



Environmental Scan

Diversity, Equity, Inclusion, and Accessibility
(DEIA) Supplement

2025

*Prepared by
SOLID Planning Solutions
for the Respiratory Care Board of California*



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Introduction

In September of 2022, Governor Gavin Newsom, through [Executive Order \(N-16-22\)](#), strengthened the State's commitment to a "California For All" by directing state agencies and departments to take additional actions to embed equity analysis and considerations into their policies and practices, including but not limited to the strategic planning process.

At the Department of Consumer Affairs, we are driven by our consumer protection mission and common goal to support our employees and the people and communities across California. As part of advancing the Governor's Executive Order, the Department's strategic planning process reflects our commitment to diversity, equity, inclusion, and accessibility (DEIA), incorporating inclusive public engagement and enhanced data collection and analysis.

The Department's DEIA Mission Statement: To advance a diverse, equitable, and inclusive California Department of Consumer Affairs for all.

Diversity: The inherent and acquired qualities, characteristics, and experiences that make us unique as individuals and the groups to which we belong.

Equity: Creating paths to equal outcomes by recognizing that some people and communities have unequal starting points driven by different histories, historical treatment, circumstances, strengths, and needs.

Inclusion: A practice to maintain a positive environment where all individuals feel recognized, understood, and valued.

Accessibility: Designing systems, environments, and experiences so that people of all abilities can access and engage with them, including people with disabilities.

The Department encourages the Respiratory Care Board of California (the Board) to consider DEIA impacts of policy decisions when reviewing the feedback from this report and when revising or developing strategic objectives.

In 2022, SOLID facilitated the development of the Board's five-year strategic plan. In support of the Governor's mandate, SOLID conducted a new DEIA focused scan and analysis during November 2025. This report is a summary of the feedback obtained during this survey-based scan, which will be used to assist the Board in adding a diversity, equity, inclusion, and accessibility perspective to its current strategic plan.

This supplemental environmental scan survey consisted of specific questions designed to assist strategic planning participants in considering the DEIA impacts of policy decisions such as regulatory, statutory, and continuing education requirements. Feedback was solicited from external stakeholders, board members, and the Board's leadership and staff.

As you read through this report, you are encouraged to consider:

- Who will benefit from or be burdened by the particular decision or proposal?
- Are there needs that may be different for various demographic or geographic groups?
- Once implemented, how will the Board measure the effect on impacted populations?
- What data/metrics will be used to evaluate the impacts?

This document summarizes trends, including areas where stakeholders agree and disagree, while providing insight to assist the Board in considering strategic plan objectives.

At the upcoming supplemental planning session, board members and leadership will discuss and evaluate this information as a group to help create or modify objectives that the Board will include in its work during this ongoing strategic plan period.

If you have any questions about this report, please contact Sarah Irani with SOLID Planning at Sarah.Irani@dca.ca.gov.

Diversity, Equity, Inclusion, and Accessibility Scan Summary

Trends in Gaining Different Perspectives

Survey question: What are ways the Board can gain different perspectives about ideas and priorities related to the Board's activities?

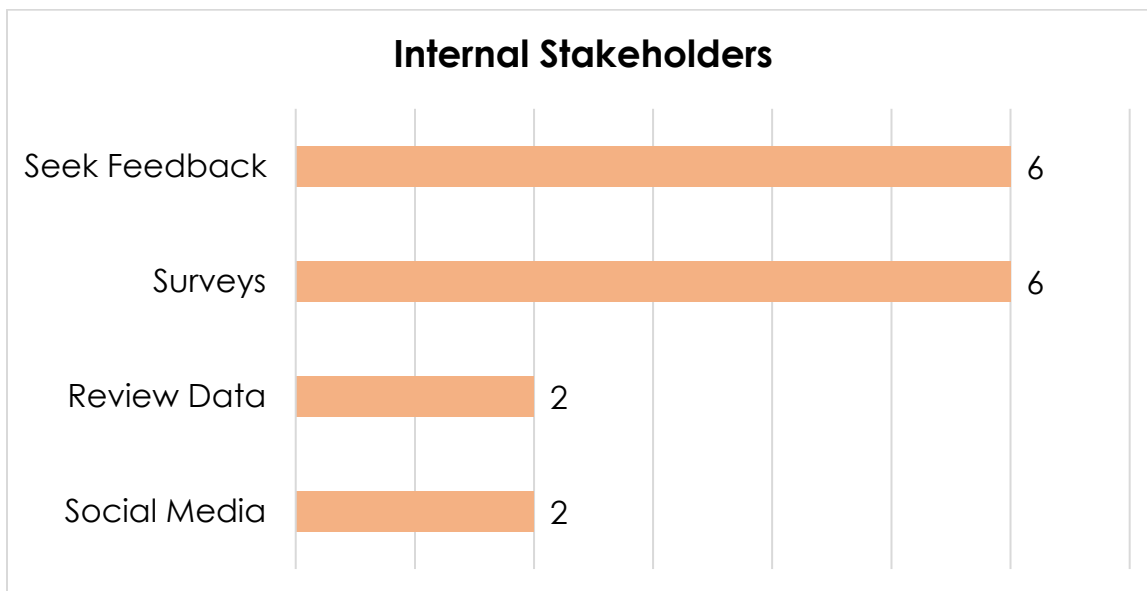
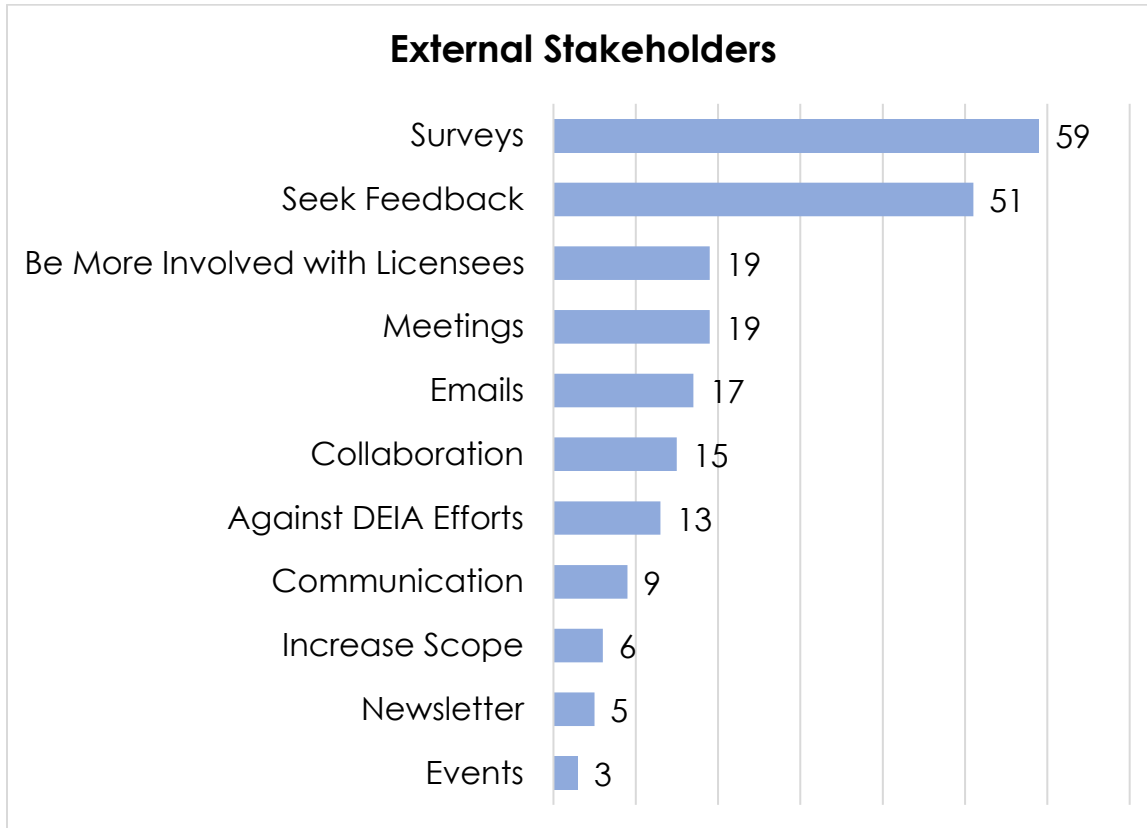
Summary of Stakeholder Comments

1. External and internal stakeholders agree that surveys would help the Board gain different perspectives.
 - A. External stakeholders would like to see the Board send out surveys to licensees, related organizations and professions, and hospitals to capture information from a diverse population throughout California.
 - B. Internal stakeholders say they would like to send surveys to the public to collect information on where the Board should focus its efforts. In addition, internal stakeholders would like to send satisfaction surveys to licensees and applicants to gather their feedback on the processes.
2. External and internal stakeholders agree that the Board should focus more on seeking feedback from various stakeholders.
 - A. External stakeholders say they would like the Board to reach out to Respiratory Care Practitioners (RCPs), especially those who work in hospital settings.
 - B. Internal stakeholders say having more open communication with stakeholders and encouraging public comment would assist the Board with gaining different perspectives.
3. Internal stakeholders say reviewing licensing, enforcement, and Department of Health Care Access and Information (HCAI) data would help the Board determine if there are any gaps that need to be addressed.
4. External stakeholders say more meetings, both in-person and virtual, would benefit the Board. They list the following meeting types:
 - A. Annual stakeholder meetings
 - B. Conferences
 - C. Focus groups

- D. Open forums
 - E. Question and Answer (Q&A) meetings
 - F. Townhalls
 - G. Webinars
5. External stakeholders would like the Board to be more involved with licensees by visiting RCPs at their workplace and seeing the day-to-day duties of the practitioners.
 6. Internal stakeholders agree that increasing their social media presence would help the Board gain more diverse perspectives.
 7. External stakeholders also say more informational emails to licensees to increase awareness of the Board's activities could help the Board gain different perspectives.
 8. External stakeholders say the Board should collaborate with the following entities to gain different perspectives:
 - A. California Society for Respiratory Care (CSRC)
 - B. Healthcare facilities
 - C. Hospitals
 - D. National Board for Respiratory Care (NBRC)
 - E. Other state respiratory care boards
 - F. Professional associations
 - G. Schools
 9. Some external stakeholders feel strongly against any diversity, equity, inclusion, and accessibility (DEIA) efforts and are opposed to the Board gaining different perspectives about ideas and priorities related to the Board's activities.

Stakeholder Comment Trends

The charts below list the top trends along with the corresponding number of comments for feedback provided by stakeholders.



Trends in Unnecessary Requirements or Barriers to Licensure

Survey question: Are there unnecessary requirements or barriers to licensure (e.g., education, experience, examination, continuing education, cost of licensure, processing time)?

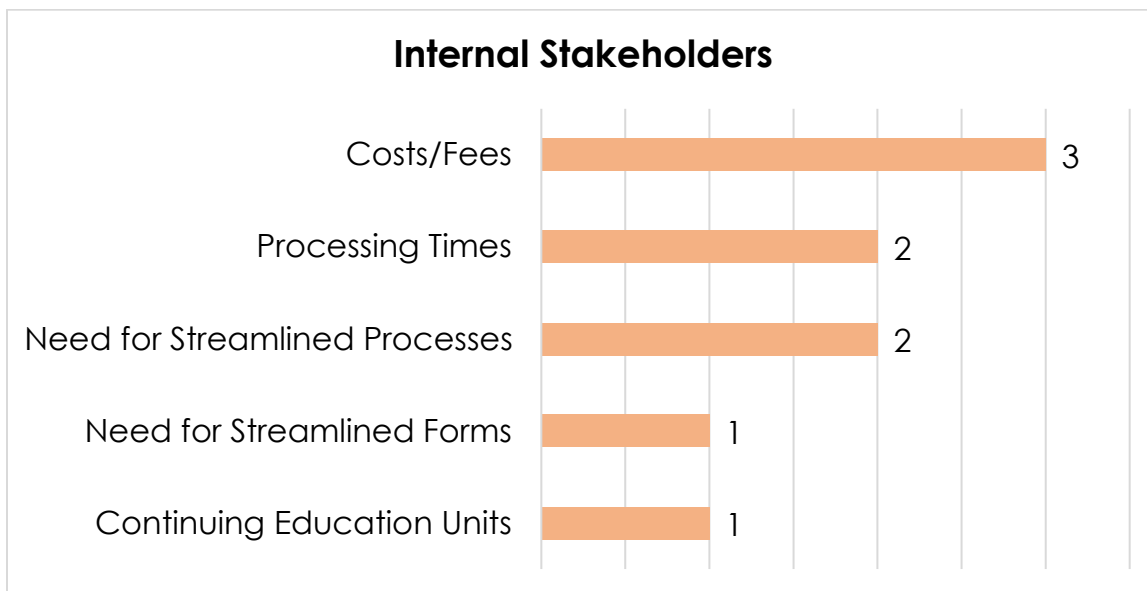
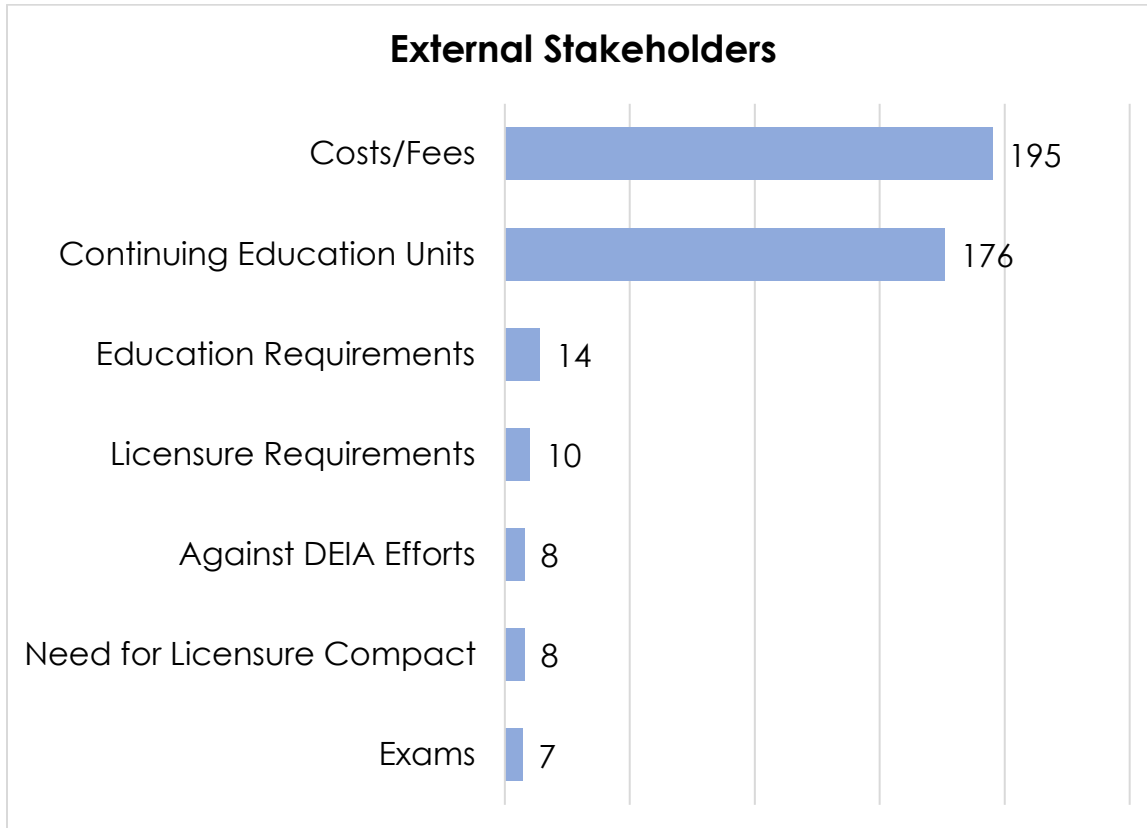
Summary of Stakeholder Comments

1. External and internal stakeholders agree that licensing costs and fees are a barrier to licensure.
 - A. External stakeholders note that costs of licensure and renewal fees are higher than similar professions such as Registered Nurses (RNs) despite RCPs making lower wages.
 - B. Internal stakeholders agree that licensure fees are high and noted that this was due to a smaller group of licensees.
2. Internal stakeholders say slow processing times can be a barrier, especially for out of state or international applicants.
3. External stakeholders feel the Continuing Education Requirements (CEUs) are a barrier. They list the reasons below:
 - A. External stakeholders feel the costs of CEUs are excessive in addition to their renewal fees.
 - B. External stakeholders feel that the requirement of “Leadership CEUs” are unnecessary and not relevant, as many licensees do not want to seek leadership roles.
 - C. External stakeholders believe the “live CEU” requirement requires them to attend courses in-person.
 - D. External stakeholders say the amount of CEUs is excessive in addition to the CEUs required of them from NBRC.
4. Internal stakeholders say that streamlining the licensing process by providing information in plain language and creating flowcharts would mitigate barriers to licensure, especially for out-of-state applicants.
5. External stakeholders say there are barriers in educational requirements. They list the below reasons:
 - A. There are fewer respiratory care programs available, and students are being waitlisted.
 - B. Poor quality programs from for-profit schools cause unnecessary hardships on those pursuing the profession.

- C. External stakeholders express concern over the push for a bachelor's degree requirement, as this would increase the cost of entry into the profession.
- 6. External stakeholders feel licensing requirements are excessive and burdensome to those pursuing the profession.
- 7. External stakeholders say a licensure compact could allow licensees to do travel assignments.

Stakeholder Comment Trends

The charts below list the top trends along with the corresponding number of comments for feedback provided by stakeholders.



Ways to Increase Outreach and Connection to All California Communities Trends

Survey question: What are ways that the Board can increase its outreach and connection to all California communities?

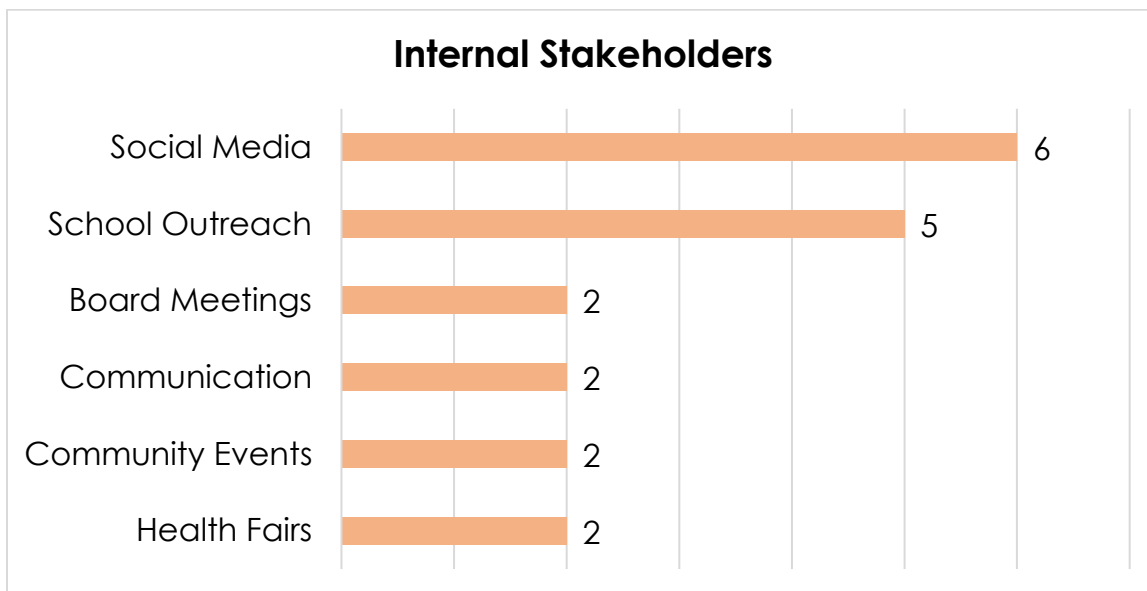
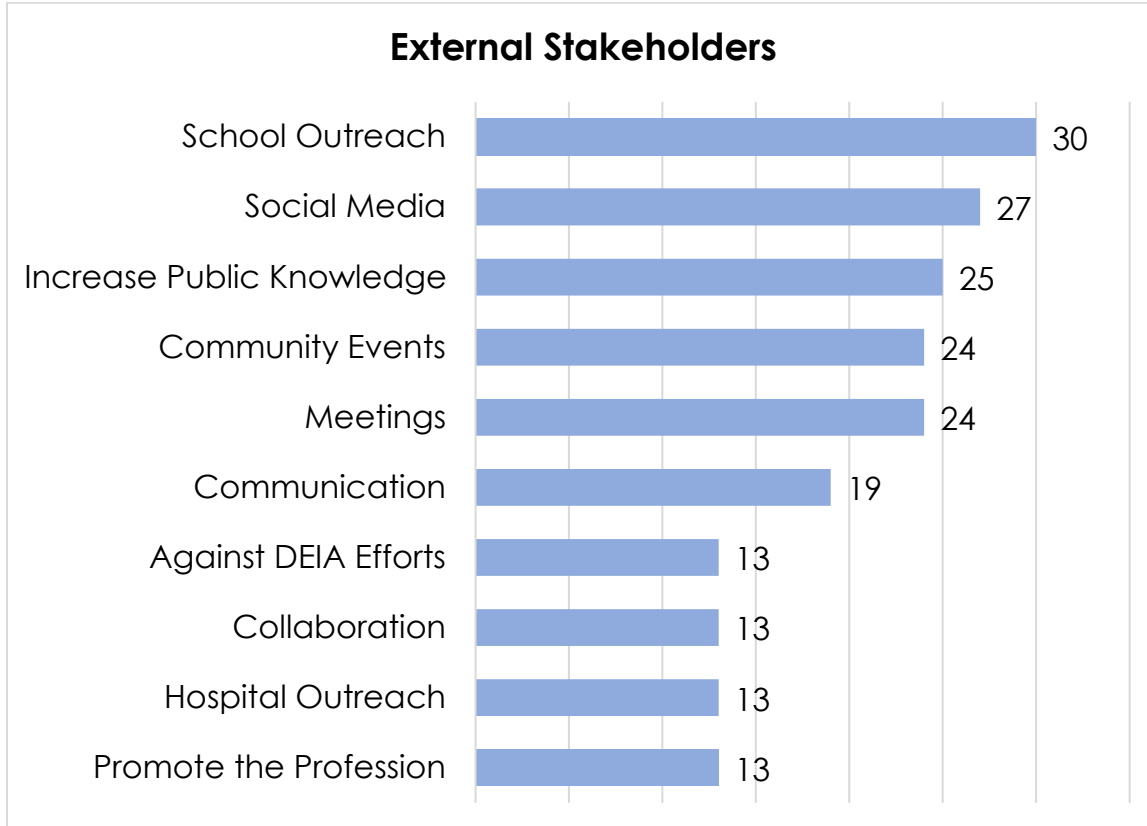
Summary of Stakeholder Comments

1. External and internal stakeholders say the Board could increase its outreach efforts to schools.
 - A. External stakeholders say they would like to see more outreach to community colleges and high schools to spread awareness of the profession. They suggest educational flyers, job fairs, health fairs, and live presentations at the schools.
 - B. Internal stakeholders would like to see more partnerships with colleges and high schools to increase awareness of the profession.
2. External and internal stakeholders agree the Board could increase social media to connect with all California communities.
 - A. Both stakeholder groups provide the following social media platforms and avenues to increase engagement:
 - Facebook groups
 - Instagram
 - LinkedIn
 - Newsletters
 - Radio advertisement
 - Television advertisement
 - TikTok
 - Twitter/X
 - YouTube
 - B. External stakeholders suggest providing information on social media in multiple languages to increase outreach.
 - C. Internal stakeholders suggest creating more videos and graphics, specifically focused on underserved communities.
3. External stakeholders would like to see the Board increase public knowledge of the profession by educating the public on the roles and responsibilities of RCPs.

4. Internal stakeholders say the Board could attend more health fairs to increase its outreach to all Californians.
5. External and internal stakeholders agree the Board should attend more community events to increase awareness and outreach.
6. External and internal stakeholders say more proactive communication would be beneficial to the Board.
 - A. External stakeholders suggest more communication efforts from the Board during respiratory care week. Additionally, they would like to see more clear and accessible communication on the Board's website, suggesting the Board use more plain language.
 - B. Internal stakeholders say more consistent messaging and word of mouth would help the Board reach many different communities.
7. External stakeholders say they would like to see the Board offer more virtual townhalls and board meetings in different regions of the state.

Stakeholder Comment Trends

The charts below list the top trends along with the corresponding number of comments for feedback provided by stakeholders.



Other Actions to Take to Further Equal Access to Opportunities

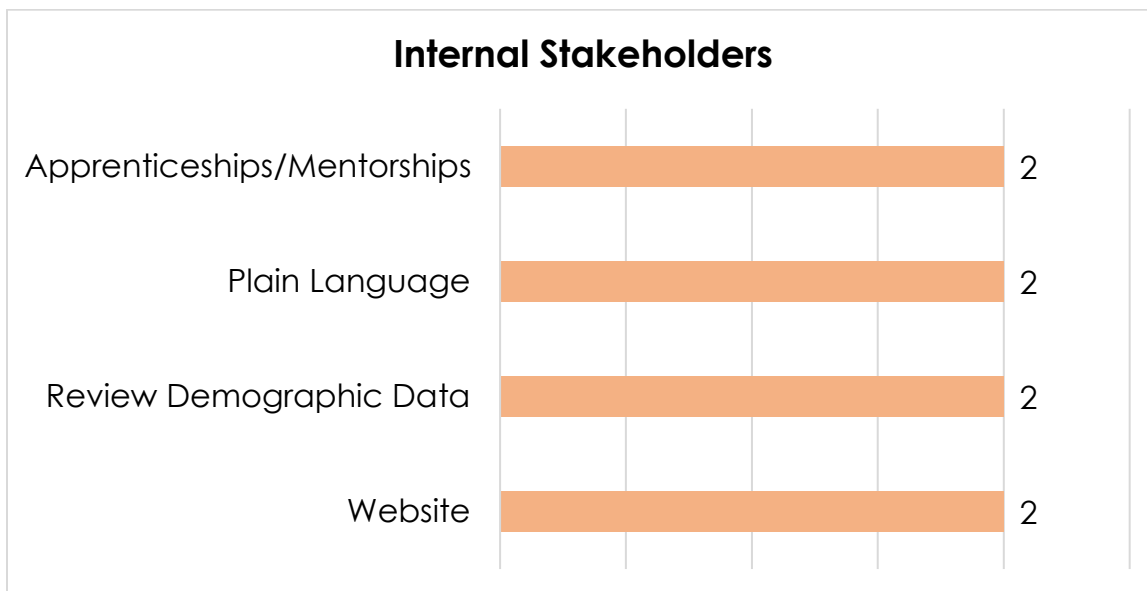
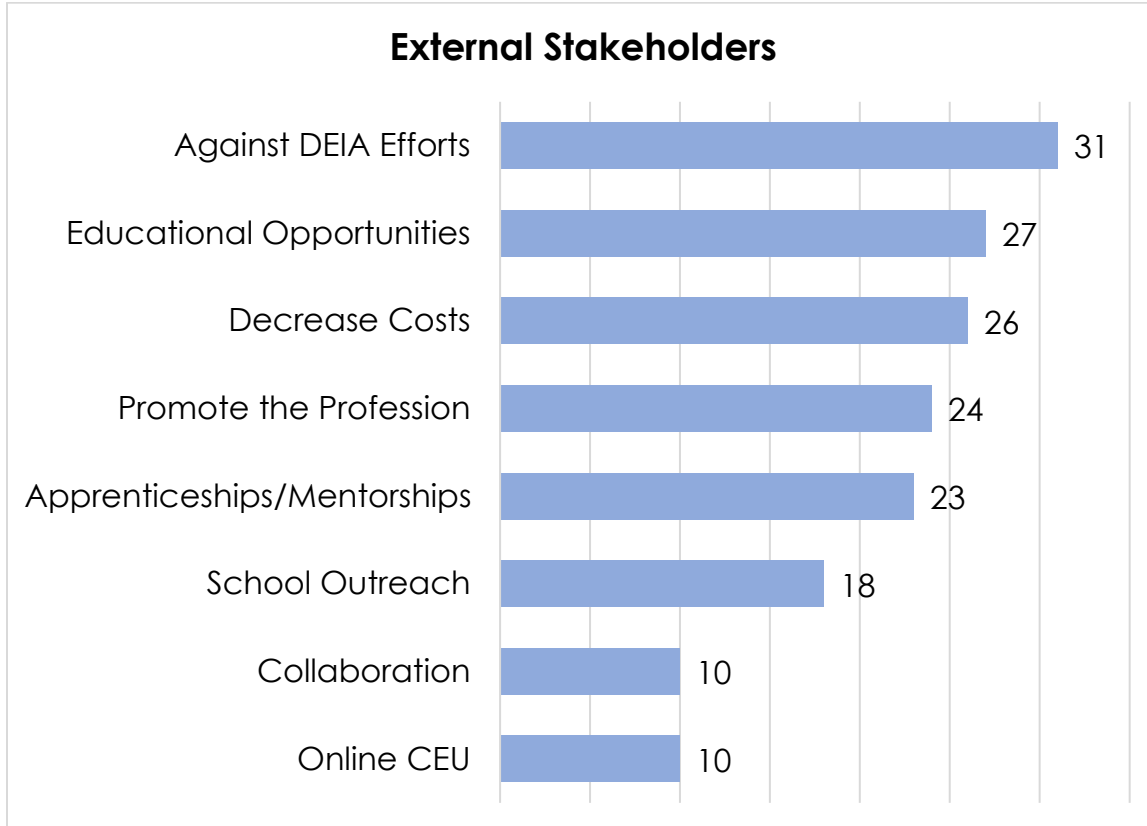
Survey question: What other actions should the Board take to further equal access to opportunities (e.g., entry into the profession, education/training opportunities, apprenticeships/ mentorships)?

Summary of Stakeholder Comments

1. Some external stakeholders feel strongly against DEIA efforts and are opposed to the Board taking any further actions to create equal access to opportunities. They believe that opportunities for entrance into the profession are already equally available to everyone.
2. External stakeholders say more educational opportunities, such as more quality respiratory care programs throughout the state, especially in rural areas, would help further equal access to the profession.
3. Internal stakeholders say reviewing demographic data would help the Board identify barriers and make better informed decisions.
4. Internal stakeholders agree that adopting more plain language in its applicant, CEU, and licensing requirements would help further equal access.
5. External stakeholders say decreasing costs of licensure, renewal, and CEUs would make the profession more accessible.
6. External and internal stakeholders agree more apprenticeship and mentorship opportunities through high schools would assist with equal access into the profession.

Stakeholder Comment Trends

The charts below list the top trends along with the corresponding number of comments for feedback provided by stakeholders.



Appendix A – Acronym List

Acronym	Definition
CEU	Continuing Education Units
CSRC	California Society for Respiratory Care
DEIA	Diversity, Equity, Inclusion, and Accessibility
HCAI	Department of Health Care Access and Information
NBRC	National Board for Respiratory Care
Q&A	Question and Answer
RCP	Respiratory Care Practitioners
RN	Registered Nurse
SOLID	Strategic Organizational Leadership and Individual Development

Appendix B – Data Collection Method

Data for this report was gathered by surveying stakeholder groups that are important to the success of the Board. Stakeholders include any individual or group who is influenced by or influences a program. Information for this survey was gathered by surveying external stakeholders and internal stakeholders using an online survey.

Classification of Stakeholder Relationship with the Respiratory Care Board:

Relationship with the Board	Number of Responses	Response Rate
Executive Officer and Management	2	100 %
Staff	11	85 %
Board Member	4	57 %
Preparing to Become a Licensee	0	1
Licensee	850	1
Retired Licensee	52	1
Related Occupation	3	1
Consumer	9	1
Government Agency	6	1
Professional Association/Group	23	1
Educational/School Association/ Group	10	1
Other ²	7	1

¹ A response rate cannot be determined for these external stakeholders because of the undetermined number having access to the survey link.

² Respondents listed in the "Other" category identified themselves as follows:

- Former licensee
- Manager
- N/A (2)
- Non-Active Licensee (2)
- Respiratory Therapist

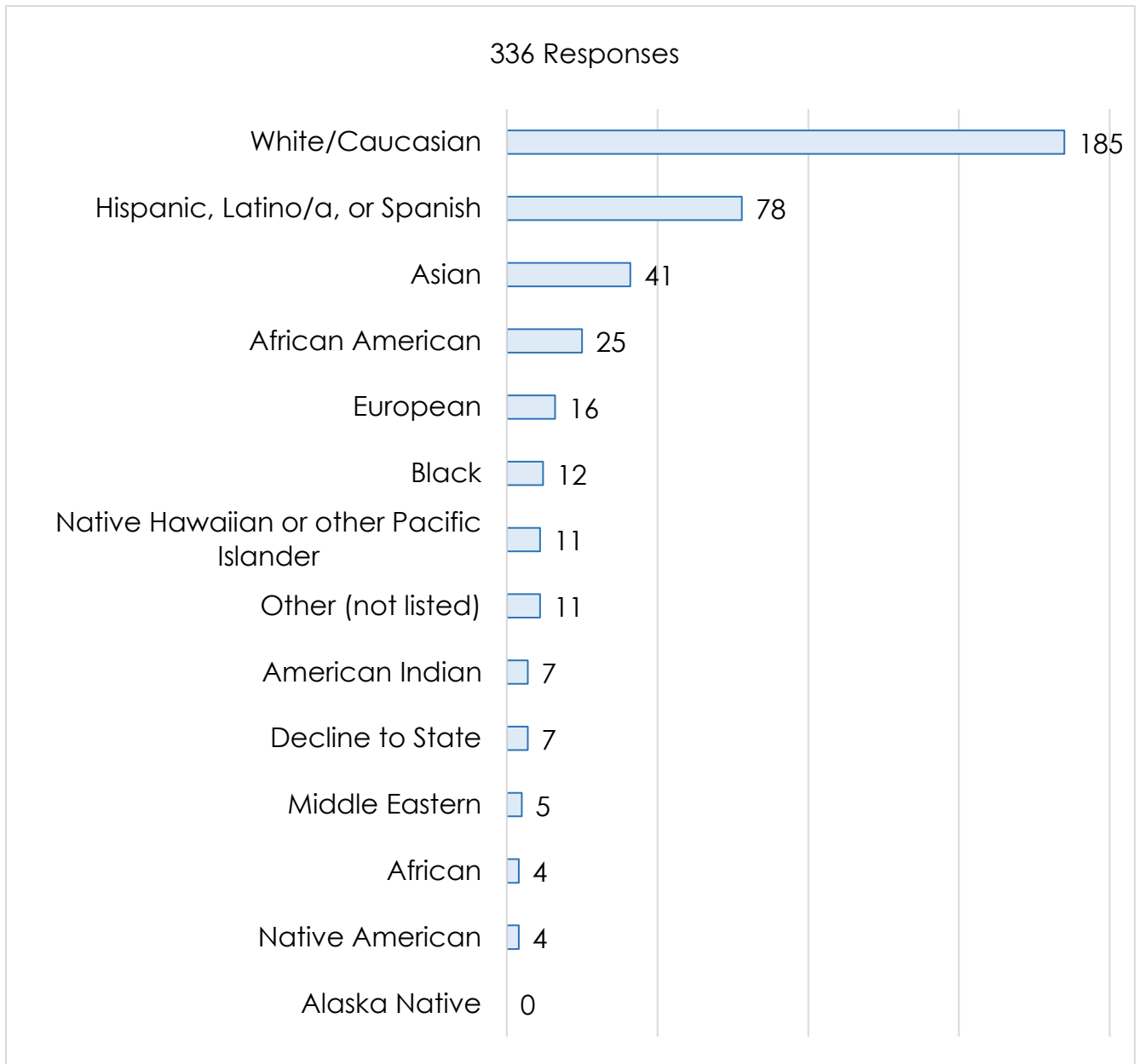
Appendix C – Demographic Data

Demographic questions were solicited from external stakeholders only.

Race

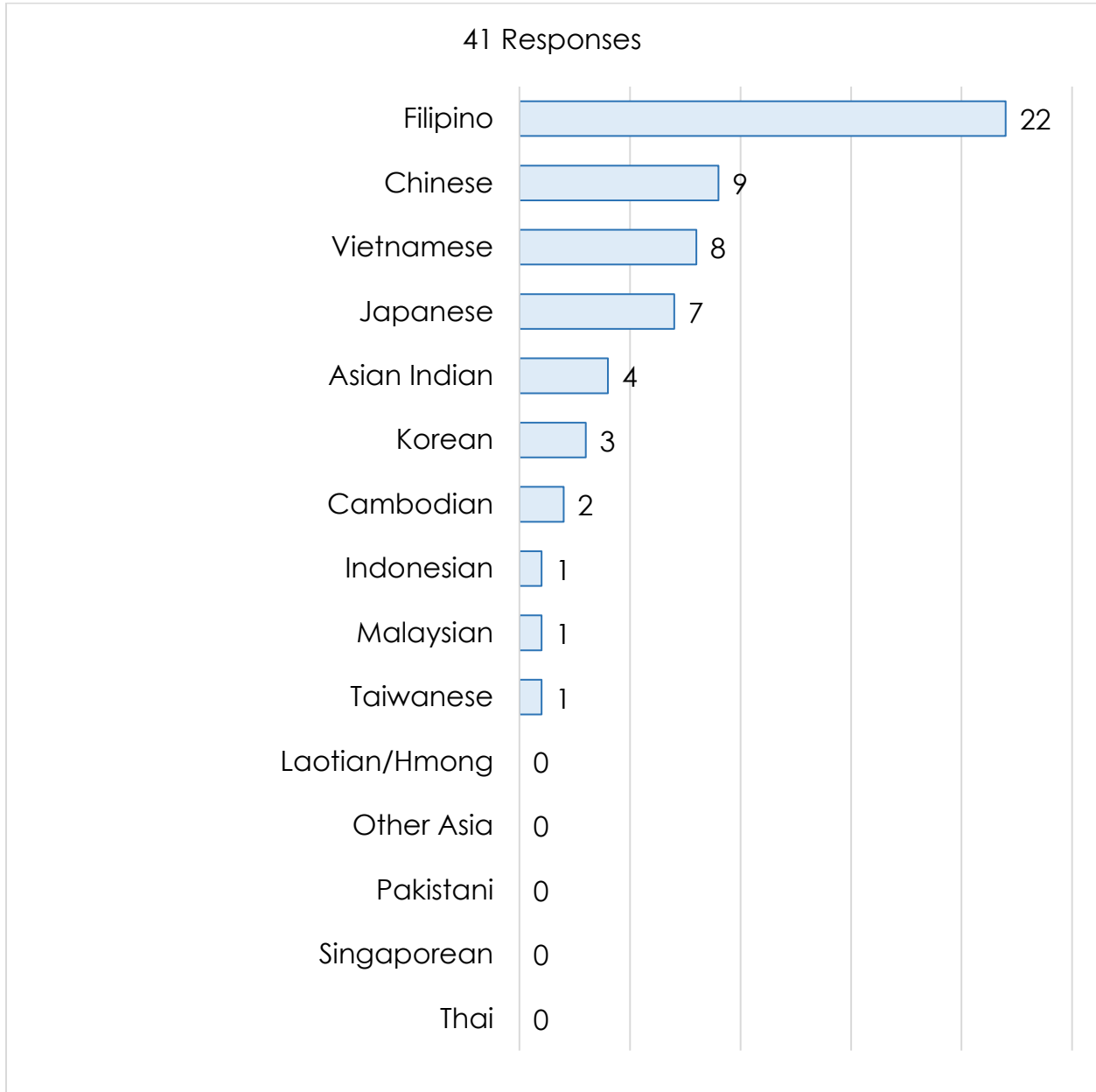
Races Stakeholders Identified With*

* Multiple options could be selected.



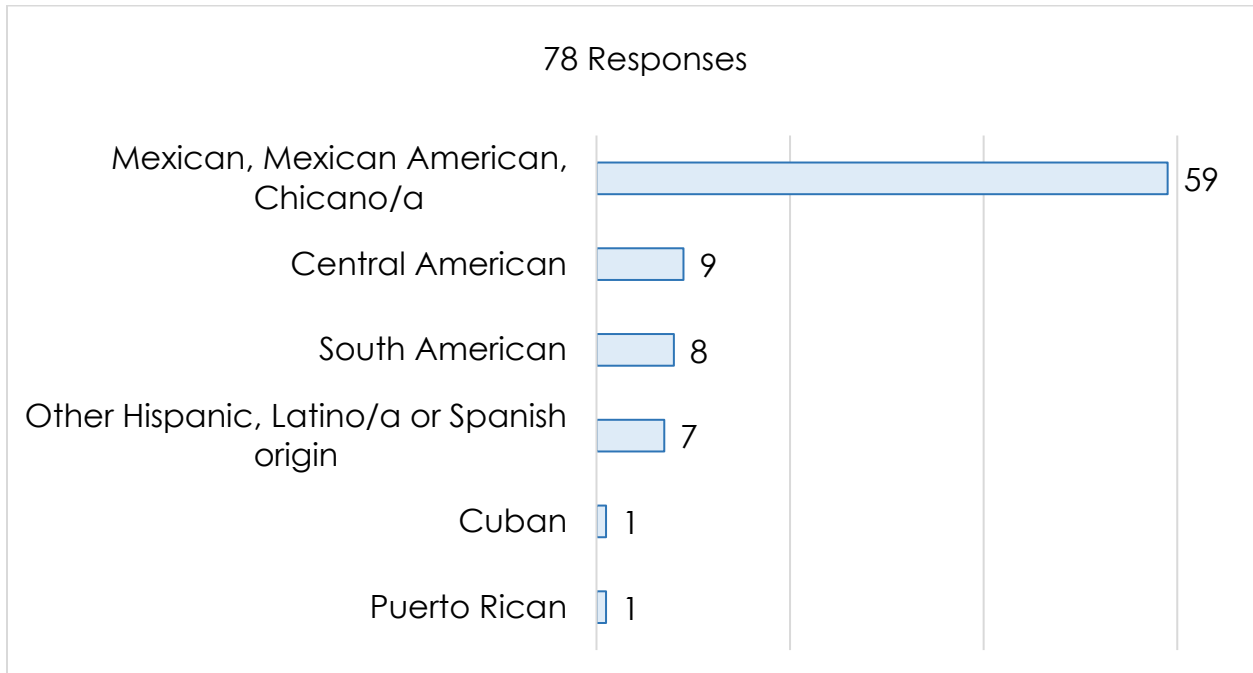
Asian Stakeholders Identified With*

* Multiple options could be selected.



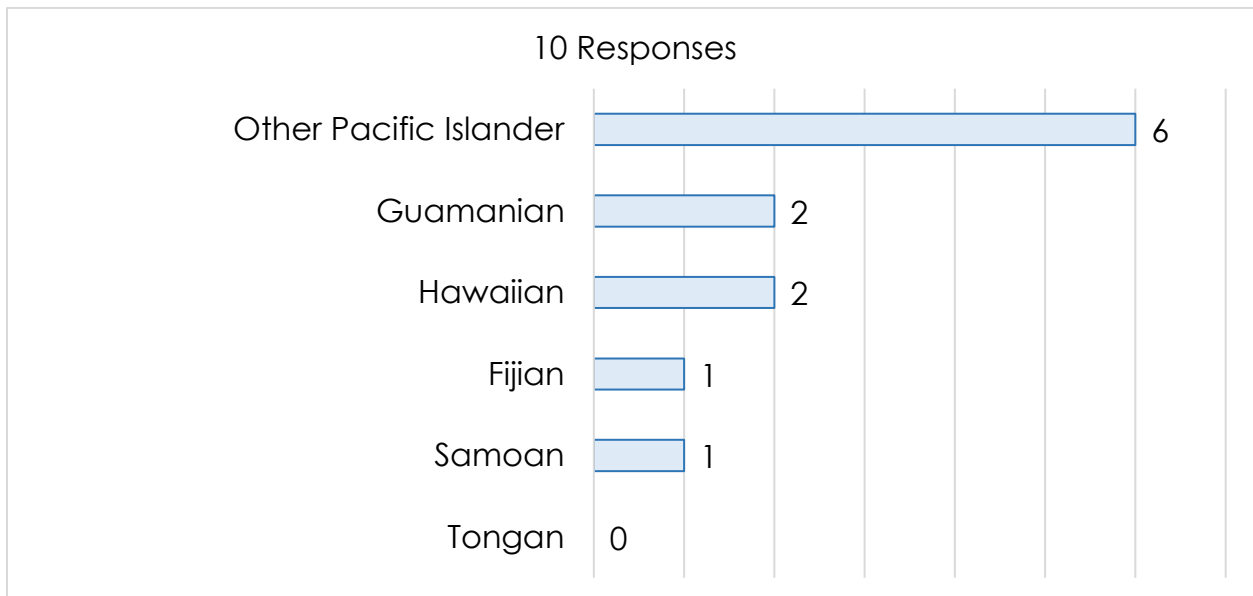
Hispanic, Latino/a, or Spanish Stakeholders Identified With*

* Multiple options could be selected.



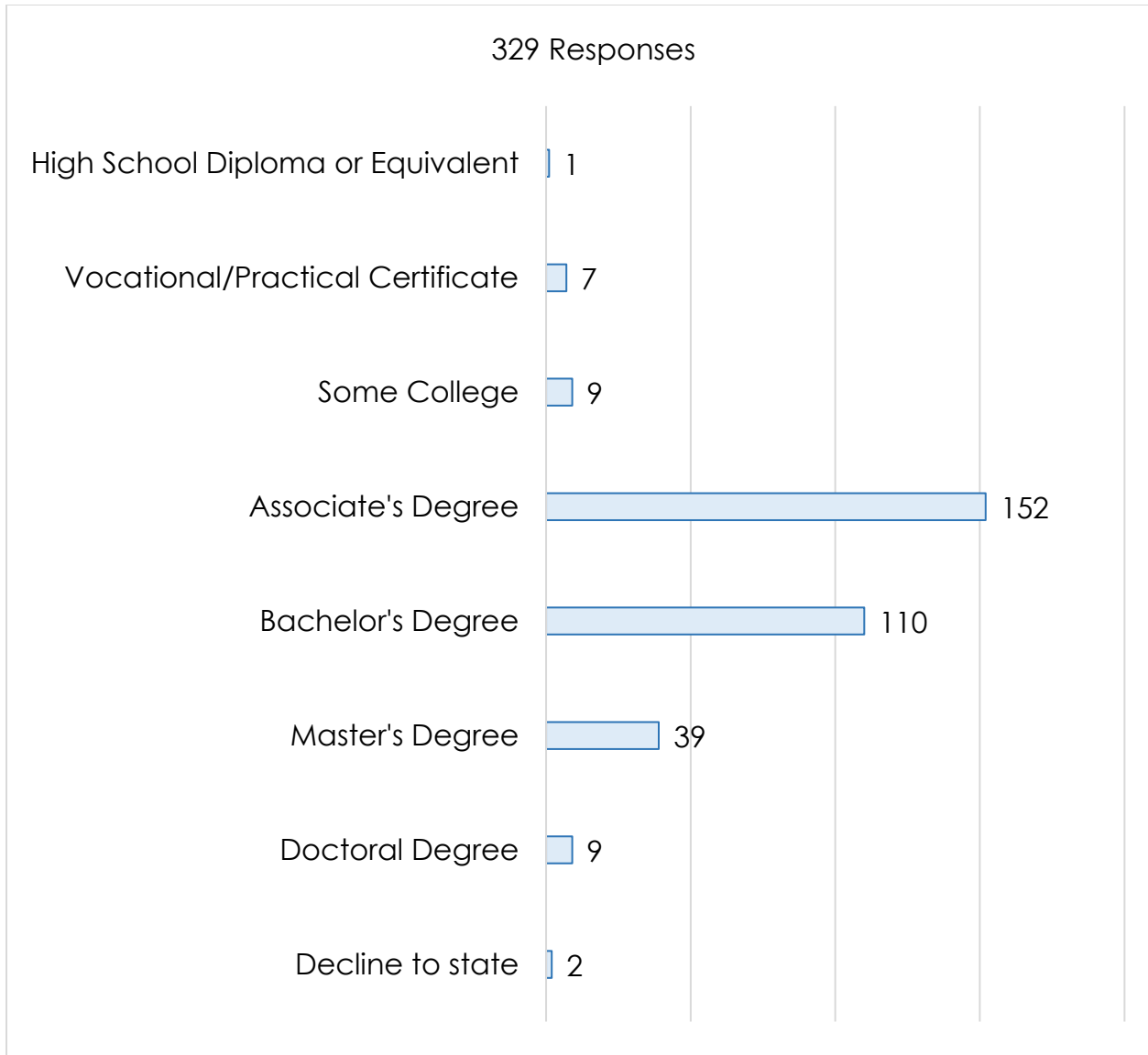
Native Hawaiian or Other Pacific Islander Stakeholders Identify With*

* Multiple options could be selected.



Education

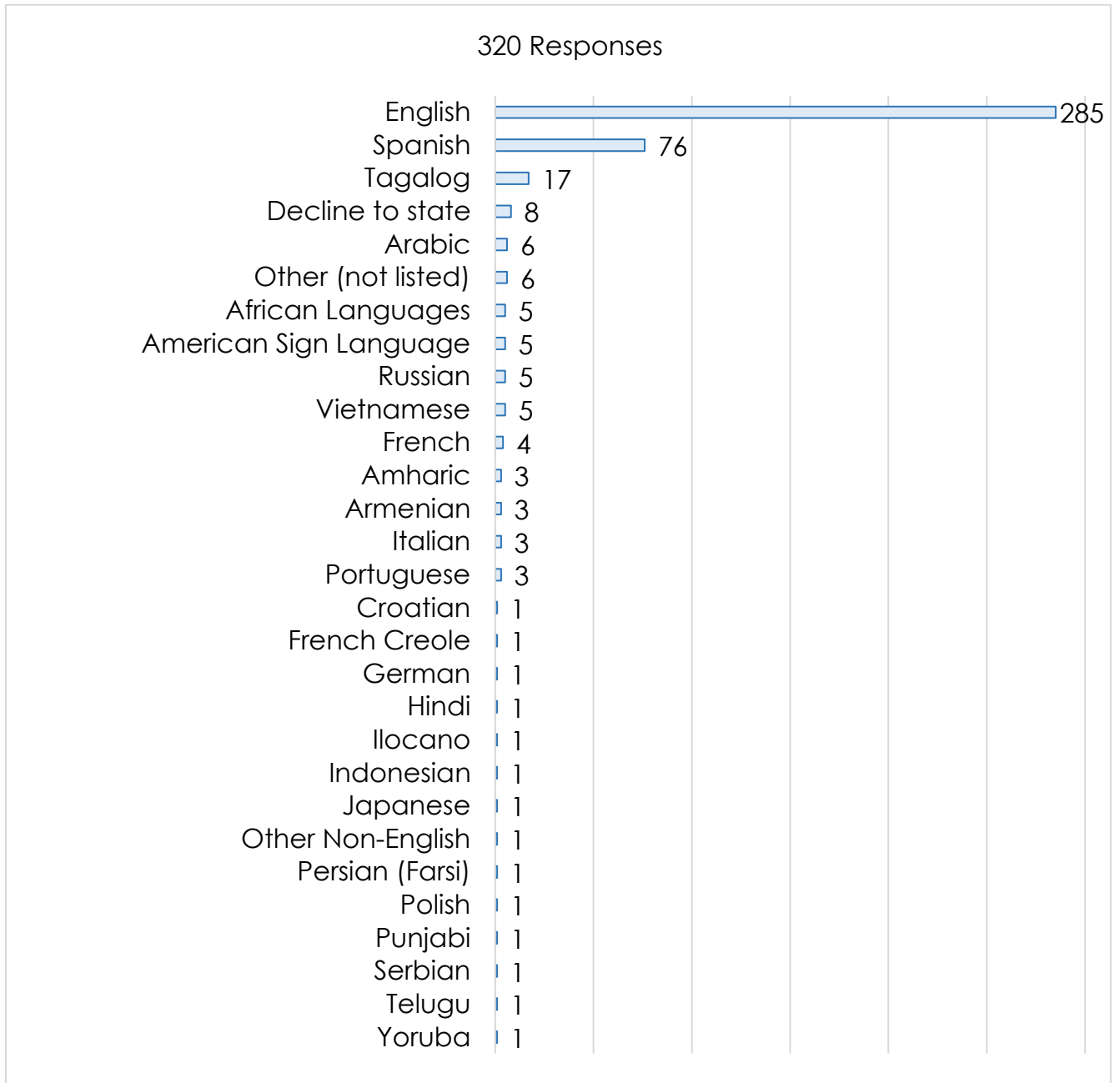
External Stakeholders' Highest Level of Education



Languages

Languages Stakeholders Speak Fluently*

- * A total of 58 options (listed on the next page) were provided, including “Decline to State.” Multiple options could be selected. Languages not selected are not shown.

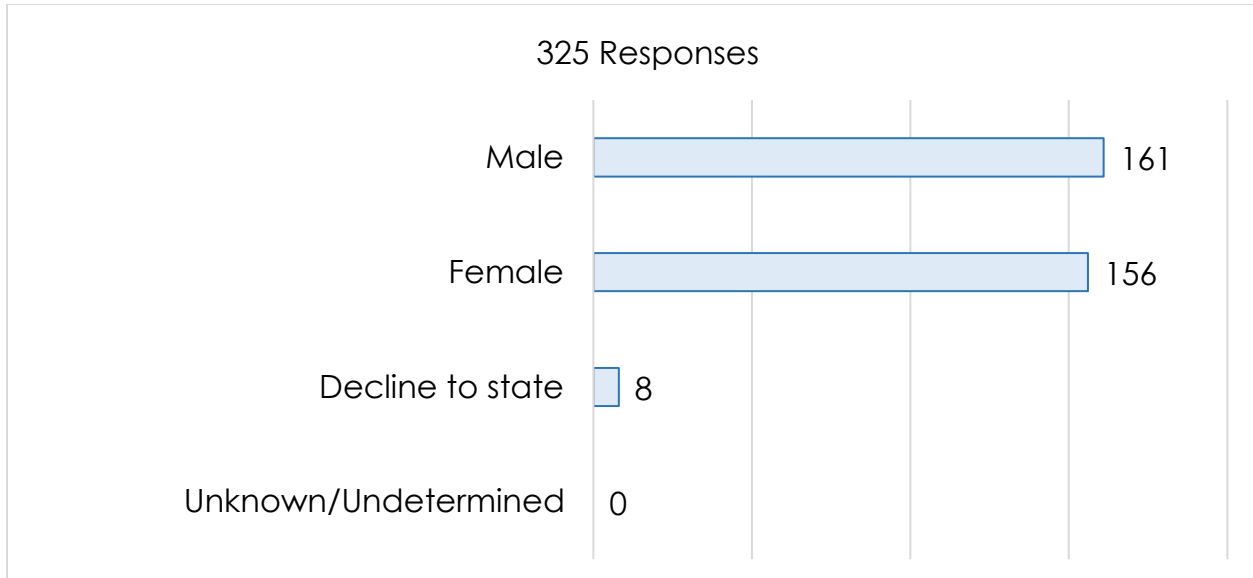


Language Options

- African Languages
- American Sign Language
- Amharic
- Arabic
- Armenian
- Cantonese
- English
- Fijian
- Formosan (Amis)
- French
- German
- Greek
- Gujarati
- Hebrew
- Hindi
- Hmong
- Hungarian
- Ilocano
- Indonesian
- Italian
- Japanese
- Korean
- Lao
- Mandarin
- Mien
- Mon-Khmer
- Navajo
- Persian (Farsi)
- Polish
- Portuguese
- Punjabi
- Russian
- Samoan
- Scandinavian Languages
- Serbian
- Spanish
- Swahili
- Tagalog
- Telugu
- Thai
- Tonga
- Turkish
- Ukrainian
- Urdu
- Vietnamese
- Xiang Chinese
- Yiddish
- Yoruba
- Other Chinese
- Other Non-English
- Other Sign Language
- Other (not listed)
- Decline to State

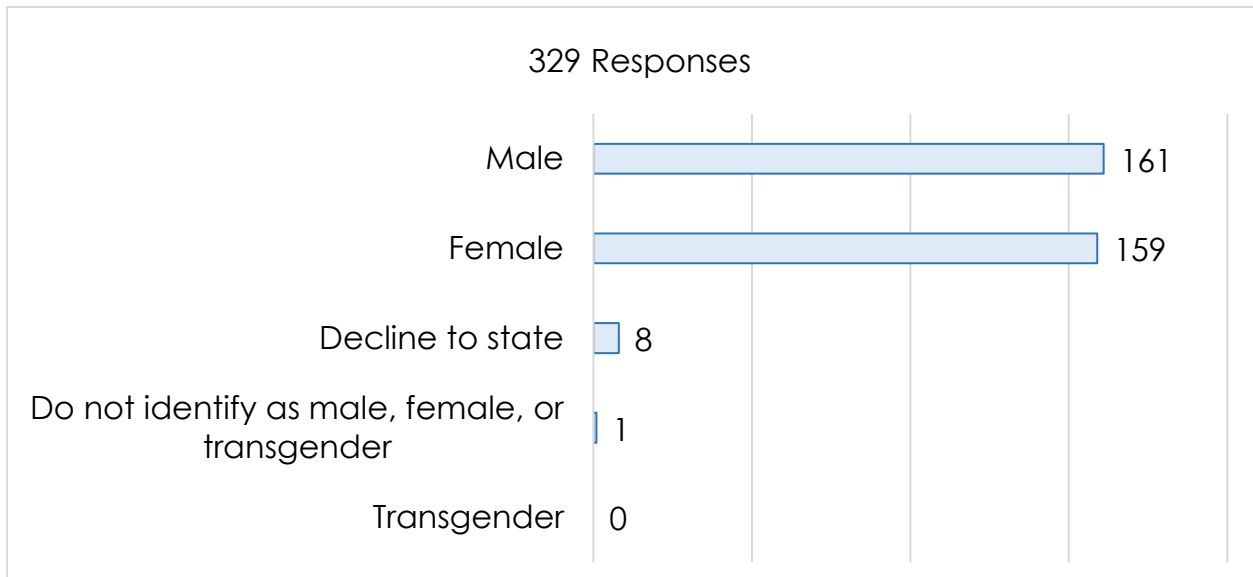
Birth sex

Stakeholders' Assigned Sex at Birth



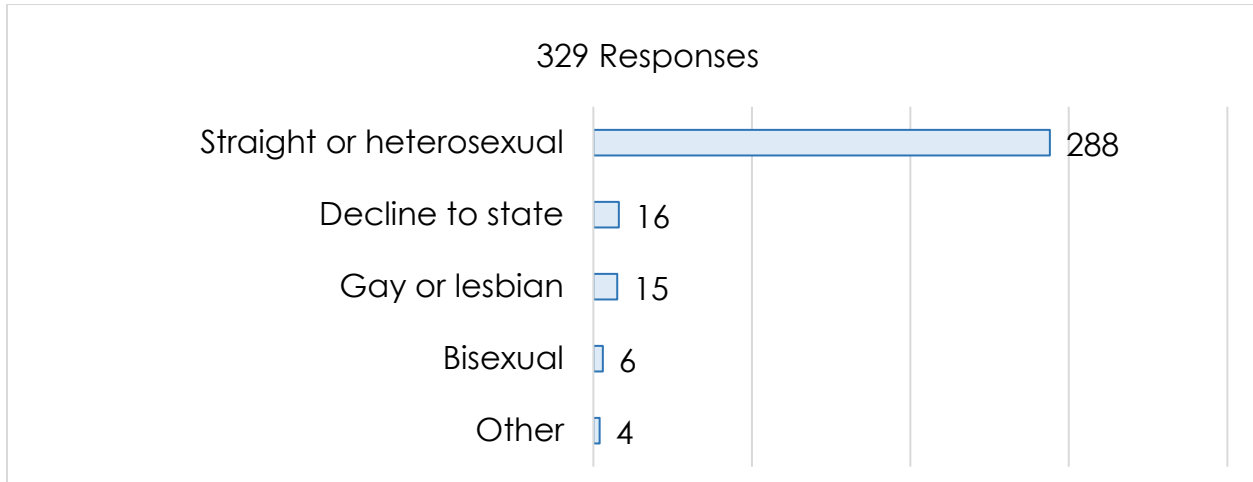
Current gender

How Stakeholders Describe Themselves



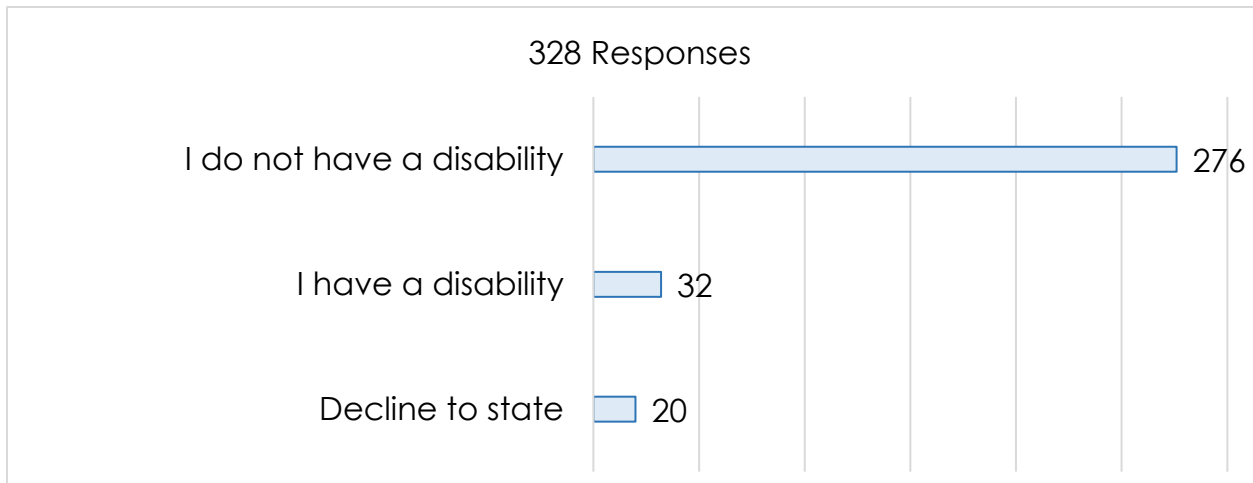
Orientation

Stakeholders' Orientation



Disability status

Stakeholders' Disability Status





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Contact us to learn more about how we can help your organization plan and achieve a successful future.

SOLID@dca.ca.gov