

State Medical Board of Ohio

RESPIRATORY CARE ADVISORY COUNCIL MEETING December 7, 2021

Members:
Richard Gregg, MD
Dr. Harish Kakarala, MD
Karen May BSOM, RRT, CRT, L-RT
Matthew Munroe, MHA, RRT, RCP, CTTS
Amy Rodenhausen, M.Ed, RRT

Other Attendees: Susan Ciarlariello

Staff:

Stephanie Loucka, Executive Director
Jill Reardon, Deputy Director of External Affairs
Jerica Stewart, Communications Officer
Bryson Hatfield, Administrative Assistant

Ms. Reardon called the meeting to order at 2:02 p.m.

Minutes Review

Ms. May moved to approve the draft minutes of the November 9, 2021, meeting of the Respiratory Care Advisory Council. **Dr. Kakarala** seconded the motion. The motion carried.

Legislative Update

House Bill 122: Ms. Reardon reported the Telemedicine Bill, has a hearing tomorrow and amendments are expected. Ms. Reardon added that the Board will keep council apprised of any updates.

<u>House Bill 203, Senate Bill 131:</u> Ms. Reardon reported that the Medical Board will continue to monitor Bills that impact occupational licensing.

Statutory Topics for Discussion

Rule to Change Outpatient Evaluation

Ms. Reardon reported that a public hearing to change inpatient evaluation of impaired practitioners, to an outpatient evaluation on was held December 3, 2021. Ms. Reardon stated the rule would take effect in late January. Ms. Reardon noted that legislation can be found on the Boards website, and she will continue to include legislation updates in correspondence sent to Council.

Partners in Professionalism

Ms. Stewart explained that the Partners in Professionalism Program (PIPP) originally began in 2007 as a means the Medical Board communicated with medical students about the importance of licensure.

Ms. Stewart stated the program evolved to include case studies and has become a part of the curriculum for first year medical students and beyond.

Ms. Stewart stated the Board would like to expand the use of the program and extended an invitation to Council, as representative of respiratory care professionals to take advantage of PIPP. Mr. Munroe inquired if presentations were available for practitioners? Ms. Stewart stated that PIPP has given presentations at conferences and has provided information on board updates, legislative changes, and duty to report. Ms. Stewart added that each PIPP presentation is tailored to the specific audience and their concerns.

Ms. Ciarlariello offered to share past presentations given by the previous respiratory care board with Ms. Stewart, as an overview of the kind of information respiratory professionals may find of interest. Ms. Reardon added that licensees could obtain up-to-date information directly from the Board's website and offered to share Ms. Stewarts' contact information with council.

Ohio State Respiratory Care (OSRC) Update

Workforce Report

Ms. Ciarlariello stated she would present the latest 2021 workforce report data virtually to 100 managers and educators across the state. Ms. Ciarlariello added that of the 143 request for information sent out to managers, 68 responses were received. Ms. Ciarlariello noted that responses were received from managers working in rural, urban, teaching, community, long term and acute care facilities and children's hospitals.

Ms. Ciarlariello stated the first workforce assessment was conducted in 2019 and revealed a need for approximately 900 respiratory care therapists over a 3-year period with a 8.8% vacancy rate. Ms. Ciarlariello noted the new data revealed a need for 1800 respiratory therapists positions over the next 3 year period with a vacancy rate of approximately 17.4%.

Ms. Ciarlariello reminded council that the COARC report discussed at the previous council meeting is used to compare supply versus demand. Ms. Ciarlariello advised that from the 2017 – 2019 report showed that 21 schools produced an average 266 graduates a year.

Ms. Ciarlariello reported that managers attributed the problem of staffing was due to retirement, competition in the market, not enough grads and/or qualified grads, and staff leaving for traveling because of higher compensation rates. Ms. Ciarlariello noted that 65% of managers reported that they use travelers to fill the vacancies. Dr. Kakarala opined therapist scheduled to work the night shift also attributed to the staffing shortage.

Ms. Ciarlariello reported the means managers used to retain staff and attract more staff included retention bonuses, college visits, and mentorship programs. Ms. Ciarlariello added that some facilities hired grads with a limited permit. Ms. Ciarlariello noted that the problem with using L-1's was the grad has a year from the date of their certificate of graduation to pass their boards and apply for full license. Ms. Ciarlariello surmised that this may be something some managers are not paying attention to.

Dr. Kakarala inquired when do students typically graduate and when are their exams? Ms. Rodenhausen responded that graduations are typically in December or June. Ms. Rodenhausen added

that once the school enters the graduates name into the eligibility database, the graduate can make an appointment to take their exam. Ms. Ciarlariello noted the exam consists of 2 parts and the graduate must pass part 1 before taking the part 2.

Ms. Ciarlariello surmised that not enough people know about the profession of respiratory care and it is important to promote the profession. Ms. Ciarlariello added that word can be spread by contacting your local hospital association, brochures that highlight the profession, Ohio Means Jobs, county education services centers, local tech prep program and college deans. Ms. Ciarlariello added that NBRC, ARC and COARC, is our national governing body they will be putting together a national marketing campaign in January.

Mr. Munroe surmised that the Advanced Practice Respiratory Therapist program may be a way to keep respiratory therapists involved in the profession. Ms. Reardon reported that she has had several meetings with Dr. Kakarala and Ms. Ciarlariello, and language in the legislation has been revised based on feedback received. Mr. Munroe added they are close to getting a sponsor for the legislation. Ms. Ciarlariello stated she will keep the Medical Board apprised.

Follow-up Responses from November 9, 2021 Inquiries

Ms. Reardon provided responses to inquiries from the November 9, 2021, council meeting.

Ms. Ciarlariello asked if an evaluation is automatic, when a licensee reports on their renewal application that they had DUI? Ms. Reardon responded it is very possible. Ms. Reardon added that it would not be determined on a case-by-case basis.

Ms. Reardon stated in response to the number of RCP licenses that were pending, there were 75 open RCP L-1 application renewal requests. Ms. Reardon added 60% of those requests were awaiting the results of a background check. Ms. Reardon noted that the average days for issuing a license is 24 days. Ms. Reardon reiterated that delays could be attributed to a licensee's disciplinary issues or due to the attorney general's office delay in processing background checks.

Ms. Rodenhausen asked if there is still a backlog relating to obtaining background checks due to the transition to new software. Ms. Reardon stated from what she understood that is the reason for the backlog. Ms. Loucka asked Council to reach out to the Board if they are aware of any licensee that might be part of the backlog.

New Council Dashboard: Ms. Reardon stated that the dashboard is being refined and anticipates it being up and running by Council's next meeting.

2022 Meeting Schedule

Ms. Reardon stated that the RCAC would meet again on March 8, 2022.

Adjourn

Dr. Kakarala moved to adjourn the meeting. The motion was seconded. All Committee members voted aye. The motion carried.

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The meeting adjourned at 3:03 p.m.

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