PROPOSED RULE MAKING

CR-102 (June 2012)
(Implements RCW 34.05.320)
Do **NOT** use for expedited rule making

Agency: Department of Health

☒ **Preproposal Statement of Inquiry was filed as WSR** 10-17-098 **; or**
☐ **Expedited Rule Making--Proposed notice was filed as WSR** _ **; or**
☐ **Proposal is exempt under RCW 34.05.310(4) or 34.05.330(1).**

☒ **Original Notice**
☐ **Supplemental Notice to WSR**
☐ **Continuance of WSR**

Title of rule and other identifying information: (Describe Subject)
WAC 246-928-442 Amending the section regarding acceptable continuing education for respiratory care practitioners; repealing WAC 246-928-441.

Hearing location(s): Department of Health
Town Center 2 (TC2)
111 Israel Road SE Room 145
Tumwater, WA 98501

Date: August 14, 2015 Time: 9:30 am

Submit written comments to:
Name: Susan Gragg
Address: Department of Health
PO Box 47852
Olympia, WA 98504-7852
e-mail: http://www3.doh.wa.gov/policyreview/
fax 360-236-2901 by (date) 08/14/2015

Assistance for persons with disabilities: Contact Susan Gragg by 08/07/2015
TTY (800) 833-6388 or () 711

Date of intended adoption: 08/28/2015
(Note: This is **NOT** the **effective** date)

Purpose of the proposal and its anticipated effects, including any changes in existing rules:
The Department of Health (department) is proposing revisions to the rules regarding acceptable continuing education for respiratory care practitioners. The proposed revisions will clarify acceptable continuing education, as well as identify different modalities that can be used and hour limits for those modalities. These clarification revisions will increase the options and methods available to licensees for meeting the continuing education requirement. The proposal does not increase the total number of hours required.

Reasons supporting proposal:
RCW 18.89.140 establishes continuing education requirements for licensees applying for license renewal. The statute allows the secretary to adopt rules setting specific requirements that protect the public through clearly stated educational standards. The proposed rule will help ensure competent respiratory care practitioners by keeping these licensees abreast of current and forecasted developments in a rapidly changing field. The proposal eliminates confusion in the rules which, as currently written, give little direction on acceptable modalities and the hours assigned to various activities.

Statutory authority for adoption:
RCW 18.89.050 and 18.89.140

Statute being implemented:
RCW 18.89.140

Is rule necessary because of a:

Federal Law?	☐ Yes	☒ No
Federal Court Decision?	☐ Yes	☒ No
State Court Decision?	☐ Yes	☒ No

If yes, CITATION:

DATE 06/17/2015

NAME (type or print)
John Wiesman, DrPH, MPH

SIGNATURE

John Wiesman
, DrPH, MPH

TITLE
Secretary

CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER
STATE OF WASHINGTON
FILED

DATE: June 17, 2015
TIME: 10:42 AM

WSR 15-13-131

(COMPLETE REVERSE SIDE)

Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters:

None.

Name of proponent: (person or organization) Department of Health

☐ Private
☐ Public
☒ Governmental

Name of agency personnel responsible for:

	Name	Office Location	Phone
Drafting.....	Susan Gragg, Program Manager	111 Israel Road SE, Tumwater, WA 98501	360-236-4941
Implementation....	Susan Gragg, Program Manager	111 Israel Road SE, Tumwater, WA 98501	360-236-4941
Enforcement.....	Susan Gragg, Program Manager	111 Israel Road SE, Tumwater, WA 98501	360-236-4941

Has a small business economic impact statement been prepared under chapter 19.85 RCW or has a school district fiscal impact statement been prepared under section 1, chapter 210, Laws of 2012?

☐ Yes. Attach copy of small business economic impact statement.

A copy of the statement may be obtained by contacting:
Name:
Address:

phone
fax
e-mail

☒ No. Explain why no statement was prepared.

A small business economic impact statement was not prepared. The proposed rule would not impose more than minor costs on businesses in an industry.

Is a cost-benefit analysis required under RCW 34.05.328?

☒ Yes A preliminary cost-benefit analysis may be obtained by contacting:
Name: Susan Gragg, Program Manager
Address: Department of Health
PO Box 47852
Olympia, WA 98504-7852

phone 360-236-4941
fax 360-236-2901
e-mail susan.gragg@doh.wa.gov

☐ No: Please explain:

REPEALER

The following section of the Washington Administrative Code is repealed:

WAC 246-928-441 Implementation.

AMENDATORY SECTION (Amending WSR 01-21-136, filed 10/24/01, effective 11/24/01)

WAC 246-928-442 ((~~Acceptable~~)) Continuing education. ((~~(1) Continuing respiratory care education must be a minimum of ten hours of continuing respiratory care education approved by the American Association for Respiratory Care. The remaining twenty hours of continuing respiratory care education may be in any of the following:~~

~~(a) Additional courses approved by the American Association for Respiratory Care.~~

~~(b) Category I level formal in-service approved by the American Association for Respiratory Care.~~

~~(c) Courses in respiratory care approved by the American Medical Association, the American Osteopathic Association and the American Nurses Association.~~

~~(d) Initial and renewal certification courses in Advanced Cardiac Life Support, Pediatric Advanced Life Support and Neonatal Resuscitation Program.~~

~~(e) Courses in respiratory care at any accredited college.~~

~~(f) Self-study courses in respiratory care.~~

~~(g) Passing the National Board for Respiratory Care's self-assessment competency examination with a minimum score of 75. Three hours of continuing education may be applied for successful completion of this examination.~~

~~(h) Educational offerings in respiratory care which include learning objectives provided by hospitals or health organizations.~~

~~(i) Educational offerings in respiratory care which include learning objectives, where the licensee serves as the instructor subject to the limitation described in subsection (3) of this section.~~)) All licensed respiratory care practitioners seeking to renew their license shall acquire thirty credit hours of continuing respiratory care education every two years as required in RCW 18.89.140. Licensees shall meet the continuing education requirement outlined in this section and report such continuing education as required in chapter 246-12 WAC, Part 7.

(1) The following are categories of acceptable continuing education activities for licensed respiratory care practitioners:

(a) A minimum of ten credit hours of continuing education during each two-year reporting cycle must be earned in courses approved by the American Association for Respiratory Care (AARC).

(b) The remaining twenty hours of continuing education during each two-year reporting cycle may be in any of the following areas:

(i) Sponsored courses. Courses sponsored or approved by the:

(A) American Academy of Pediatrics;

(B) American Academy of Physician Assistants;

(C) American Association of Critical Care Nurses;

(D) American Association of Respiratory Care;

(E) American College of Chest Physicians;

(F) American College of Emergency Physicians;

(G) American College of Physicians;

(H) American Medical Association;

(I) American Nurses Association;

(J) American Osteopathic Association;

(K) American Thoracic Society;

(L) Society of Critical Care Medicine;

(M) Washington academy of physician assistants;

(N) Washington osteopathic medicine association;
(O) Washington state medical association; or
(P) Washington state nurses association.
(ii) Certifications/examinations. Licensees shall only claim credit hours in this category that were obtained during the current reporting cycle.
(A) Ten credit hours each may be claimed for the following initial or renewal certifications:
(I) Advanced cardiac life support (also known as ACLS);
(II) Neonatal advanced life support (also known as NALS, or neonatal resuscitation program or NRP);
(III) Pediatric advanced life support (also known as PALS).
(B) Five credit hours may be claimed for initial or renewal certification in basic life support (also known as BLS).
(C) Ten credit hours each may be claimed for passing either of the following National Board of Respiratory Care (NBRC) advanced practitioner examinations:
(I) Registered respiratory therapist; or
(II) Registered pulmonary function technologist.
(D) Five credit hours each may be claimed for passing any of the following:
(I) The NBRC entry level examination;
(II) Any NBRC specialty examination;
(III) The NBRC self-assessment competency examination with a minimum score of seventy-five; or
(IV) National Asthma Educator Certification Board certified asthma educator examination.
(iii) Educational settings.
(A) A licensee may claim courses completed at a regionally accredited college, university, or institute of higher education. Such courses must focus on the clinical practice of respiratory care or education related to the cardiopulmonary system. Credit hours for such courses may be claimed as either:
(I) Actual semester contact hours (such as fifteen semester contact hours shall be equal to fifteen continuing education credits); or
(II) An academic credit formula that multiplies the academic credits by a factor of three (such as four academic credits shall be equal to twelve continuing education credits).
(B) A licensee may claim respiratory care educational offerings provided by hospitals or health organizations.
(C) A licensee may claim continuing education credit hours for serving as an instructor of educational offerings in respiratory care provided by hospitals or health organizations; or at a regionally accredited college, university, or institute of higher education. Such educational offerings must include learning objectives. The number of credit hours claimed for serving as an instructor shall be the same number as those earned by attendees. The credit hours for presenting a specific topic, lecture, or education course may only be used for continuing education once during each reporting cycle.
(c) No more than ten credit hours of continuing education during a two-year reporting cycle may be in any of the following areas:
(i) Self-study. Journal reading of publications related to respiratory care;
(ii) Practice related topics. Formal, internet-based, or video-format courses offered by organizations not listed in (b) of this subsection including, but not limited to, the American Association of Cardiovascular and Pulmonary Rehabilitation, the Association for the

Treatment of Tobacco Use and Dependence, or the Council for Tobacco Treatment Training Programs; or

(iii) Nonclinical practice topics. Courses or activities including, but not limited to, health promotion, health care cost management, mandatory reporting, professional ethics, and regulatory affairs.

(2) Documentation. Licensees are responsible for acquiring and maintaining all acceptable documentation of their continuing education activities, as required in chapter 246-12 WAC, Part 7. Acceptable documentation shall include transcripts, letters from course instructors, or certificates of completion or other formal certifications provided by hospitals, course instructors, and health organizations((~~, as required in chapter 246-12 WAC, Part 7~~)). In all cases other than transcripts, the documentation must show the participant's name, activity title, number of continuing education credit hours, date(s) of activity, instructor's name(s) and degree and the signature of the verifying individual program sponsor.

((~~(3) The licensee who prepares and presents lectures or education courses that contributes to the professional competence of a licensed respiratory care practitioner may accumulate the same number of hours obtained for continuing education purposes by attendees as determined in WAC 246-12-220. The hours for presenting a specific topic lecture or education may only be used for continuing education credit once during each renewal period.~~))