practitioner may lay on (1) educators, (2) the hospitals and (3) ultimately the practitioner. The practitioners should be responsible and renew; however Mr. Alexander also pointed out that the LSBME standards for CEU requirements annually is higher than the requirement for the NBRC annually (10 CEUs for LSBME and 6 CEUs for</p>	

<p>Sleep Sciences</p>	<p>NBRC). Diana Merendino stated she just wanted to be sure that the LSBME Board and Executive Director were aware of the technicality that one could be licensed, but not credentialed. Mike Nolan “called the question”.</p> <p>Lori Schulman from Sleep Sciences followed-up with an email to answer questions from the Respiratory Care Advisory Committee. (See attached email). Vague answers were given to the questions. It was noted that the DME would order the device as prescribed from LA licensed physician. And dispense the device with a LA licensed respiratory therapist. The committee is still unsure of what type of measurement is needed for “fitting” and what specific questionnaire would be utilized to determine the necessity for the device. The committee requested a packet to review.</p>	<p>Raymond Pisani and Dave Vicknair to follow-up with correspondence to Dr. Mouton.</p> <p>Beth Hamilton made a motion for Dave Vicknair to request a packet of information from Sleep Science to include a photo of the device, type of questionnaire to be used and required measurements for appropriate “fitting”. Brett Stafford seconded. All in attendance voted yes.</p>
<p>New Business:</p> <p>Scope of Practice Question: history and physical (Vincent Guttuso)</p> <p>Scope of Practice Question: concurrent therapy (Andrew Rouse)</p>	<p>Dave Vicknair received correspondence regarding the ability of a respiratory therapist to perform history and physical exam on a patient and to chart their findings in the patient’s medical record. The RCAC agreed that a licensed therapist can take a history and perform a physical exam that is relevant to respiratory care. These findings can be documented in the patient’s medical records.</p> <p>Dave Vicknair received correspondence asking what the LSBME’s stand on the administration of concurrent therapy. The Respiratory Care Practice Act nor the Rules and Regulations address concurrent therapy. This is not an LSBME regulated event. This would be regulated by CMS, hospital policy or the accreditation body for the facility.</p>	<p>Dave to send response Vincent Guttuso.</p> <p>Dave Vicknair to send response to Andrew Rouse.</p>

<p>Scope of Practice Question: sitters and the delivery of medicated aerosol treatments.</p>	<p>Dave asked if sitters were allowed to perform medicated aerosol therapy. This was a general question and the RCAC wanted to know if the sitter was employed by a sitting service. The RCAC felt a sitter would qualify as family / friend and would be looked at as self administration and would not be regulated by practice act. The RCAC hoped the individual was educated on the process by the patient / family.</p>	
<p>Re-instatement of license</p>	<p>The LSBME had received an application from individual looking for license re-instatement. This individual passed the board exams in 1985 (CRT) and 1993 (RRT), so no re-credentialing is required by the NBRC. The individual lived in Colorado and maintains a current license there (expires in 8-2016), however the state of CO does not require CEU's for license renewal and the individual has not practiced since 1996 (she has been a stay at home Mom). The individual has taken 38 hours of CEU courses (Kittering course 28 hours and 10 Hrs from AARC). RCAC felt the hospital would require the necessary orientation needed for her employment. The RCAC feels she meets the requirements (as stated in law) for licensure.</p>	<p>Ken Alexander made a motion that the respiratory care advisory board supports the granting of the Reinstatement License to Margaret Tokarsky based on documentation submitted. Mike Nolan seconded. All in attendance voted yes.</p>
<p>Extension of Work Permit</p>	<p>Dave Vicknair presented the committee with a request to extend a work permit for Quinton Richard. Mr. Richard was issued the LRT.TEMP.PERMIT on May 28, 2015. He attempted and was unsuccessful with the Therapist Multiple Choice Exam twice during his 6 month time limit (7-7-15 and 11-9-15). His permit expired on 11-28-15. Based on the current rule for extension of the permit, the applicant was delinquent in submitting the request in a timely manner, and the applicant did not present any extenuating circumstances that prohibited him</p>	

<p>Ruling: LPN and ventilator changes</p>	<p>from taking the exam more than 2 attempts during this time period.</p> <p>Dave Vicknair distributed an email from Rita Arceneaux in response to a question regarding the scope of practice of LPN performing ventilator changes. Upon discussion with Dr. Mouton regarding this issue, it was noted that LPN's and RN work under the direct order of physicians, however changing ventilator settings is not within the scope of practice for LPNs. The individual was referred back to the facility's administration for the acceptable practice under their policy and procedure.</p>	<p>Beth Hamilton made a motion to deny the extension and require the applicant to take and pass the exam for license. Ken Alexander seconded the motion. All in attendance agreed.</p>
<p>CEU Audits</p>	<p>Completed by Committee Members</p>	
<p>Next Meeting</p>	<p>March 14, 2016</p>	
<p>2016 Meeting Dates</p>	<p>March 14, 2016 June 13, 2016 September 12, 2016 December 5, 2016</p>	
<p>Meeting Adjourned</p>	<p>Meeting adjourned at 10:15am</p>	<p>Sue Davis made the motion to adjourn the meeting; seconded by Mike Nolan; All in attendance voted yes.</p>