

Item:	Clinical Education
Item Summary:	Staff are presenting a proposal based on feedback received thus far to develop standards for clinical education thereby establishing a community benchmark so new therapists can go from one facility to another with the assurance of quality care for consumers no matter what institution they are in.
Board Action:	<ol> <li>President calls the agenda item and it is presented by or as directed by the President.</li> </ol>
	2. Item presented for review and discussion of alternatives to establish minimum standards for clinical education oversight as part of respiratory care education programs, and the next course of action.
Strategic Plan:	Goal 2, Objective 1: Develop an action plan to establish laws and regulations or accrediting standards for student clinical requirements to

Several options are available to implement clinical education standards. Resources to implement and maintain new standards and the method of enforcing standards should be taken into consideration. Below are several considerations:

1. Send an education letter to clinical directors at education programs (no enforcement).

increase consumer protection and improve education outcomes.

- 2. Send a letter to CoARC requesting the Board's standards be included in standards for approval (may affect program approval by CoARC, but could take years if CoARC agrees to include in standards).
- 3. Establish legislative and regulatory requirements in law that allow for inspection and administrative fines as a form of "reactive" enforcement in response to complaints.
- 4. Same as number three except seek additional staffing positions to actively inspect and audit clinical education programs.
- 5. Establish an Education Approval Program through legislation, seek additional staffing positions to establish and maintain program, and eliminate the requirement for CoARC approval. This would allow a clean path and authority for the board to withdraw program approval.

Board staff recommend pursuing considerations 1-3 above. The proposal presented on the following pages is believed to be the least intrusive and most cost efficient proposal to implementing clinical education standards.

References Attached: RRT clinical simulation exam matrix CoARC Accreditation Standards, Section 6 Clinical Component

## **PROPOSED LEGISLATIVE AMENDMENTS**

Amend section 3742 of the Business and Professions Code as follows:

- (a) During the period of any clinical training, <u>the education program's clinical director</u> <u>and/or instructor shall ensure each a</u> student respiratory care practitioner <del>shall be</del> <u>is</u> under the direct supervision of a <u>person</u> <u>qualified preceptor</u> holding a valid, current, and unrestricted license issued under this chapter. A <u>qualified preceptor shall have</u> <u>completed a course offered through the American Association for Respiratory Care</u> <u>or the California Society for Respiratory Care or through their employer or the</u> <u>respiratory education program's clinical education director who completed a training</u> <u>preceptor course by either of these two entities</u>. A <u>qualified preceptor shall meet</u> <u>additional requirements as provided in regulation</u>. "Under the direct supervision" means assigned to a respiratory care practitioner who is on duty and immediately available in the assigned patient care area.
- (b) Clinical educators shall ensure they meet with each student and his or her preceptor each week the student is in practice to determine which core requirements of clinical practice are met outside a lab, and which core requirements are deficient. Core requirements are outlined in the National Board for Respiratory Care's Registered Respiratory Therapist Clinical Simulation Examination Matrix, or subsequent required examination for licensure and may include additional requirements for advanced education programs.

(Amended by Stats. 2012, Ch. 799, Sec. 19. (SB 1575) Effective January 1, 2013.)

Add section 3743 to the Business and Professions Code as follows:

The board, or any licensed respiratory care practitioner, enforcement staff, or investigative unit appointed by the board, may inspect, or require reports from any program director, clinical director or instructor at any education facility teaching respiratory care with respect to its respiratory care education program including but not limited to its clinical education and may inspect and copy related education and student records. Those persons may also inspect and copy employment records relevant to an official investigation provided that the written request to inspect the records specifies the portion of the records to be inspected.

## **PROPOSED ADDITION OF REGULATORY SECTIONS**

<u>§ 1399.331. Preceptors.</u>

In addition to requirements provided in section 3742 of the B&P, preceptors shall:

- 1) Hold a current and valid Registered Respiratory Therapist credential issued by the National Board for Respiratory Care.
- 2) Have a minimum of five years experience practicing as a respiratory care practitioner.
- 3) Not have any prior or existing relationship with any student he or she precepts.

- § 1399.352.5. Preceptors Continuing Education.
- a) Any licensed RCP who meets the qualifications of a preceptor and who completes or teaches a preceptor course provided by the American Association for Respiratory Care, the California Society for Respiratory Care or through an employer or respiratory care education program may claim double the amount of CE hours provided, up to six hours every renewal cycle. This CE may be counted toward hours required for the leadership CE category and toward the number of live, real-time hours required if applicable.
- b) Preceptors responsible for direct supervision and instruction to students may claim the following CE earned during any one renewal cycle period:
- 1) <u>500</u> hours of preceptor supervision and instruction will be counted as 10 live hours of leadership CE
- 2) 800 hours of preceptor supervision and instruction will be counted as 15 live hours of leadership CE
- c) Preceptors claiming CE credit shall retain records that clearly indicate the student(s) supervised, the hours precepted on each date and written verification of all hours by the education program's clinical director for a period of four years.

§ 1399.381. Fines.

(a) Fines shall be assessed in accordance with the following schedule as provided for by law:

BUSINESS AND PROFESSIONS CODE	Maximum Fine
3717 Records from employer	\$10,000
3731 Title Used by licensee	\$5,000
3739 Practice during license process	\$5,000
<u>3742 (a) Preceptors</u>	\$5,000
<u>3742 (b) Clinical Education</u>	\$5,000
3743 Records from respiratory education programs	\$5,000
3750(a) Advertising	\$5,000
3750(b) Fraud in the procurement of any license	\$5,000
3750(c) Knowingly employing unlicensed persons	\$15,000
3750(d) Conviction of crime	\$5,000
3750(e) Impersonating an applicant in any examination	\$5,000
3750(f) Negligence	\$5,000
3750(g) Conviction of any violation of division 2	\$5,000
3750(h) Aiding/Abetting person to violate this chapter	\$5,000
3750(i) Aiding/abetting person to engage in unlawful practice	\$5,000
3750(j) Commission of fraudulent, dishonest or corrupt act	\$5,000
3750(k) Falsifying/ incorrect/ inconsistent entries in record	\$5,000
3750(I) Changing prescriptions/falsifying orders for treatment	\$5,000
3750(m) Discipline taken by another agency	\$5,000
3750(n) Knowing failure to protect patients - infection control	\$5,000

3750(o) Incompetence	\$5,000
3750(p) Pattern of substandard care	\$5,000
3750.5 Obtained/possessed/use of drugs	\$5,000
3750.6 Production of work permit/pocket license	\$5,000
3753.1 Probation monitoring costs	\$5,000
3753.5 Cost recovery	\$5,000
3754.5 Obtains license by fraud or misrepresentation	\$5,000
3755 Unprofessional conduct	\$5,000
3758 Employer report on suspension/termination	\$10,000
3758.5 RCP report on violation made by other RCP	\$5,000
3758.6 Employer report on supervisor	\$10,000
3760 Practice without a license/Misrepresentation	\$15,000
3761(a) Misrepresentation in claim of license to practice	\$15,000
3761(b) Knowingly employing an unlicensed person	\$15,000
3773(a)(1) License renewal - notice of conviction	\$5,000
3773(a)(2) License renewal - identify employer	\$5,000
3773(b) License renewal - additional information	\$5,000
REGULATIONS	
1399.304 Current address	\$5,000
1399.350 CE requirements	\$5,000
1399.350.5 Completion of ethics/professional law course	\$5,000
1399.331 Preceptors	\$5,000
1399.360 Unlicensed personnel/home care	\$15,000
1399.377 Records from employer	\$10,000
1399.378 Licensee reporting	\$5,000
1399.379 Employer reporting	\$10,000

(b) The methodology for assessing fine amounts shall be for each inspection or investigation made with respect to the violation, except as provided below:

(1) The assessment of fine amounts for a violation involving fraudulent billing submitted to an insurance company, the Medi-Cal program, or Medicare, shall be based on each violation or count.

(2) The assessment of fine amounts for a violation of section 3717 of the B&P or section 1399.377 of these regulations, shall be based upon each incident in which the employer fails to respond to a request to inspect or produce records as provided for in section 3717 of the B&P or section 1399.377 of these regulations.

(3) The assessment of fine amounts for a violation of section 3758, 3758.5 or 3758.6 of the B&P, or section 1399.378 or 1399.379 of these regulations, shall be based upon each person and/or each incident required to be reported to the board.

(4) The assessment of fine amounts for a violation of section 3750(c), 3760, 3761(a), or 3761(b) of the B&P or section 1399.360 of these regulations, shall be based upon each person who acts in the capacity of, or engages in the business of, or represents themselves as, a respiratory care practitioner, at each facility or location.

(c) Administrative fines collected pursuant to this section shall be deposited into the board's special fund.

Note: Authority cited: Sections 125.9 and 3722, Business and Professions Code. Reference: Sections 125.9, 3717, 3731, 3739, 3750, 3750.5, 3750.6, 3753.1, 3753.5, 3754.5, 3755, 3758, 3758.5, 3758.6, 3760, 3761, 3766, 3767 and 3773, Business and Professions Code.