

OHIO RESPIRATORY CARE BOARD

**LICENSING RESPIRATORY CARE PROFESSIONALS
AND
HOME MEDICAL EQUIPMENT FACILITIES**



**ANNUAL REPORT
FY 2008**

TABLE OF CONTENTS

Notification of Compliance to the Governor and General Assembly

Executive Summary	1
Letter to the Governor and General Assembly	2

Table of Organization	3
Board Members	3

Board Functions

Board Authority and Function	3
Mission Statement.....	5
Vision Statement.....	5
Board Programs	5

2007 Actions of the Board	6
Minutes Excerpts	6 - 12

Trends and Opportunities

Clean-up Legislation Needs.....	12
Respiratory Care Educational Enrollment	13

Objectives for Next Year	13
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Board Status

2007 License Activity	14
Revenues and Expenditures	15
Investigatory Report and Disciplinary Actions.....	15 -18

EXECUTIVE SUMMARY

Pursuant to Section 4761.03 (H) of the Ohio Revised Code, the Ohio Respiratory Care Board (hereafter referred to as “the Board,”) is required to file an annual report to the Governor and Ohio General Assembly. The annual report, by law, must list the official actions taken by the Board during the prior year and any recommendations for the improvement of the practice of respiratory care in Ohio. Although the statute only requires the Board to report on improvements to the practice of respiratory care, the Board believes recommendations on the improvement of home medical equipment regulation should also be addressed.

The Board’s annual report strives to inform the Governor, the Ohio General Assembly and the General Public of all its activities and actions taken during the prior year. The report is written to cover all aspects of the Board’s operations: regulatory, financial, and judicial. The Board is committed to full public disclosure and accountability at all levels of operations.

On behalf of the Ohio Respiratory Care Board, I would like to thank the people of Ohio for allowing us to serve them.

Respectfully,



Christopher H. Logsdon
Executive Director

Letter to the Governor and Ohio General Assembly

Dear Governor Strickland and Members of the Ohio General Assembly:

It is my pleasure to submit, on behalf of the Ohio Respiratory Care Board, its annual report for Fiscal Year 2008. This report reflects the efforts made by the Ohio Respiratory Care Board to ensure that all of the persons and facilities licensed by this Board are properly qualified to provide services to the citizens of Ohio. This report also summarizes the enforcement activities undertaken during fiscal year 2008, demonstrating the Board's role in disciplining licensees that violate the law. Finally, this report establishes the future goals of the Board and provides suggestions for improving the practice of respiratory care and improving home medical equipment facility licensure in Ohio.

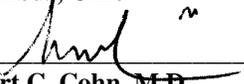
This report will provide information about the practice of respiratory care and home medical equipment facilities, our methods of operation, the accomplishments and actions of the agency and the dedication of the Board members and its staff. I believe you will find the Board dedicated to the regulatory role it has been so empowered to accomplish.

Respectfully submitted,

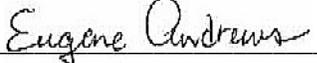

Marc K. Mays, MSA, RRT, RCP
President, Ohio Respiratory Care Board

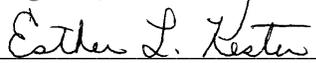
Board Members

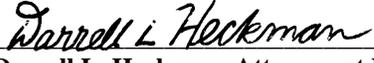

Marc K. Mays, R.R.T., R.C.P., M.S.A.
Board President
Professional Member
Columbus, Ohio

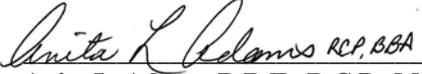

Robert C. Cohn, M.D.
Physician Member
Cleveland, Ohio


Susan M. Ciarlariello, R.R.T., R.C.P., M.B.A.
Professional Member
Dayton, Ohio


Eugene W. Andrews, R.R.T., R.C.P., B.S.
Professional Member
Strongsville, Ohio


Esther L. Kester, R.R.T., R.C.P., M.B.A.
Professional Member
Ravenna, Ohio

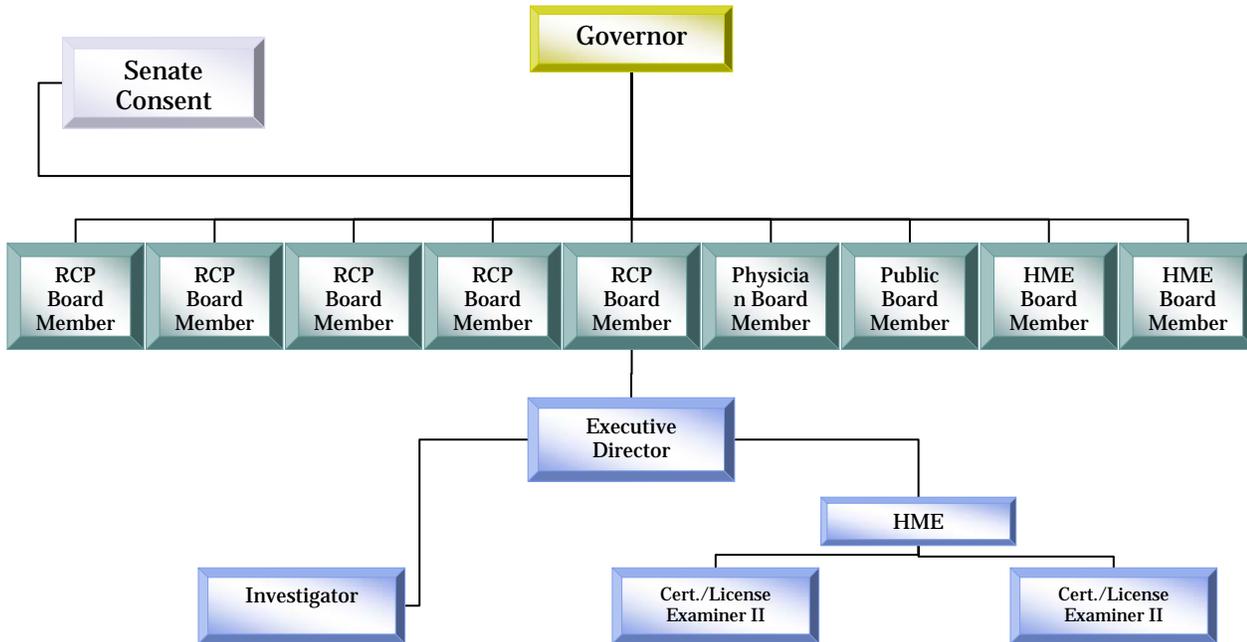

Darrell L. Heckman, Attorney at Law
Public Member
Urbana, Ohio


Anita L. Adams, R.R.T., R.C.P., M.B.A.
Professional Member
Dayton, Ohio


Joel D. Marx, B.S.
HME Professional Member
Pepper Pike, Ohio


Carol Gilligan
HME Professional Member
Bay Village, Ohio

Board Organization



Board Authority and Functions

The Board's primary purpose by law is to protect the public by regulating the practice of respiratory care and home medical equipment facilities in Ohio. With the advent of home medical equipment licensing under Chapter 4752 of the Revised Code, the Board membership was expanded to include persons with expertise in the provision of these services. In this regard, the Board acts as a unique licensing-agent for both the respiratory care profession and home medical equipment facilities in Ohio.

In addition to its licensing duties, the Board investigates complaints and takes any necessary corrective action, investigates inquiries and performs inspections, holds rules hearings pursuant to Chapter 119 of the Ohio Revised Code, and monitors continuing education compliance. The Board also approves respiratory care educational programs and, when necessary, conducts on site review.

Home medical equipment facilities registered by the board are required to follow standards of practice set down by the organization that accredits the facility. Licensed home medical equipment facilities must adhere to standards of practice developed by the Board through rule authority. These facilities are inspected at least once every four years to assure compliance with the Board's standards.

In accordance with law, the Board may, following an adjudication hearing held pursuant to Chapter 119, take action against a licensed respiratory care provider of home medical equipment facility licensed by the board. Within the parameters of the law for respiratory care, the Board may: refuse to issue a license or a limited permit; issue a reprimand; suspend or revoke a license or limited permit; or place a license or limited permit holder on probation. In addition, the Board may also levy fines. Similar authority exists for home medical equipment facilities licensed by the board. Certificate of registration holding facilities are subject to the standards developed by their accreditation organization. The Board is obligated by law to take action against a certificate of registration holder if the accreditation organization moves to revoke or suspend the facility accreditation.

If a person or facility is found to be practicing without a license, the Board may seek an injunction or appropriate restraining order for such practice. Unlicensed practice of home medical equipment services can incur substantial financial penalty if imposed by a court of law. The action is pursued through the court of common pleas in the county in which the violation occurs.

The Board is composed of nine members (five respiratory care professionals, two home medical equipment facility managers, one physician who specializes in pulmonary medicine and one member of the general public) who are appointed by the Governor, with the advice and consent of the Ohio Senate. The Board is a diverse group of persons, representative of the demographic and cultural makeup of the home medical equipment industry and respiratory care profession. Members are paid for each day employed in the discharge of official duties. All members are reimbursed according to state travel rules for travel expenses.

The Board is self-sustained through fees generated from applications for initial licensure, renewal fees, fines and other miscellaneous sources. Fees are deposited into a joint operating fund (called the "4K9" fund) consisting of fees from twenty-two professional licensing boards. Each agency in the fund is required to generate sufficient revenue to meet its own expenses. Although the 4K9 fund serves as the funding source for the Board, it must still go through the standard biennial budget process. Hence, the Board's biennial budget is established by the Ohio General Assembly. Each year, the Board reviews licensure fees and budget requirements to determine if fee adjustments are necessary.

Although the Board must provide the same services as larger agencies, it does so with a small staff. Under the direction of the Board, one Executive Director, two License/Certification Examiner II positions, one Investigator, and one Home Medical Equipment Licensing Manager staff the office. The office is located at the Vern Riffe Center for Government and the Arts, 77 South High Street, 16th Floor, Columbus, Ohio. Office hours are from 8:00 a.m. to 5:00 p.m., Monday through Friday.

The Board disseminates information concerning its activities, including board meeting minutes, forms, notices, and board member profiles on its state Webpage: www.respiratorycare.ohio.gov. In 2008, the Board completely redesigned its webpage to reflect the dual nature of its regulatory authority. The Website now host both Respiratory Care and Home Medical Equipment licensing information, news, forms, meeting minutes and notices, laws and rules, and board member information on the same webpage. The Board is proud of this accomplishment, which was completed by staff at no additional cost to the agency.

Mission Statement

The mission of the Board is to protect and serve the public of Ohio by effectively and efficiently regulating Home Medical Equipment facilities and the practice of Respiratory Care in the State of Ohio through the licensing of qualified facilities and practitioners, the establishment of standards for respiratory care educational programs and home medical equipment facilities and the enforcement of the laws and rules governing these practices.

Vision Statement

Making a responsible difference for the citizens of Ohio --- by efficient and effective Licensing for Respiratory Care Professionals and Home Medical Equipment facilities, Enforcing Practice Standards and Promoting Professional Competency.

Board Programs

- Respiratory Care Practice

At the end of FY 2008, over 6600 persons in Ohio held an active licenses to practice respiratory care. At the time this report was written, 6956 persons held active licensure in Ohio, demonstrating the growth of the practice. Since its inception, the Ohio Respiratory Care Board has issued more than 11,000 total licenses to qualified respiratory therapists.

The Board was established in 1989 to regulate the practice of respiratory care. Respiratory therapists, under the prescription of a licensed physician or qualified certified nurse practitioner or clinical nurse specialist, may provide many therapeutic, high risk and life-saving procedures to patients suffering from a variety of diseases and ailments affecting the lungs and heart. Persons suffering from emphysema, lung cancer, asthma, cystic fibrosis, and many other lung/heart ailments receive assessment, care, education and rehabilitation by respiratory therapists. The profession provides care in hospitals, long-term care facilities, sleep study laboratories, home care organizations, and physician offices. Today, all lower forty-eight states, the District of Columbia, and Puerto Rico require some form of licensure for respiratory therapists. Only Alaska and Hawaii do not require licensing in this practice.

- Home Medical Equipment Licensing and Registration

The Ohio Respiratory Care Board is charged with the licensing/certification and inspection of Home Medical Equipment (HME) facilities in the state of Ohio that sell, rent, deliver, install or maintain HME equipment. The law focuses on home medical equipment providers that sell or

lease life-sustaining or technologically sophisticated equipment. By rule, the Board can identify other equipment that meets the definition of HME. A full list of equipment falling under the definition home medical equipment is defined in rule and regularly posted to the Board's home medical equipment website.

Two types of authorization to practice may be issued:

(1) **Certificate of Registration:** this status would apply to those facilities that are already accredited by the Joint Commission on Accreditation of Health Organizations or another accrediting organization recognized by the Ohio Respiratory Care Board. Holders of this authorization may provide the full range of home medical equipment services defined in the law, but will not be subject to the requirements of a licensed facility. For example, a Certificate of Registration holder would not have to undergo inspection by the board because the accrediting organization performs this requirement.

(2) **License:** this status would apply to all non-accredited facilities. Licensed providers are subject to regular inspections and must comply with all provisions of the law to legally sell or lease the full range of home medical equipment services defined in the law.

Currently, the Board licenses 197 home medical equipment facilities and registers 478 home medical equipment facilities, giving Ohio an active total of 675 licensed or registered home medical equipment facilities. In FY 2008, the Board inspected 79 home medical equipment facilities. The Board predicts nearly all of the Board's licensed home medical equipment facilities will be inspected by the end of fiscal year 2009. In 2008, the Board addressed a challenge to devise an effective method of inspecting out-of-state home medical equipment facilities that are beyond the physical reach of the Board's inspecting personnel. The Ohio Revised Code does not require an HME facility to be in the State of Ohio. Travel out-of-state is cost prohibitive, but the Board is required by statute to inspect licensed facilities. To address this issue, the Board developed a self-evaluation process that requires written, photographic and documentary evidence of compliance with Ohio standards. The out-of-state home medical equipment facility is assigned to a State of Ohio inspector who leads the facility through the inspection process. Information is mailed directly to the Board's inspector for evaluation. Deficiencies are communicated back to the facility for correction. The Board is happy to report that the process, although lengthy, is very effective and it saves the agency time.

2008 Actions of the Board

Official actions of the Board are journalized in the minutes of each meeting. The Board meets every other month for two days. Generally, the first day consists of committee meetings and routine business: approvals of licenses, hearing notices, consent agreements, expenditures and discussion on topical issues before the membership. The second day of the Board meeting is reserved for adjudication hearings. The Board hears nearly all of its own cases and normally renders decisions the same day of the hearing. Board meeting minutes are available to the public by mail, e-mail, and a full year or more of minutes are maintained on the Board's website.

The following is a synopsis of the important actions taken by the Board during each meeting. This list does not include routine business and investigative matters, nor disciplinary hearings and findings.

- August 15, 2007

- **The Board's Home Medical Equipment (HME) Committee met and recommended recognition of the Commission on Accreditation of Rehabilitation Facilities (CARF) as an authorized accrediting organization for home medical equipment facilities seeking a certificate of registration to provide HME to Ohio citizens. In addition, the Committee considered a new rule draft that would restrict the transfer of an HME license to a new facility location. The rule would also address ownership change. The HME Committee also recommended adoption of a new rule that would require HME facilities to provide Board contact information to clients upon setup of the HME equipment. The Board approved the recognition of CARF as an approved accrediting organization by a 7 – 0 vote.**

- **The Board's Scope of Practice Committee met and reviewed two inquiries. One inquiry asked if respiratory therapists could administer Nitrous Oxide to induce sedation for the purpose of setting bones or stitching wounds. The Committee determined that respiratory therapists are not permitted to perform this procedure. The Scope of Practice Committee also considered an inquiry asking if respiratory care providers could administer contrast solutions for echocardiography testing. The Committee recommended that this procedure be included in the scope of respiratory care practice. The Board approved the Scope of Practice Committee's recommendations to address the inquiries filed by a 7 – 0 vote.**

- **The Board approved:**
 - **Seven Opportunity for Hearing Notices based upon violations of the laws and rules governing the practice of respiratory care and home medical equipment licensure.**
 - **Four informal content agreements**
 - **Withdrawal of six previously issued Opportunity for Hearing Notices based upon compliance with outstanding requirements.**

- **The Board ratified the issuance of 14 HME facility licenses, 15 HME Certificates of Registration, 159 respiratory care professional licenses and 84 limited permits.**

- **The Board approved a strategic plan for the HME licensing program for FY 2007 and FY 2008.**

- **The Board approved the 2007 annual report**

- **The Board ordered the re-inspection of three HME facilities following a review of the inspection finding of the initial inspection conducted by the Board.**

- **Following a hearing, the Board moved to issue a limited permit to Ms. Tammy L. Cooper.**

- October 16, 2007

- **The Board developed an out-of-state HME inspection process to efficiently and effectively review the practice standards for non-resident HME facilities without requiring travel by Board staff or contract inspectors. The members reviewed the proposed process and directed the HME Committee to ask Board counsel review the documentation for legal sufficiency.**
- **The Board's Scope of Practice Committee considered one respiratory care practice inquiry and one HME inquiry. In response to a question asking if respiratory care providers can draw femoral blood gases the Committee recommended that the Board respond stating that femoral blood draws are within the scope of respiratory care practice. In response to a question asking if subsidiary HME facilities need to obtain a license to drop ship HME replacement accessories, the Committee recommended that the Board respond stating that a license is not required because the HME subsidiary is not providing any HME defined under the code. The Board approved the recommendations of the Committee by a vote of 8 – 0.**
- **The Board approved:**
 - **Seven Opportunity for Hearing Notices based on violations of the laws and rules governing the practice of respiratory care in Ohio.**
 - **Two consent agreements in lieu of an administrative hearing before the Board.**
 - **Closing five complaint investigations based on unfounded or non-jurisdictional.**
- **The Board ratified the issuance of 9 HME facility licenses, 9 HME Certificates of Registration, 93 respiratory care professional licenses and 106 limited permits. In addition, the Board considered two petitions to extend the active term of limited permits pursuant to Section 4761.05 of the Revised Code. In response to a petition filed by Dawn Grevious the Board moved to extend Ms. Grevious' permit for three months following the date of graduation from a Board-approved respiratory care educational program. In response to a petition filed by Dawn Hanrahan the Board moved to deny extending Ms. Hanrahan's, because no case for unusual hardship could be established.**
- **The Board considered an application filed by the Board for Othotist/Prothetists Certification (BOC) and an application filed by the Healthcare Quality Association on Accreditation (HQAA) for recognition as a authorized accrediting organization for the purpose of obtaining a Certificate of Registration under Ohio HME law. The Board tabled the recognition of BOC and HQAA by a 8 – 0 vote.**
- **The Board approved the FY 2008 fall newsletters for HME and respiratory care licensing.**
- **The Board moved to file two new and seven amended rules with the Joint Committee on Agency Rule Review.**
- **Last, the Board discussed a policy enacted by the National Board for Respiratory Care, Inc. that requires persons nationally credentialed by the NBRC after 2002 to**

submit to a continuing competency require or risk losing their credentialing. The Board considered the NBRC's policy and its impact on licensing requirements in the state of Ohio. After extensive discussion, the Board staff was directed to draft a position statement on the matter.

- December 11 &12, 2007

- **The Board President announced that Dr. Robert Cohn, Physician Member on the Board, was awarded a National Fellowship by the American Association for Respiratory Care.**
- **The Board held a training session on Ohio Ethics law. The session was presented by the Board's Executive Director, using material supplied by Governor Strickland's office. The program was recognized and given a validation code for reporting to Governor Strickland's Ethics Training database for Board Member attendance.**
- **The Board's Scope of Practice Committee considered one respiratory care practice inquiry and one HME inquiry. In response to a question asking if respiratory care providers can analyze blood for electrolytes, lactate, hemoglobin, hematocrit, and glucose measures, the Committee recommended that the Board respond stating that therapists can measure blood samples to determine physiologic data that is related to cardiopulmonary parameters. In response to a question asking if subsidiary HME service acting as a repair agent for a licensed facility needs to obtain a license, the Committee recommended that the Board respond stating that a license is not required because the HME service is not providing any HME defined under the code. The Board approved the recommendations of the Committee by a vote of 8 – 0.**
- **The Board considered applications filed by the Board for Othotist/Prothetists Certification (BOC) and the Healthcare Quality Association on Accreditation (HQAA) for recognition as a authorized accrediting organization for the purpose of obtaining a Certificate of Registration under Ohio HME law. The Board moved to approve the recognition of BOC and HQAA by a 8 – 0 vote.**
- **The Board ratified the issuance of 6 HME facility licenses, 8 HME Certificates of Registration, 35 respiratory care professional licenses and 24 limited permits.**
- **The Board approved:**
 - **Two Opportunity for Hearing Notices based on violations of the laws and rules governing the practice of respiratory care in Ohio, Forty-four Opportunity for Hearing Notices based on violations of the laws and rules governing the practice of home medical equipment facilities.**
 - **Closing twenty-five complaint investigations based upon non-jurisdictional or unfounded issues.**
 - **Eight consent agreements in lieu of administrative hearings before the Board.**
 - **Withdrawing one Opportunity for Hearing Notice for compliance with outstanding issues. Withdraw and reissue two Opportunity for Hearing Notices.**

- Issuance of five cease and desist notices to home medical equipment facilities seeking to do business in the State of Ohio.
- The Board approved a position statement on the impact of National Board for Respiratory Care, Inc's continuing competency policy on the practice and licensing of Ohio therapists. The Board determined that the NBRC policy to revoke national credentialing for none compliance with their policies have no effect on Ohio's continued recognition of licensure.
- The Board considered new renewal fee schedules for HME licenses and certificates of registration. The Board approved a renewal fee of \$400.00 for HME certificate of registration holders and \$650.00 for HME license holders.
- The Board reviewed and approved the HME and RCB renewal applications for the 2008-2010 renewal period.
- Following a hearing held pursuant to Chapter 119. of the Ohio Revised Code, the moved to issue a limited permit to Karen Ohe.

- January 15, 2008

- The Board held a teleconference meeting pursuant to Section 4761.09 (C) of the Revised Code to consider a summary suspension of a respiratory care license. The Board moved to accept the report of summary of allegations filed by the Board's President and Secretary. Following deliberation, the Board moved to enter upon it's Journal an Order of Summary Suspension.

- February 12 & 13, 2008

- The Board held a public administrative rules hearing to consider two new and ten amended rules. Following the hearing the Board moved to withdraw one rule and final file the eleven proposed rules on or after the date Joint Committee on Agency Rule Review jurisdiction ends.
- The Rules Committee reported that the Board had completed the phase one of the Board's five-year rule review process. The Committee identified nine rules that required substantive and nonsubstantive amendments. The other rules were determined to by "no change" rules. In all, the committee reviewed twenty-four respiratory care rules under OAC 4761 and thirty-five home medical equipment rules under OAC 4761:1.
- The Board's Scope of Practice Committee considered two respiratory care practice inquiries and one HME inquiry. In response to a question asking if respiratory care providers can perform nasal swabbing for MRSA culture, the Committee recommended that the Board responds stating that the procedure was within the scope of respiratory care practice. In response to a question asking if unlicensed technicians could replace empty oxygen tanks if respiratory care developed a competency program, thee Committee recommended that the Board respond by informing the organization that the Board does not have jurisdiction to address the inquiry. Last, the Committee considered an inquiry asking if an HME facility

requires a license if it only provides services under contract to a Hospice program. The Committee recommended that the Board respond by stating the Hospices are exempt under ORC 4752.02 and that a direct agent of the Hospice would also be exempt under the scenario presented. The Board approved the recommendations of the Committee by a vote of 9 – 0.

● **The Board approved:**

- **Thirty-two consent agreements in lieu of an administrative hearing before the Board.**
 - **six Opportunity for Hearing Notices based on violations of the laws and rules governing the practice of respiratory care in Ohio.**
- **The Board ratified the issuance of 35 respiratory care professional licenses, 38 limited permits, 6 home medical equipment facility licenses, and 9 home medical equipment facility certificates of registration.**
- **The Board moved to file 43 respiratory care and 32 home medical equipment no change rules under OAC Chapter 4761 in accordance with ORC 119.032 review. The Board also moved to file 9 respiratory care amended rules under OAC Chapter 4761 and 6 home medical equipment amended rules under OAC 4761:1 in accordance with ORC 119.032 review.**
- **The Board considered a draft initial application form for respiratory care licensure under ORC 4761 and a draft criminal background check rule. Changes were introduced pursuant to H.B. 104 (eff. March 28, 2008), which would require criminal background checks for all new initial applicants for licenses and limited permits. The Board moved to approve the draft initial application for initial license/limited permit. The Board debated the draft criminal background check rule at length. The Board directed that the term of recognition in the draft rule be amended from three months to six months. The Board moved to file the draft Criminal Background Check rule.**
- **Following a hearing held pursuant to Chapter 119. of the Ohio Revised Code, the moved to issue a reprimand to Dawn B. Long for violating provisions of RC 4761.**

- April 16, 2008

- **The Board's HME Committee reviewed an inspection appeal filed by We Care Medical. After review and debate, the Committee moved to recommend denial of the appeal. The HME Committee also reviewed a request filed by the Ohio Department of Job and Family Services to determine if Vacuum Assisted Closure (VAC) device constitute home medical equipment pursuant to Section 4752.01 (B)(2) of the Revised Code. The Committee, after significant discussion, moved to include VAC devices on the list of recognized HME equipment pursuant to the Board's authority under OAC 4761:1-3-02. The Board moved to approve the recommendations of the HME Committee by a vote of 7 – 0.**
- **The Board held debate on the matter of contracting independent hearing officers to conduct administrative hearings before the Board. The Board's current practice of**

hearing its own hearings recent became a concern following the resignation of its public member, Dana (Buck) Rinehart. Mr. Rinehart, a capable attorney, was the Board's hearing officer. Following debate, the Board directed the Board's Executive Director to enter into a contract arrangement with an independent hearing officer. The Board recommended that a hearing officer be assigned if the hearing was technically or legally complex. The Board stated that its policy of hearing its own cases would continue.

- The Board moved to develop guidelines giving the Executive Director, with the involvement of the Assistant Attorney General, authority to review applicants that report minor misdemeanor crimes to determine the jurisdiction of the agency before considering forwarding the matter to the Board's Probable Review Committee.
- The Board approved:
 - Twelve consent agreements in lieu of an administrative hearing before the Board.
 - Seventeen Opportunity for Hearing Notices based on violations of the laws and rules governing the practice of home medical equipment and two Opportunity for Hearing Notices based on violations of the laws and rules governing the practice of respiratory care in Ohio
 - Close seven complaint based on non-jurisdictional or unfounded reasons.
 - The withdrawal of four opportunities for hearing notices based upon completion of requirements.
- Following a hearing held pursuant to Chapter 119. of the Ohio Revised Code, the moved to issue an indefinite suspension, pending receipt of a fine of \$500.00 and compliance with established standards to E&R Medical for violating provisions of RC 4752.
- The Board ratified the issuance of 9 HME facility licenses, 7 HME certificates of registration, 42 respiratory care professional licenses and 61 respiratory care limited permits. The Board independently reviewed two other applications: one for a limited permit and one for a respiratory care professional license. The Board moved to approve both.
- The Board considered a petition filed by Corrie Criner to extend the active term of his limited permit based upon a condition of unusual hardship. The Board moved to approve the extension of Mr. Criner's limited permit. The motion failed.
- The Board reviewed and approved new draft initial application forms the home medical equipment license and certificate of registration.
- The Board held open the comment period for propose rule amendments filed in February 2008. Hearing or receiving no additional comments or testimony, the Board moved to issue an order to adopt 43 respiratory care and 32 home medical equipment no change rules under OAC Chapter 4761 in accordance with ORC 119.032 review and 9 respiratory care amended rules under OAC Chapter 4761 and 6 home medical equipment amended rules under OAC 4761:1 in accordance with ORC 119.032 review.

- The Board held elections for Board officers. Mr. Marc Mays was elected President of the Board and Mr. Eugene Andrews was elected Secretary of the Board. Mr. Mays' first act was to appoint Dr. Robert Cohn as Vice-President. Next, Mr. Mays acted by appointing members to standing committees.

- June 17 & 18, 2008

- The Board held a public rules hearing pursuant to ORC 119. Following the hearing, the Board moved to amend and re-file proposed rule 4761-5-07 regarding the term of recognition of criminal backgrounds checks required under H.B. 104. The Board then moved to final file the proposed rules once the Joint Committee on Agency Rule Review jurisdiction ended.
- The HME Committee reviewed an inspection report appeal filed by Accucare, Inc. The Committee moved to recommend denial of the appeal.
- The Scope of Practice Committee reported reviewing an inquiry concerning the use of unlicensed personnel to fit masks for CPAP patients. After lengthy discussion, the Committee moved to recommend that the Board respond by stating the practice is within the scope of a licensed or certificate of registration holding HME facility. The Scope of Practice Committee also reported on reviewing an inquiry asking if licensed respiratory care professionals could prime tubing for blood transfusions. After lengthy discussion and debate, the Committee moved to recommend that the Board respond by stating the procedure is within the scope of practice a properly training respiratory care professional. The Board moved for the adoption of the recommended responses.
- The Board's Education Committee met and reported that an agenda for an August 2008 Educator's Conference was discussed. The Committee reported that a Conference would be held on August 12, 2008.
- The Board approved:
 - The closure of four investigations after the Board determined that the investigation found no grounds for further review.
 - Eleven consent agreements in lieu administrative hearing before the Board.
 - Fourteen Opportunity for Hearing Notices based on violations of the laws and rules governing the practice of respiratory care and home medical equipment provision in Ohio.
- The Board ratified the issuance of 17 HME facility licenses, 25 HME Certificate of Registrations, 31 respiratory care professional licenses and 60 limited permits.
- The Board moved to approve policy #6.2 concerning the handling of criminal background check records.
- The Board moved to approve an on-line respiratory care continuing education course on respiratory care law. The course will be available on the Board's website at no cost to the licensee.

- The Board considered a draft policy on Board Member pay. Following discussion, the Board moved to table the draft policy.
- The Board moved to approve five new and amended application forms: Initial application for license and limited permit, RCB non-resident waiver form, HME affidavit of exception, Initial application for HME license, and the initial application for HME certificate of registration.
- The Board moved to approve the spring 2008 newsletter for Respiratory Care.
- The Board moved to approve the expenditure of funds to purchase two new computers and one telephone.
- Following a hearing held pursuant to Chapter 119. of the Revised Code, the Board moved to issue a limited permit to Aaron Funkhouser.

Trends and Opportunities

- Respiratory Care Continuing Education

The Ohio Respiratory Care Board raised the continuing education standards for the respiratory care practice in FY 2008. Beginning, July 1, 2008, licensees and qualifying limited permit holders must complete more contact hours of continuing education: 20 contact hours biennially for licensed professionals and 10 contact hours annually for qualifying limited permit holders. One contact hour must include a course on professional ethics or respiratory care law in Ohio. The Board clearly believes this change will enhance the practice of respiratory care by leading to greater knowledge and regular competency education for Ohio therapists. By requiring specific training in ethics or law, the Board believes Ohio will continue to lead the nation's respiratory care regulatory boards.

New continuing education requirements represent an opportunity for the Board to re-educate and re-energize Ohio therapists about the importance of continuing education in their personal practices. Some regulations, like biennial continuing education requirements, can often be relegated to the routine; its importance lost to the licensed professional. The Board has mailed the new requirements to all license and limited permit holders. In addition, the Board has established a free online continuing education link that will provide contact hours for the law portion of the new rule. The Board is planning on listing new links for approved ethics training and listing available continuing education events on its website.

- Respiratory Care Scope of Practice

The Board continues to see opportunities to redefine the scope of respiratory care practice. Nationally, many respiratory care laws permit therapists to work under standard protocol orders issued by physicians. Extensive surveys and studies demonstrate the efficacy of respiratory care protocols, proving patient care outcomes can be improved and costs can be reduced. Many state laws actually note "protocols" within the statutory scope of practice. In Ohio, protocol care involving medication administrations are governed by the Ohio State Board of Pharmacy. This, in effect, restricts physicians from ordering respiratory care

procedures (involving medication administration) by nationally recognized protocols. The Board contends that patient care could be optimized and less expensive if respiratory care protocols are utilized according to the practice guidelines developed by the American Association for Respiratory Care (AARC). The Board believes this issue should be addressed through legislation.

- Home Medical Equipment Licensure Growth

The Board presumed in 2005, when the home medical equipment licensing act was enacted, that licensing and certification levels would eventually plateau. The Board considered home medical equipment facility growth in static terms. Now three years later, the Board has a better understanding of the dynamic nature in the home medical equipment industry. Facilities are regularly being opened, closed, purchased, transferred, and moved. In addition, facilities usually start out as licensed facilities and then eventually transition to a certificate of registration as the facility matures and seeks independent accreditation.

The dynamic environment and continued growth in licensure represents a significant opportunity for the Board to educate licensees, government regulators and third party payers about the state's standards for home medical equipment facilities doing business in the state of Ohio. The Board should consider all options to communicate its regulations to all stakeholders. Some of the obvious stakeholders include: (1) Licensees – the Board must continue to stress ongoing compliance and education with its licensed facilities. The more the regulated facilities know, the better compliance with standards will be. The public certainly benefits from well ran, clean, and qualified home medical equipment vendors; (2) Consumers – it is highly likely that consumers do not understand the role of the Board in validating the quality of home medical equipment services rendered or the public's ability to file complaints with the agency; and (3) Accrediting Organizations – all accrediting organizations recognized by the Board have entered into cooperative agreements to share information relative to the accreditation status of our registrants or complaints filed by the public. Although these agreements are strong, the Board must do more to regularly enforce the provisions of the agreements and instruct organizations on how to enforce the provisions of these agreements.

Objectives for Next Year

- 1. Development of an aggregate Education Data Report.**
- 2. Development of an aggregate Home Medical Equipment Data Report.**
- 3. Hold a strategic planning meeting for Home Medical Equipment regulation.**
- 4. Decrease processing time on renewal applications.**
- 5. Work toward introducing legislation to clean up HME and RCB language.**
- 6. Continue to monitor and develop policies to protect the public.**

Board Status

- 2008 Licensing Activity

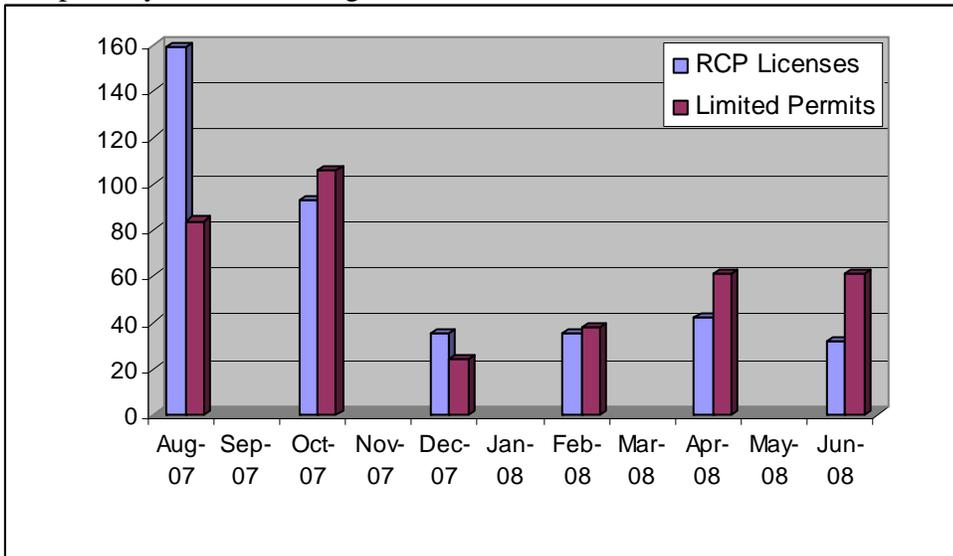
Current number of all licensees

	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>
RCP License Holders	6639	6478	7035	6742
RC Limited Permit Holder	<u>371</u>	<u>394</u>	<u>383</u>	<u>357</u>
Total	7010	6872	7418	7099
HME Licensed Facilities	0	142	221	145
HME Certificate of Registrations	<u>0</u>	<u>294</u>	<u>378</u>	<u>394</u>
Total	0	436	599	539
	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>
Initial RCP Licenses Issued	367	394	416	364
RC Limited Permits Issued	300	271	323	349
Initial HME Licenses Issued	0	170	104	63
Initial HME Registrations Issued	0	308	88	81
HME Provisional Licenses Issued	0	23	0	0
License Renewal *	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>
RCP License Holders	241	6359	157	6574
RC Limited Permit Holders	257	275	131	349
HME Facility Licenses	0	270	20	145
HME Certificates of Registration	0	110	7	394

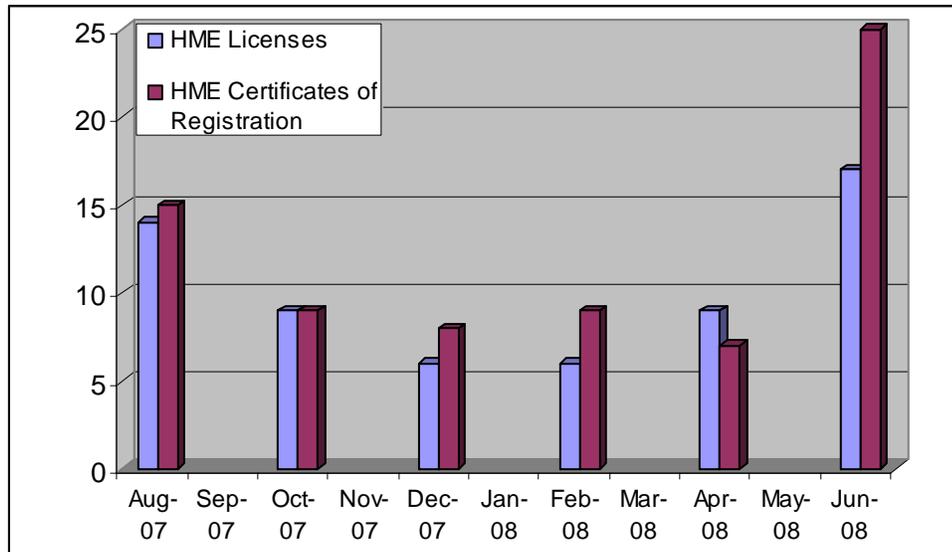
* Total are as of June 30, 2008 and include renewal received, but revenue deposited after June 30, 2008. * 2008 data counts only license and permit holders renewing or reinstating their license or permit during FY 2008. This total does not reflect those licenses and permits that are current and active at the time of the report.

Initial License Issuance Trends for FY 2008

Respiratory Care Licensing



Home Medical Equipment Licensing



Revenues and Expenditures

Fee Description	Amount Collected
Cancelled State Warrants	\$53.20
Certificate of Registration Renewal Fees	\$157,570.00
Home Medical Equipment Facility Initial License Fees	\$20,550.00
Home Medical Equipment Facility Late License Renewal Fees	\$0.00
Home Medical Equipment Facility License Renewal Fees	\$94,650.00
Home Medical Equipment Fines	\$0.00

Home Medical Equipment Initial Registration Fees	\$17,150.00
Home Medical Equipment Inspection Fees	\$38,800.00
Home Medical Equipment Miscellaneous Fees	\$230.00
Respiratory Care Fines	\$4,775.00
Respiratory Care Initial Limited Permit Fees	\$7,195.00
Respiratory Care Late License Renewal Fees	\$1,650.00
Respiratory Care Limited Permit Late Renewal Fee	\$230.00
Respiratory Care Limited Permit Renewal Fees	\$40,400.00
Respiratory Care Miscellaneous Fees	\$732.54
Respiratory Care Professional License Fees	\$29,280.00
Respiratory Care Professional Renewal Fees	\$430,900.00
Total	\$808,075.74

Statement of Expenses

Expenses	FY 2007	FY 2008
Personal Service (Object Cat. 1; Categories 500 & 510)	\$349,890.08	\$402,027.96
Supplies & Maintenance (Object Cat. 2; Category 520)	\$74,032.68	\$84,082.13
Equipment (Object Cat. 3; Category 530)	\$4,440.22	\$666.93
Subsidies & Shared Rev. (Object Cat. 5; Category 550)	\$0.00	\$0.00
Transfers & Non-Expense (Object Cat.9; Category 595)	\$11,477.50	\$1,365.00
Total	\$439,840.48	\$488,142.02

Investigatory Report and Disciplinary Actions

Case Analysis

- Carry over from FY 2007 18
- Cases taken in for FY 2008 163
- Carry over for FY 2009 31

Case Breakdown for 2007

- Felony Crimes and or Convictions 7
- Misdemeanor Convictions Involving Moral Turpitude 3
- Failure to Report Convictions 1
- Practicing While Impaired and or Drug Abuse 5
- Continuing Education Failure 2
- Unlicensed Practice 112
- Falsification 5
- Permitting Unauthorized Practice 3
- Practicing Beyond Scope 1
- Poor Standard of Care 2
- Misrepresentation of credentials 1
- Fraudulent Billing 2
- Failure to Meet Licensing Requirements 3
- Failure to Comply w/ Inspection Findings 8

● Illegal Practice	1
● Incompetent Practice	1
● Patient Abandonment	1
● Failure to Comply w/ Board Directive	5

Adjudication Hearings Held

<u>Case Number and Name</u>	<u>Complaint</u>	<u>Disposition</u>
2006 ORCB 14 Dawn Long	Falsified Medical Records	Reprimanded/ Ethics Training
2007 ORCB 77 Tammy Cooper	Felony Convictions	Issued License
2007 HME 24 E&R Medical	Failed to Comply w/ Inspection Findings	Indefinitely Suspended
2008 ORCB 08 Karen Ohe	Felony Convictions	Issued License
2008 ORCB 19 Roberta VonGunton	Failed to Meet Requirements	Denied Licensure
2008 ORCB 27 Aaron Funkhouser	Felony Convictions	Issued License

In addition to the hearings held in 2008, the Board also entered into Ninety (90) consent agreements in lieu of hearings before the Board.

Consent Agreements:

Respiratory Care

<u>Name</u>	<u>Complaint</u>	<u>Disposition</u>
Sandra Richmond	Negligence	Reprimanded and Fined
Bonnie Bilko	Falsified Application- Conviction	Suspended and Probation
Shannon Short	Unlicensed Practice	Reprimanded and Fined
Shelley Shadowen	Unlicensed Practice	Reprimanded and Fined
Dana Bauer	Unlicensed Practice	Reprimanded and Fined
Melvin Mcdowell	Unlicensed Practice	Reprimanded and Fined
Kelli Hilton	CEU Failure	Submit Continuing Education
Tara Roy	Unlicensed Practice	Reprimanded and Fined
Winston Cooper	Unlicensed Practice	Reprimanded and Fined
Melissa Robbins	Unlicensed Practice	Reprimanded and Fined
Lorin Collins	Unlicensed Practice	Reprimanded and Fined
Nicholas Mallas	Unlicensed Practice	Reprimanded and Fined
Victoria Grayson	Unlicensed Practice	Suspended and Fined

Jennifer Bryan	Unlicensed Practice	Reprimanded and Fined
Jessica Shenk-Ackley	Unlicensed Practice	Reprimanded and Fined
Alicia Howe	Drug Abuse	Suspended and Probation
Eric Doherty	Unlicensed Practice	Reprimanded and Fined
Tareva Stretton	CEU Failure	Reprimanded
Vincent Aiello	Unprofessional Conduct	Reprimanded and Counseling
Rebecca D'Amico	Theft of Drugs	Suspended and Probation
Deborah Mezzacappa	Unlicensed Practice	Reprimanded and Fined

Home Medical Equipment

<u>Name</u>	<u>Complaint</u>	<u>Disposition</u>
Sleep Right, S.G., LLC	Unlicensed Practice	Reprimanded
Columbus Sleep Consultants	Unlicensed Practice	Reprimanded
The Medical Sales Group Inc.	Unlicensed Practice	Reprimanded
Home Choice Healthcare, Inc.	Unlicensed Practice	Reprimanded
North Canton Medical Foundation	Unlicensed Practice	Reprimanded
L&L Medical Services	Unlicensed Practice	Reprimanded
Orbit Medical of Columbus, Inc.	Unlicensed Practice	Reprimanded
Virtue Medical Supply Co.	Unlicensed Practice	Reprimanded
Canfield Medical Supply	Unlicensed Practice	Reprimanded
Center for Research in- Sleep Disorders	Unlicensed Practice	Reprimanded
InfuSystem, Inc.	Unlicensed Practice	Reprimanded
Kornegor Medical Equipment, Inc.	Unlicensed Practice	Reprimanded
M&J Medical Supply Co.	Unlicensed Practice	Reprimanded
New Visions Medical Equip., Inc.	Unlicensed Practice	Reprimanded
Pure Oxygen Services	Unlicensed Practice	Reprimanded
Electric Mobility Corporation	Unlicensed Practice	Reprimanded
Tri-State Medical &- Bariatric Solutions, Inc.	Unlicensed Practice	Reprimanded
Advanced Technologies, Inc.	Unlicensed Practice	Reprimanded
Mahoning Medical Equip., Inc.	Unlicensed Practice	Reprimanded
Keesling Rehab Systems	Unlicensed Practice	Reprimanded
Wright Care Home- Medical Supply, Inc.	Unlicensed Practice	Reprimanded
Premier Medical Supplies, Inc.	Unlicensed Practice	Reprimanded
Alley Healthcare, Inc.	Unlicensed Practice	Reprimanded
Cousins Medical Supplies, Inc.	Unlicensed Practice	Reprimanded
Hartman Respiratory Care	Unlicensed Practice	Reprimanded
Kathco Medical Supply	Unlicensed Practice	Reprimanded
Medical Shoppe, Inc.	Unlicensed Practice	Reprimanded
The Oxygen Store, Inc.	Unlicensed Practice	Reprimanded
Pack Medical, Inc.	Unlicensed Practice	Reprimanded
Physicians Diagnostic Sleep- Technology Specialists	Unlicensed Practice	Reprimanded
Med-Ox Concentrators	Unlicensed Practice	Reprimanded
Lincare Inc. Americas Best- Home Medical Equipment	Unlicensed Practice	Reprimanded

PSS World Medical, Inc. dba:- Ancillary Medical Solutions, Inc.	Unlicensed Practice	Reprimanded
Care First of Fort Wayne, Inc. dba:- Advanced Healthcare	Unlicensed Practice	Reprimanded
Independence Technology	Unlicensed Practice	Reprimanded
Broadfield Services	Unlicensed Practice	Reprimanded
Valley Home Care, LLC	Unlicensed Practice	Reprimanded
Frees Medical, Inc.	Unlicensed Practice	Reprimanded
The Drug Store Pharmacy	Inspection Failure	Reprimanded
Pain Management Technology, Inc.	Unlicensed Practice	Reprimanded
Better Living Home Health- & Medical	Unlicensed Practice	Reprimanded
Pulmonary Care, Inc.	Failed to Meet Licensure- Requirements	Reprimanded
Orthotic and Prosthetic Solutions	Unlicensed Practice	Reprimanded
International Quality Health Care	Inspection Failure	Reprimanded
Medical Technology Resources	Unlicensed Practice	Reprimanded
Med Source Plus, Inc.	Unlicensed Practice	Reprimanded
Access to Independence	Unlicensed Practice	Reprimanded
Key Mobility Services	Unlicensed Practice	Reprimanded
Hom-Med, Inc.	Failed to Meet Board- Directive	Reprimanded-Fined
Corner Pharmacy, LLC	Failed to Meet Board- Directive	Reprimanded
McKesson Medical Surgical- MediMart	Unlicensed Practice	Reprimanded-Fined
McKesson Medical Surgical- MediNet	Unlicensed Practice	Reprimanded

Consent agreements will be considered by the Board for any alleged violation of the respiratory care laws or rules. A consent agreement avoids the necessity of holding a hearing while preserving an individuals right to legal counsel. Both the alleged act(s) and resultant action(s) are agreed to by the licensee and the Board. Consent Agreements are considered Orders of the Board under the Revised Code. A complete listing of individuals who have entered into consent agreements with the Board is available on the Board's website.