

Proposed Amendments to Rules and Regulations

Proposed amendments to the Alabama State Board of Respiratory Therapy's Rules and Regulations are currently being advertised for public comment.

Time, Place, Manner of Presenting Views:

Written comments, views, or arguments will be received by the Alabama State Board of Respiratory Therapy until 4:30 p.m. on April 5, 2017. Comments should be sent to:

ASBRT

P.O. Box 241386

Montgomery, AL 36124-1386

Any written comments received will be reviewed by the Board at the June 9, 2017, Board Meeting. Please find below proposed Rule and Regulation Amendments:

CHAPTER 798-X-2 Definitions

798-X-2 Definitions

- (1) AARC - American Association for Respiratory Care.
- (2) Applicant - any individual seeking licensure by the Board who has submitted an official application and paid the application fee.
- (3) ASBRT - The Alabama State Board of Respiratory Therapy.
- (4) ASRC - Alabama Society for Respiratory Care.
- (5) Biannual - every two years.
- (6) Board - The Alabama State Board of Respiratory Therapy.
- (7) CAAHEP - the Commission on Accreditation of Allied Health Education Programs.
- (8) CoARC - Committee on Accreditation for Respiratory Care.
- (9) CRCE units - Continuing respiratory care education units.
- (10) CRT - Certified Respiratory Therapist as granted by the NBRC or its successor organization.
- (11) Currently employed – persons employed in the administration of respiratory therapy under the direction of a physician in the State of Alabama on the effective date of the adoption of the rules and regulations, or were employed in the administration of respiratory therapy under the direction of a physician in the State of Alabama in the previous 365 days.

(12) Direct clinical supervision - A situation where a licensed respiratory therapist or physician is available for the purpose of communication, consultation, and assistance.

(13) Healthcare facility - Hospitals, nursing homes, and other inpatient treatment facilities as defined in Section 22-21-260, Code of Alabama (1975).

(14) Hemodynamic monitoring - Setup and maintenance of pressure transducers for monitoring arterial blood pressure, central venous pressure and pulmonary artery pressures; drawing mixed venous blood gases from pulmonary artery catheters and calculating cardiac and vascular parameters, measuring cardiac output using a pulmonary artery catheter, recognizing normal and abnormal cardiac and vascular pressures and flow tracings.

(15) Hospital - Hospitals as defined by Section 22-21-20, Code of Alabama (1975).

(16) Licensed respiratory therapist - a person licensed by the Board to administer respiratory therapy and who has the knowledge and skills necessary to administer respiratory therapy, monitor patient responses, modify respiratory therapy based upon patient response, provide information and education to patients about deficiencies or disorders of the cardiopulmonary system, and supervise others in the delivery of appropriate respiratory therapy procedures.

(17) Medically approved protocol - A healthcare facility's plan for taking specific diagnostic or treatment actions, or both, authorized by the treating physician of the patient, all of which actions shall be:

(a) In a hospital or other inpatient healthcare facility, approved by the supervising physician of the respiratory therapist or in an outpatient treatment setting approved by the supervising physician of the respiratory therapist.

(b) Except in cases of medical emergency, instituted following an evaluation of the patient by the physician or otherwise directed by the supervising physician of the respiratory therapist.

(c) Consistent with the definition of the scope of practice of respiratory therapy, as established by this act.

(18) NBRC - National Board for Respiratory Care, Inc.

(19) Outpatient treatment facility - a facility which provides diagnostic, therapeutic and rehabilitative services to persons who do not require a stay greater than 23 hours.

(20) Physician - A person who is a doctor of medicine or osteopathy licensed to practice.

(21) Preceptor – A teacher or tutor, or specifically as used in these rules, a respiratory therapist licensed in the state of Alabama, who instructs and/or supervises respiratory therapy students in the clinical environment.

(22) Public records - Records maintained by the Board that are reasonably necessary to record the business and activities required to be done or carried out by the Board so that the status and conditions of such business and activities can be known by the public. Public records include records maintained by the Board pursuant to the Alabama Open Meetings Act and records subject to public disclosure under both the Alabama Open Meetings Act and the

Alabama Open Records Act.

(a) Public records maintained by the Board include, but are not limited to, the following records:

(i) Board minutes, except those minutes recorded during an executive session that are prohibited from disclosure by the Alabama Open Meetings Act;

(ii) Names and addresses of current licensees;

(iii) Names of persons whose licenses have been suspended, revoked, or denied, including the type, date, infraction, the penalty incurred, and length of the penalty;

(iv) Rules and regulations of the Board, as promulgated and published in accordance with the Administrative Procedures Act, Sections 41-22-1, et seq., Code of Alabama (1975);

(v) Other written statements of policy or interpretations formulated, adopted, or used by the Board in the discharge of its duties and functions; and

(vi) Final orders, decisions, declaratory rulings, and opinions issued by the Board.

(b) Records maintained by the Board that do not constitute public records include, but are not limited to, records that are confidential or privileged under federal and/or state law and records the disclosure of which would be detrimental to the best interests of the public.

(223) Respiratory therapy or care - therapy, management, rehabilitation, diagnostic evaluation, and care of patients with deficiencies and abnormalities of the cardiopulmonary system and associated aspects of other systems' functions, given by a health care professional under the direction of a physician. The term includes, but is not limited to, the activities listed in the scope of practice conducted upon written prescription, verbal order, or medically approved protocol.

(234) RRT - Registered Respiratory Therapist as granted by the NBRC or its successor organization.

Author: The Alabama State Board of Respiratory Therapy

Statutory Authority: Code of Alabama (1975) § 34-27B-1 thru § 34-27B-17.

Effective Date: September 14, 2005

**CHAPTER 798-X-8
Continuing Education for Licensure**

798-X-8 Continuing Education for Licensure

798-X-8-.01 Continuing Education

798-X-8-.02 Standards for Continuing Education

798-X-8-.03 Standards for Providers

798-X-8-.04 Reporting Requirements and Audit

798-X-8-.01 Continuing Education

(1) A respiratory therapist shall be individually accountable for continued competence to practice respiratory therapy and shall maintain documentation to support all continuing education necessary for renewal.

(2) The Board may prescribe a continuing education program for reentry into practice.

(3) Individual requests to verify approval for a specific course or activity may be submitted to a Board-approved provider.

(4) Units of measure for continuing education shall be:

(a) 1 contact hour = 50 minutes

(b) 0.5 contact hour = 25 minutes

(c) 15 contact hours = 1 academic semester credit hour

(d) 10 contact hours = 1 academic quarter credit hour

(5) Hours required.

(a) Each respiratory therapist licensed by the Board shall complete twenty-four (24) contact hours of continuing education over the two-year licensure period. Initial licensure periods which have been prorated to have the renewal date fall on the established renewal date will be prorated for 1 contact hour for each month of the initial licensure periods. Any course accepted for credit shall be at least 25 minutes in length.

(b) For new graduates of respiratory therapy programs, submitting proof of successful completion of a respiratory therapy program accredited by CoARC shall be proof of sufficient preparatory education to receive an initial license up to one year following graduation.

(6) Waiver or extension of continuing education

(a) The Board may grant a waiver of the need to attend and complete the required hours of continuing education or the Board may grant an extension of the deadline to complete the required hours of continuing education if it can be shown that compliance was beyond the control of the person seeking the waiver.

(b) Waivers or extension of the deadline will be considered only on an individual basis and may be requested by submitting the following items to the Board office:

(i) A written request for a waiver or deadline extension which specifies which requirements are sought to be waived or which deadline is sought to be extended and a written and signed explanation of the reason for the request; and

(ii) Any documentation which supports the reason(s) for the waiver or deadline extension requested or which is subsequently requested by the Board.

(c) A waiver or deadline extension approved by the Board is effective only for the renewal period for which the waiver is sought.

798-X-8-.02 Standards for Continuing Education

(1) Any educational program approved for CRCE units by the AARC shall be acceptable with one contact hour assigned for each CRCE unit awarded.

(2) The Board or another organization recognized by the Board may approve providers of continuing education based on criteria established in Chapter 798-X-8-.03.

(3) The AARC or ASRC continuing education activities, which pertain to the practice of respiratory care, shall be considered prior approved, providing they meet all other requirements for contact hours.

(4) The following additional methods may be utilized for obtaining continuing education hours:

(a) By taking and passing (with a grade of C or better) a college or university course which comprises part of the professional requirements for a formal respiratory therapy education program beyond those that were completed for the issuance of the original license, or any course that shall enhance a respiratory therapist's professional growth and development.

(b) By taking and passing training courses (either initial, renewal, or instructor courses) on advanced cardiac life support (ACLS), pediatric advanced life support (PALS), or neonatal resuscitation programs (NRP). No more than 12 contact hours of continuing education units of advanced life support training may be applied for renewal of license.

(c) By completing a self study course, such as a course offered on the internet, which has been approved by the AARC or the Board for a specific number of continuing education hours. No more than 12 contact hours of continuing education units of self study may be applied for renewal of license.

(d) Appropriate subject matter for continuing education shall include:

- (i) Respiratory therapy science and practice;
- (ii) Respiratory therapy education;
- (iii) Research in respiratory therapy and healthcare;
- (iv) Management, administration, and supervision in health care delivery;
- (v) Social, economic, political, and/or legal aspects of health care;

- (vi) Healthcare and consumer education;
- (vii) Courses which a respiratory therapist documents as improving job competence that are not specified on the above listed and are determined to be appropriate by the Board.

(5) Respiratory therapy related educational offerings as described in 798-X-8-.02(4) approved by the following organizations and their affiliates listed below will be acceptable for continuing education credit provided the courses meet minimum time requirements for contact hours as stated in 798-X-8.01(4) and provided these organizations and their affiliates maintain records documenting educational programs and rosters of licensed respiratory therapists who attended their programs. Such documentation shall be retained for three (3) years and made available to the Board upon request.

- (a) American Medical Association under Physician Category I
- (b) American Thoracic Society
- (c) American Association of Cardiovascular and Pulmonary Rehabilitation
- (d) American Heart Association
- (e) American Lung Association
- (f) American Hospital Association
- (g) American Nurses Association
- (h) American College of Chest Physicians
- (i) American Society of Anesthesiologists
- (j) American Academy of Pediatrics
- (l) American College of Emergency Physicians
- (m) American College of Physicians
- (n) Other professional or educational organizations approved by the Board
- (o) Alabama hospitals
- (p) Respiratory therapy programs accredited by CoARC.

(6) Successful completion of a recertification examination administered by the NBRC for either CRT or RRT (based on the highest credential held by the licensed respiratory therapist) shall be awarded five (5) contact hours.

(7) Successful completion of an advanced specialty examination administered by the NBRC shall be awarded five (5) contact hours for each examination.

(8) Preparation and presentation of a lecture approved for continuing education hours under these rules shall be eligible for four (4) contact hours for each contact hour of presentation for the first presentation. Subsequent presentations of the same lecture will not be awarded additional contact hours.

(9) Respiratory therapy programs in Alabama, accredited by CoARC or successor organization, may establish standards for clinical preceptors and award up to 4 hours of continuing education credit per renewal cycle to a licensed respiratory therapist serving as a preceptor. A minimum requirement shall be that each hour of credit shall equal 24 hours of clinical instruction/supervision of students enrolled in a respiratory therapy program. No more than 4 hours of continuing education units for preceptorship may be applied for renewal of license.

(10) Continuing education credit will not be allowed for the following:

(a) Regular work activities, administrative staff meetings, case staffing, reporting, or similar activities.

(b) Membership in, holding office in, or participating on Boards or committees, business meetings of professional organizations, or banquet speeches.

(c) Independent unstructured or self-structured learning such as home study programs, except as authorized pursuant to Chapter 798-X-8-.02 (4) (c).

(d) Training specifically related to policies and procedures of an agency, such as universal precautions, infection control, employee orientation, or employee relations.

(e) Basic CPR courses.

798-X-8-.03 Standards for Providers

(1) Hospitals, other healthcare facilities, professional organizations or respiratory therapy educational programs accredited by CoARC, who choose to apply, may be granted provider status by the Board or Board designee. Provider status may be active for the initial licensure period as designated in other sections of these rules with April 30, 2008 as the initial expiration date and may be renewed upon expiration. Failure to provide respiratory therapy educational programs as specified by the Board or described in these rules and regulations may be a basis for withdrawal of provider status at any time.

(2) The Board approved provider is accountable for:

(a) Demonstrating capability to meet and adhere to Board established standards to assure the provision of quality continuing education activities for respiratory therapists, and

(b) The veracity and accuracy of continuing education provided, and

(c) Compliance with the standards set forth in this chapter.

(3) Approved providers shall send notice of continuing education offerings to the Board at least 7 days in advance of the offering to include: topic, instructor, instructor credentials, date, time, and location of activity.

(4) Approved providers shall submit records of contact hours awarded to respiratory therapists to the Board in a format and method specified by the Board or Board designee within 30 days of completion of program.

(5) The provider shall have a designated education coordinator or program director.

(6) The provider shall have accessible and available educational facilities, human resources, instructional aids, and equipment for the planners, instructor(s) and learners consistent with the educational content, format, teaching methodology, and behavioral objectives of each course.

(7) The instructor(s) shall possess qualifications appropriate to the content of the activity.

(8) To obtain initial Board approval as a continuing education provider, the prospective provider shall submit a completed application provided by the Board or Board designee.

(a) Upon approval the Board or Board designee shall assign a permanent, nontransferable provider number.

(b) The provider number shall be used to identify all communications, course announcements, records, and reports.

(c) Initial approval shall be valid as described in Chapter 798-X-8.03 (1), provided standards for approval are met and maintained.

(9) Continuing education offered by providers shall be open to other respiratory therapists licensed in Alabama on a space available basis. Attendees may be charged a fee.

(10) All educational offerings designated for continuing education credit by providers under these regulations shall be subject to monitoring by the Board. Refusal to grant access to a designated monitor from the Board shall be grounds for withdrawal of provider status.

(11) Renewal of a provider:

(a) Requires an application for renewal shall be submitted in accordance with a schedule established by the Board or Board designee.

(b) Shall extend for a maximum of four years, provided standards for approval are maintained.

(12) A provider number shall be retired:

(a) Upon request of an authorized entity, or

(b) Upon failure of an authorized entity to request continued approval, or

(c) When the Board or Board designee denies or withdraws approval, or

(d) When there is a change in ownership.

(13) A previously approved provider who has requested retirement of a provider number, or has had a number retired for any reason, may request reinstatement of the provider number. Reinstatement may be denied for failure of the applicant to satisfactorily demonstrate capability of meeting continuing education standards and criteria for providers.

(14) The Board or Board designee may deny or withdraw approval of any provider of continuing education activity.

798-X-8.04 Reporting Requirements and Audit

(1) A respiratory therapist shall:

(a) Provide a signed statement of affirmation, under penalty, of the degree of compliance with continuing education requirements for license renewal including but not limited to compliance with:

(i) Earning the required number of contact hours of Board-approved or Board-recognized continuing education activities;

(ii) The designated earning period;

(iii) Content and acceptable activities, and

(iv) Any other requirements in these rules.

(b) Maintain individual continuing education records for two years following the renewal date for which the contact hours were earned including but not limited to certificates, transcripts, or other documentation of attendance at continuing education activities to substantiate earned contact hours.

(c) Submit documented evidence of meeting continuing education requirements within thirty days of the date a written request is mailed first class to the address of record of the respiratory therapist.

(2) A respiratory therapist who fails to comply with reporting requirements, requirements of the audit, requests for documents, or submitting false, inaccurate, or incomplete evidence of meeting continuing education requirements shall be subject to disciplinary action by the Board.

(3) A respiratory therapist who fails to provide evidence meeting continuing education requirements for license renewal shall not have the license renewed.

(4) Providers:

(a) A provider's compliance may be evaluated by participant evaluations, provider evaluation, random on-site visits, or an audit of the provider's reports and records by the Board or its designee.

(b) Audits of providers may be conducted upon written complaint by any individual for failure of a provider to meet criteria for approval. The provider shall submit requested documents within 30 days of the date a written request is mailed. Failure to comply may result in sanctions by the Board

(c) A self-evaluation report of compliance with standards shall be submitted to the Board according to Board guidelines as part of the application for continued approval.

Author: The Alabama State Board of Respiratory Therapy

Statutory Authority: Code of Alabama (1975) § 34-27B-1 thru § 34-27B-17.

Effective Date: October 11, 2007

**Appendices I
Fee Schedule**

Application Fee	\$25.00
License Fee	\$75.00
Temporary License Application Fee	\$25.00
Temporary License Fee	\$25.00
Renewal Fee	\$75.00
Late Renewal Fee	\$50.00
Replacement License Fee	\$25.00
License Verification Fee	\$25.00
Reinstatement Fee	\$150.00
Request of Application Package	\$10.00
Examination Fee Electronic Mailing List Fee	\$10 50.00

Author: The Alabama State Board of Respiratory Therapy
Statutory Authority: Code of Alabama (1975) § 34-27B-1 thru § 34-27B-17.
Effective Date: September 14, 2005

APPENDICES II Forms List

Application
Verification of Employment
NBRC Credentials Verification Form
Verification of Respiratory Care Education
Verification of Employment in the Practice of Respiratory Therapy
Verification of License from another State
Complaint Form
CEU Reporting Form
Renewal Application
Application for Change of Information or Replacement License
Student Verification Form – Employer
Student Verification Form – Program Director
~~Request for Application Form~~
Request for Electronic Mailing List

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