

WSR 23-16-147

PROPOSED RULES

DEPARTMENT OF HEALTH

[Filed August 2, 2023, 10:29 a.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 22-23-005.

Title of Rule and Other Identifying Information: Health equity continuing education (CE) for respiratory care practitioners under chapter 246-928 WAC, Respiratory care practitioners.

The department of health (department) proposes amending WAC 246-928-442 and creating new WAC 246-928-445 to establish health equity CE requirements and implement ESSB 5229 (chapter 276, Laws of 2021). Additionally, the department proposes making additional amendments to update and clarify WAC 246-928-442.

Hearing Location(s): On September 13, 2023, at 12:30 p.m. The public hearing will be virtual, without a physical meeting space. Register in advance for this webinar https://us02web.zoom.us/webinar/register/WN_IKWoAdhRS-2R_1ETAHvsCw. After registering, you will receive a confirmation email containing information about joining the webinar.

Date of Intended Adoption: September 20, 2023.

Submit Written Comments to: Kathy Weed, Office of Health Professions, P.O. Box 47852, Olympia, WA 98504-7852, email <https://fortress.wa.gov/doh/policyreview>, kathy.weed@doh.wa.gov, by September 13, 2023.

Assistance for Persons with Disabilities: Contact Kathy Weed, phone 360-236-4883, TTY 711, email kathy.weed@doh.wa.gov, by August 31, 2023.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: RCW 43.70.613 (3)(b) directs the rule-making authority for each health profession licensed under Title 18 RCW that is subject to CE to adopt rules requiring a licensee to complete health equity CE training at least once every four years. The statute also directs the department to create model rules establishing the minimum standards for health equity CE programs. The department filed model rules for health equity CE minimum standards on November 23, 2022, under WSR 22-23-167. Any rules developed for the department must meet or exceed the minimum standards in the model rules in WAC 246-12-800 through 246-12-830.

The department is proposing to amend WAC 246-928-442 and create new WAC 246-928-445 to implement ESSB 5229. The department is proposing to adopt the health equity model rules, WAC 246-12-800 through 246-12-830, for respiratory care therapists to comply with RCW 43.70.613.

The proposed rule adds two hours of health equity education, as required in the model rules, to be completed as part of the current CE requirements every two years. The proposed rule does not change total CE hours but requires two hours in health equity CE every two years, which is absorbed into the existing number of CE hours required. The health equity CE requirement is counted under existing, unspecified CE requirements for the profession.

Additionally, the department is proposing amendments to clarify and streamline WAC 246-928-442. Updating language and creating clearly labeled subsections will create clear, understandable regulations for providers.

Reasons Supporting Proposal: The goal of health equity CE is to equip health care workers with the skills to recognize and reduce health inequities in their daily work. The content of health equity trainings includes implicit bias trainings to identify strategies to reduce bias during assessment and diagnosis in an effort to address structural factors, such as bias, racism, and poverty, that manifest as health inequities.

Two hours of training allows individuals to gain a foundation in health equity that can have an immediate positive impact on the professional's interaction with those receiving care. Health equity training enables health care professionals to care effectively for patients from diverse cultures, groups, and communities, varying race, ethnicity, gender identity, sexuality, religion, age, ability, socioeconomic status, and other categories of identity. The two hours of health equity CE credits may be earned as part of the health professional's existing CE requirements, therefore not requiring completion of additional CE hours.

Statutory Authority for Adoption: RCW 18.89.050, 18.89.140.

Statute Being Implemented: ESSB 5229 (chapter 276, Laws of 2021).

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: Department of health, governmental.

Name of Agency Personnel Responsible for Drafting, Implementation, and Enforcement: Kathy Weed, 111 Israel Road S.E., Tumwater, WA 98501, 360-236-4883.

A school district fiscal impact statement is not required under RCW 28A.305.135.

A cost-benefit analysis is required under RCW 34.05.328. A preliminary cost-benefit analysis may be obtained by contacting Kathy Weed, Office of Health Professions, P.O. Box 47852, Olympia, WA 98504-7852, phone 360-236-4883, TTY 711, email kathy.weed@doh.wa.gov.

This rule proposal, or portions of the proposal, is exempt from requirements of the Regulatory Fairness Act because the proposal:

Is exempt under RCW 19.85.025(4).

Explanation of exemptions: The proposed rules regulate professional licenses and do not affect businesses.

Scope of exemption for rule proposal:

Is fully exempt.

August 2, 2023
 Kristin Peterson, JD
 Chief of Policy
 for Umair A. Shah, MD, MPH
 Secretary

OTS-4756.1

AMENDATORY SECTION (Amending WSR 22-11-013, filed 5/9/22, effective 7/1/22)

WAC 246-928-442 Continuing education. To renew a respiratory care practitioner license, the licensee shall acquire 30 credit hours of ~~((continuing))~~ respiratory care continuing education every two

years as required in RCW 18.89.140. Licensees shall meet the continuing education requirements outlined in this section and report ~~((such))~~ completed continuing education as required in WAC 246-12-170 through 246-12-240.

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

(a) A minimum of 10 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) Beginning January 1, 2024, a respiratory care practitioner must complete two hours of health equity training each reporting cycle, as specified in WAC 246-928-445.

(c) The remaining ~~((20))~~ 18 hours of continuing education during each two-year reporting cycle may be in any of the following areas:

(i) Sponsored courses. Continuing education courses sponsored or approved by entities listed in subsection (2) of this section;

(ii) Certifications and examinations. Completing professional certifications or examinations listed in subsection (3) of this section;

(iii) Education and instruction. Completing or instructing coursework as described in subsection (4) of this section; and

(iv) Related studies. Completing up to 10 hours per reporting cycle of activities listed in subsection (5) of this section.

(2) Sponsored courses. ((Courses)) Eligible courses are sponsored or approved by the:

~~((A))~~ (a) American Academy of Pediatrics;

~~((B))~~ (b) American Academy of Physician Assistants;

~~((C))~~ (c) American Association of Critical Care Nurses;

~~((D))~~ (d) American Association ~~((of))~~ for Respiratory Care;

~~((E))~~ (e) American College of Chest Physicians;

~~((F))~~ (f) American College of Emergency Physicians;

~~((G))~~ (g) American College of Physicians;

~~((H))~~ (h) American Medical Association;

~~((I))~~ (i) American Nurses Association;

~~((J))~~ (j) American Osteopathic Association;

~~((K))~~ (k) American Thoracic Society;

~~((L))~~ (l) Society of Critical Care Medicine;

~~((M))~~ (m) Washington academy of physician assistants;

~~((N))~~ (n) Washington osteopathic medicine association;

~~((O))~~ (o) Washington state medical association;

~~((P))~~ (p) Washington state nurses association;

~~((Q))~~ (q) Extracorporeal life support organization; or

~~((R))~~ (r) American Society of Extracorporeal Technology.

~~((ii))~~ (3) Certifications ~~((and))~~ and examinations. The following certifications and examinations are valid for continuing education credit ~~((-))~~:

~~((A))~~ (a) Ten credit hours each may be claimed for the following initial or renewal certifications:

~~((I))~~ (i) Advanced cardiac life support (also known as ACLS);

~~((II))~~ (ii) Neonatal advanced life support (also known as NALS, or neonatal resuscitation program or NRP); and

~~((III))~~ (iii) Pediatric advanced life support (also known as PALS).

~~((B))~~ (b) Five credit hours may be claimed for initial or renewal certification in basic life support (also known as BLS).

~~((C))~~ (c) Ten credit hours each may be claimed for passing either of the following National Board of Respiratory Care (NBRC) advanced practitioner examinations:

~~((I))~~ (i) The NBRC therapist multiple-choice examination combined with the clinical simulation examination that awards NBRC registration; or

~~((II))~~ (ii) Registered pulmonary function technologist.

~~((D))~~ (d) Five credit hours each may be claimed for passing any of the following:

~~((I))~~ (i) The NBRC therapist multiple-choice examination that awards NBRC certification;

~~((II))~~ (ii) Any NBRC specialty examination;

~~((III))~~ (iii) The NBRC self-assessment competency examination with a minimum score of 75; or

~~((IV))~~ (iv) National Asthma Educator Certification Board certified asthma educator examination.

~~((iii) Educational settings.~~

~~((A) A licensee may claim))~~ (4) Education and instruction. A licensee may claim continuing education credit for:

(a) 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))~~ (i) Actual semester contact hours (such as 15 semester contact hours shall be equal to 15 continuing education credits); or

~~((II))~~ (ii) An academic credit formula that multiplies the academic credits by a factor of three (such as four academic credits shall be equal to 12 continuing education credits).

~~((B) A licensee may claim))~~ (b) Respiratory care educational offerings provided by hospitals or health organizations.

~~((C) A licensee may claim continuing education credit hours for))~~ (c) 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.

~~((e) No more than))~~ (5) Related studies. Up to 10 credit hours of continuing education during a two-year reporting cycle may be in any of the following areas:

~~((i))~~ (a) Self-study. Journal reading of publications related to respiratory care;

~~((ii))~~ (b) 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))~~ (c) 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))~~ (6) Documentation requirements. A licensee is responsible for acquiring and maintaining all acceptable documentation of their

continuing education activities, as required in WAC 246-12-170 through 246-12-240. Acceptable documentation must include transcripts, letters from course instructors, or certificates of completion or other formal certifications provided by hospitals, course instructors, and health organizations. 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.

[Statutory Authority: RCW 18.89.050 and 2021 c 114. WSR 22-11-013, § 246-928-442, filed 5/9/22, effective 7/1/22. Statutory Authority: RCW 18.89.050 and 19.89.140 [18.89.140]. WSR 15-24-095, § 246-928-442, filed 11/30/15, effective 12/31/15. Statutory Authority: RCW 18.89.050(1) and 18.89.140. WSR 01-21-136, § 246-928-442, filed 10/24/01, effective 11/24/01.]

NEW SECTION

WAC 246-928-445 Health equity training standards. (1) Beginning on January 1, 2024, a respiratory care practitioner must complete training in health equity as a part of their continuing education requirements. The respiratory care practitioner must complete at least two hours of health equity training every two-year renewal cycle. The training must meet the minimum standards under RCW 43.70.613 and comply with course requirements in WAC 246-12-800 through 246-12-830.

(2) Health equity continuing education counts toward the 30 total hours of continuing education required under WAC 246-928-442.

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