COMMONWEALTH OF MASSACHUSETTS

BOARD OF RESPIRATORY CARE

THIS AGENDA CONSTITUTES NOTICE OF THE REGULARLY SCHEDULED MEETING OF THE BOARD OF RESPIRATORY CARE IN COMPLIANCE WITH THE OPEN MEETING LAW, M.G.L. c. 30A, § 20

Tuesday, December 15, 2015 1:00 p.m.

239 Causeway Street ~ 4th Floor ~ Room 417 Boston, Massachusetts 02114

Agenda

Time	Item #	Item	Exhibits	Staff Contact
1:00 p.m.	I.	Call to Order		
		Determination of Quorum		
		Notice of electronic recording		
	II.	Approval of Agenda	Draft Agenda	
	III.	Approval of Minutes A. September 15, 2015 Board Meeting	Draft Minutes	
	IV.	 Review Reactivation Application A. <u>Chagnon, Diane</u>-review of current job duties to determine if Licensee is practicing RT B. Darcey, E Keir-Unlicensed Practice 	Licensee's statement Licensee's Statement	PB PB

V.	Inquiries		
	 A. Inquiry of whether administering injections is within the scope practice of an RT? B. Inquiry of the differences between respiratory technician and respiratory therapist in MA C. Inquiry of whether inserting a PICC line is within the Scope of Practice of a licensed RT? If so, is the Board willing to issue a letter of permission to the licensee? D. An Individual RT concerns related to Bill H. 2001 (formerly Bill 2348) 	Email Inquiry Email Inquiry Email Inquiry and course content Email and Copy of Text of Bill H. 2001	
VI.	Policy A. Proposed Unlicensed Practice Policy B. Proposed Probation Policy C. Staff Action Policy-Renewal Policy	Draft Unlicensed Policy Draft Probation Policy	MS MS
VII.	Regulations A. Proposed Amended Regulations	Draft Proposed Regulations	MS
VIII.	Other Business/AnnouncementsA. <u>Discussion:</u> Prevention of deregulation of RT profession in MA at the request of a board member	Email	
IX.	Flex Session A. Topics for next agenda	Verbal	

2:00 p.m.	X.	Executive Session (Roll call vote)		
		The Board will meet in Executive Session as authorized pursuant to M.G.L. c.30A, § 21(a)(1) for the purpose of discussing the reputation, character, physical condition or mental health, rather than professional competence, individuals, or to discuss the discipline or dismissal of, or complaints or charges brought against, a public officer, employee, staff member or individual.		
		 Specifically, the Board will discuss and evaluate the <u>Good</u> <u>Moral Character</u> provisions of certain applications as required for registration for pending applicants. 	Closed Session	
		2. In addition, the Board will discuss and evaluate the reputation, character, physical condition or mental health, rather than professional competence, of licensee(s) relevant to their petitions for license status change.		
		 In addition, the Board will consider approval of prior executive session minutes in accordance with M.G.L. ch.30A, § 22(f) for sessions held during for previous executive sessions of the Board. 		
		The Board will not reconvene in open session subsequent to the executive session.		
2:30 p.m.	XI.	G.L. c. 112, § 65C Session	Closed Session	
3:00 p.m .	XII.	Adjournment-next Board meeting scheduled for [Jan. 19, 2016]		

COMMONWEATH OF MASSACHUSETTS BOARD OF RESPIRATORY CARE BOARD MEETING

Tuesday, December 15, 2015

239 Causeway Street Room 417 Boston, MA 02114

MINUTES

Board Members Present:	David Polanik, Respiratory Therapist 2, Board Chair Leslie Shaff, M.D., Physician 2, Board Vice-Chair Phillip Bort, Consumer 2 Paul Nuccio, RT, Respiratory Therapist 1
<u>Staff Present</u> :	 Philip Beattie, Interim Executive Director, Multi-Boards, DHPL Anson Chu, Office Support Specialist, Multi-Boards, DHPL Mary Strachan, Board Counsel, Office of the General Counsel, DPH Marjorie Campbell, Nursing Investigator Supervisor, Office of Public Protection, DHPL Jim Lavery, Division Director, DHPL (left at 2:40 p.m.) Karen Fishman, Probation Monitor, DHPL Clifford Pascarella, Paralegal, DHPL Lauren Woodward, RN, Board Investigator, Office of Public Protection, DHPL
<u>Guest:</u>	Keir DarceyBrian BurlingJose VieiraGuests from Boston Children's HospitalGuests from Massasoit Community CollegeGuests from Massachusetts Society Respiratory Care

- I. <u>Call to Order Determination of Quorum</u> A quorum of the Board was present. Mr. Polanik, Board Chair, called the meeting to order at 2:12 p.m.
- II. <u>Review of the Agenda</u> The Meeting Agenda was reviewed.

<u>DISCUSSION:</u> The Board decided to move some items around to accommodate the public who are present at the meeting. The Board will review the reactivation applications first, move on to the closed sessions and go back to the topics on the open session.

<u>ACTION:</u> Dr. Shaff made a motion to approve the agenda as amended; Mr. Bort seconded the motion. Motion passed with Board members present and voting in favor unanimously.

Document: December 15, 2015 Board Meeting Agenda

III. Approval of Minutes

A. <u>September 15, 2015 Regularly Scheduled Board Meeting</u>

The minutes of the September 15, 2015 regularly scheduled board meeting were reviewed.

<u>ACTION:</u> Mr. Bort made a motion to approve minutes as presented; Mr. Nuccio seconded the motion. Motion passed with Board members present and voting in favor unanimously.

Documents: September 15, 2015 Regularly Scheduled Board Meeting Minutes

IV. <u>Review Reactivation Application</u>

A. <u>Chagnon, Diane</u>-review of current job duties to determine if Licensee is practicing RT

<u>DISCUSSION:</u> Ms. Chagnon self-reported that her license expired in 2014 and that she continued to work, although she was not certain that the tasks she performed require a license. Mr. Beattie presented the reactivation application documentations to the Board. Mr. Nuccio informed the Board that one of her duties requires a license; consequently, she practiced after license expiration.

<u>ACTION:</u> Mr. Polanik made a motion to offer a consent agreement for a Reprimand; Dr. Shaff seconded the motion. Motion passed with Board members present and voting in favor unanimously.

Documents: Licensee's statement

B. Darcey, E Keir-Unlicensed Practice

DISCUSSION: Mr. Beattie presented the reactivation application documentation to the Board. Mr. Darcey is present to explain the situation to the Board. Mr. Darcy is a former active member of the military who has served 6 tours of duty in Afghanistan. Shortly before his license expired, he was notified that he may be required to serve another tour of active duty. Simultaneously, he moved from one address to another and all told, his life was very stressful for that period of time. When he discovered his error, he notified his employer, stopped practicing and renewed his license. The Board discussed the fact that this case is similar to the previous case, and determined that Mr. Keir 's situation is different because of the mitigating circumstances and in keeping with the spirit of the Valor act, the Board members agreed the conduct does not rise to the level warranting discipline.

<u>ACTION:</u> Mr. Nuccio made a motion to open a complaint against him and then dismiss with an advisory caution letter; Dr. Shaff seconded the motion. Mr. Polanik voted in favor. Mr. Bort opposed from the vote. The motion carries.

Documents: Licensee's statement

V. <u>Inquiries</u>

E. Inquiry of whether administering injections is within the scope practice of an RT?

DISCUSSION: The Board reviewed the email inquiry. P. Nuccio noted that the hospitals or other institutions have their own scope of practice definitions and protocols and noted that the Board's regulations at 261 CMR 2.02 define respiratory care as a "health profession that under the direction of a licensed physician" . . . "producing optimal health and function." Further, as long as a respiratory therapist is acting pursuant to the order of an authorized prescriber he or she is authorized to administer medications. Board counsel reminded Board members that M.G.L.c. 94C § 7 controls who can and cannot administer controlled substances and anything that the Board opines is within the scope of RT practice must also be consistent with that statute. After discussion, the Board decided that they need to review this again and defer action on whether or not this is within the scope of RT practice.

ACTION: None

Documents: Email Inquiry

F. <u>Inquiry of the differences between respiratory technician and respiratory therapist in MA and if there is a maximum number of patients on ventilators that an RT can be assigned to.</u>

<u>DISCUSSION:</u> The Board reviewed the email inquiry. After reviewing the email inquiry, they decided that with regard to the first part of the question, Board members discussed that MA does not recognize or license respiratory technicians and therefore the writer should be referred to AARC for additional information. P. Nuccio noted that it is his understanding that CA is the only state that limits the number of vents an RT can be assigned to work with.

ACTION: None

Documents: Email Inquiry

G. <u>Inquiry of whether inserting a PICC line is within the Scope of Practice of a licensed RT? If</u> so, is the Board willing to issue a letter of permission to the licensee?

DISCUSSION: Ms. Strachan informed the Board that this inquiry went before the Board back in August 2015 and now the Licensee is back before the Board with additional information as requested. After reviewing the new documentation, Board members decided that it's still not enough information to answer the Licensee's inquiry. Ms. Strachan suggested to members that before making any statement about a change in scope of practice, the Board members must review evidenced based research, national standards in respiratory care and the definitions employed in other jurisdictions. The Board decided to defer motion on this inquiry.

<u>ACTION:</u> Mr. Bort made a motion to defer action and review AARC's statement in regards to PICC line and present the new information to the next schedule Board meeting; Mr. Polanik seconded the motion. Motion passed with Board members present and voting in favor unanimously.

Documents: Email Inquiry and course content

H. An Individual RT concerns related to Bill H. 2001 (formerly Bill 2348)

<u>DISCUSSION:</u> Ms. Strachan explained to the Board members that the bill will amend a nursing statute only and does not affect RT practice directly. Counsel explained that bills are introduced all the time and are not voted upon or are voted down. This bill was not approved in the last legislative session, but even if it was approved, it affects the nursing statute only.

ACTION: None

Documents: Email and Copy of Text of Bill H. 2001

I. Position Statement for RRT as Minimum Requirement for Licensure

<u>DISCUSSION:</u> Several representatives from MSRC are present to inform the Board of their desire and request to change the minimum requirement to a RRT. They mention some states have already adopted the change. Even though the Board is in favor, the Board cannot override a statute and M.G.L.c. 112 §23U explicitly calls for the minimum qualification to be licensed as a respiratory therapist in MA is certification as a CRTT. Counsel suggested that the MSRC (Mass Society of Respiratory Care) lobby their legislators to ask for an amendment to the statute. If the legislature makes the change, the Board can then amend its regulations to reflect the change. P. Nuccio noted that this is a national trend to require RT as opposed to CRT. CRTT is no longer a term used in the profession.

ACTION: None

Documents: Copy of letter from MSRC

VI. <u>Policy</u>

A. Proposed Unlicensed Practice Policy

DISCUSSION: Deferred

ACTION: None

Documents: Draft Unlicensed Policy

B. Probation Policy

DISCUSSION: Deferred

ACTION: None

Documents: Draft Probation Policy

C. Staff Action Policy - Renewal Policy

DISCUSSION: Deferred

ACTION: None

Documents: Draft Renewal Policy

VII. <u>Regulations</u> A. Proposed Amended Regulations

<u>DISCUSSION:</u> Ms. Strachan reviewed the memo and the draft regulations with the Board. Ms. Strachan requests the Board to make any changes to the regulations. The Board made several modifications to the proposed regulations.

<u>ACTION:</u> Mr. Polanik made a motion to approve the draft regulation with the modifications and revision; Dr. Shaff seconded the motion. Motion passed with Board members present and voting in favor unanimously.

<u>ACTION2</u>: Dr. Shaff made a motion to instruct Board Counsel to send the final revision of the regulation for administrative review; Mr. Nuccio seconded the motion. Motion passed with Board members present and voting in favor unanimously.

Documents: Draft Proposed Regulations

VIII. <u>Other Business/Announcements</u> A. <u>Discussion:</u> Prevention of deregulation of RT profession in MA at the request of a board member

DISCUSSION: Deferred

ACTION: None

Documents: Email

- IX. <u>Flex Session</u> None
- X. <u>Executive Session</u> (Roll call vote)

At 2:40 p.m., Mr. Polanik announced that the Board will meet in Executive Session as authorized pursuant to M.G.L. c. 30A, §21(a)(1) for the purpose of discussing the reputation, character, physical condition or mental health, rather than the professional competence, of an individual, or to discuss the discipline or dismissal of, or complaints or charges brought against, a public officer, employee, staff member or individual. Specifically, the Board will discuss and evaluate the Good Moral Character provisions of certain applications as required for registration for pending applicants. In addition, the

Board will discuss and evaluate the reputation, character, physical condition or mental health, rather than professional competence, of licensee(s) relevant to their petitions for license status change.

Mr. Bort made a motion to enter into Executive session at 2:41 p.m.; Mr. Nuccio seconded the motion. Motion passed with Board members present and voting in favor: Mr. Polanik-yes; Dr. Shaff-yes; Mr. Bort-yes; Mr. Nuccio-yes; Abstained: None; Opposed: None; Recused: None

The Board adjourned the Executive Session at 3:54 p.m. and resumed its Regularly Scheduled Board Meeting.

[Break 3:55 p.m. - 4:00 p.m.]

- XI. <u>G.L. c. 112, § 65C Session</u> Deferred
- XII. Adjournment

There being no other business before the Board, Mr. Polanik made a motion to adjourn the meeting; Mr. Nuccio seconded the motion. Motion passed with Board members present and voting in favor unanimously. The meeting adjourned at 5:56 p.m.

The next meeting of the Board of Respiratory Care is scheduled for Tuesday, January 19, 2016, at 1:00 p.m. in Boston, MA.

Respectfully submitted:

Name

Position

Date