

*State of West Virginia
Board of Respiratory Care
106 Dee Drive, Suite 1
Charleston, WV 25311*

Phone: 304-558-1382

Facsimile: 304-558-1383

August 30, 2024

Re: Response to comments concerning proposed changes to 30-1-1 Rules

Dear sir or madam,

On July 31, 2024, the West Virginia Board of Respiratory Care "Board" published its proposed changes to 30-1-1 of its Rules. Those Rule changes are recited below with the proposed deletions stricken and the proposed additions underlined.

2.4. "Temporary Respiratory License" means obtaining a license in West Virginia for the practice of respiratory care which is valid for 12 months from the date of issuance.

~~3.1.6. The board may also issue a license to practice respiratory care by endorsement to respiratory therapists holding valid credentials conferred by the National Board of Respiratory Care, or its successor organizations, if the credentials have not been suspended or revoked. Applicants applying under this section shall be required to provide official verification of valid credentials directly from the National Board of Respiratory Care to this board.~~

3.3. The board may issue a Temporary Respiratory License valid for 12 months to individuals who completed a board approved respiratory care educational program on or after July 1, 2022 and hold a current valid Certified Respiratory Therapist credential conferred by the National Board of Respiratory Care or its successor organizations.

These proposed changes were properly filed for Public Comment Period with the WV Secretary of State on July 31, 2024. The deadline for public comments ended August 30, 2024, at 12:00 PM.

The Board received forty-six (46) responses to its proposed changes to 30-1-1 regarding the proposed change of CSR1 Criteria for Licensure which proposes to permit new graduates who have passed the Certified Respiratory Therapist (CRT) Examination administered by the National Board of Respiratory Care to practice as a Temporary Respiratory License for a period of twelve (12) months. Comments received expressed concerns related to safety, the scope of practice, the length of the temporary license, the ability for renewal, job vacancies, and National standards. Any changes the Board may consider will ensure the health and safety of the citizens of West Virginia.

The Board feels this change will provide CRT credentialed therapists the opportunity to work in the State of West Virginia for 12 months and obtain job experience in further preparation to take and pass the advanced Registered Respiratory Therapist (RRT) examination of which they have been

academically prepared to pass. The Board further believes this change will assist in retaining new graduate respiratory therapists for the workforce in West Virginia.

The West Virginia Board of Respiratory Care's priority is to protect the citizens of the State of West Virginia. We will continue to ensure the citizens of West Virginia are provided with access to the highest level of respiratory care available.

The Board thanks the commenters for their participation in the rule making process. The Board has taken each comment into careful consideration.

Regards,



Tracy S. Matthews, MA, RRT, LRTR
President
WV Board of Respiratory Care

Comments on new licensure

1 message

Michelle House <michellehouse9964@gmail.com>

Wed, Jul 31, 2024 at 4:27 PM

To: WVBORC@wv.gov

Hello!

My name is Michelle House— a class of 2023 Respiratory Therapist, who obtained my CRT and RRT in 2023 and immediately became licensed in WV. I currently work at WVU Ruby as an RRT, and am a full time RT student working toward my bachelors in Respiratory Care, class of 2025.

With the new rules for licensure— it allows you to work as a CRT for 12 months before needing to obtain your RRT credential. My comment being that I disagree that this rule should be changed, holding young graduate therapists accountable to go after their RRT credential right away is detrimental in my opinion, especially being a new grad RRT myself. Too often, therapists with only the CRT are getting positions and having no drive or ambition to further their education— a CRT who graduates from a 2 year facility— CANNOT go into a bridge program to obtain a bachelors degree without an RRT, a CRT cannot obtain any further credentials within the NBRC without first having an RRT.

This sets the standard that it is okay to do the bare minimum, and can potentially take a job away from someone who has worked to educate themselves and obtain more credentials. My second comment being that, it should be required for all CRTs licensed BEFORE July 2022— to also get their RRT within the next 2 years as a deadline. The standard in healthcare should always be to continue to expand your knowledge and continue the drive to educate yourself, for yourself and your patients.

In my opinion, this would be a disappointing change— for future therapists, hospitals, and patients.

Thank you for your time!

Michelle House, RRT.

Changes to RT license provisions

debbimyers@frontier.com <debbimyers@frontier.com>
To: WVBORC@wv.gov

Wed, Jul 31, 2024 at 4:19 PM

To whom it may concern,

I disagree the proposed changes. We have worked too long and too hard to obtain licensure and to assure the licensure means something. Given the current rate of broad exam passage, the change would open up the field to individuals who will never be able to meet NBRC standards. I know all to well that there are unfilled positions throughout the state, but, filling those with candidates who can not pass their broad exams is not the way to fill them. Institutions could very easily spend the resources required to orient someone new only to find them unable to remain working. Not a good idea!!!!

Sent from Yahoo Mail for iPhone

Public Comment on Proposed S30-1 Rule Change! - Disapproval

1 message

Wael Balaa <shipwreck36@yahoo.com>
Reply-To: shipwreck36@yahoo.com
To: amber.legg@wv.gov

Wed, Jul 31, 2024 at 3:41 PM

Hello,

This email is in response to your request for public comment on proposed S30-1 Rule Change:

As a respiratory therapist in WV, I ABSOLUTELY AND COMPLETELY DISAPPROVE of the new proposed changes, especially to section 3.1.4 under "Criteria for Licensure" 3.1.4. (Successfully passing an examination administered by the state or by a national agency approved by the board. The board shall set the passing score for the examination.)

I believe that respiratory therapists who are ALREADY obtaining continuing education credits and who are ALREADY licensed from the NBRC must not be forced or subject to RE-passing some examination by the state. Their current credentials should be more than enough.

Thank you.

Wael Balaa, Respiratory Therapist.

Re: [EXTERNAL] Request for Public Comments on Proposed §30-1 Rule Change

1 message

Jim Perrine <Jim.Perrine@chhi.org>
To: "Board of Respiratory Care, WV" <wvborc@wv.gov>

Wed, Jul 31, 2024 at 4:28 PM

I support this change.
Thank you for sharing.

Jim Perrine MHA, RRT
Outpatient Pulmonary Service Supervisor
Cabell Huntington Hospital
1340 Hat Creek Blvd.
Huntington, WV 25703
Phone: 304.526.2539



From: Board of Respiratory Care, WV <wvborc@wv.gov>
Sent: Wednesday, July 31, 2024 3:04 PM
To: Amber Legg <amber.legg@wv.gov>
Subject: [EXTERNAL] Request for Public Comments on Proposed §30-1 Rule Change

Dear Licensee,

The West Virginia Board of Respiratory Care seeks your comments on the proposed changes to §30-1: Criteria for Licensure. The deadline to submit a public comment is August 30, 2024, by 12 PM.

Attached, you will find the proposed rule changes. New language is underlined, and language to be removed is indicated with a strike-through.

You can submit your comments using any of the following methods:

- Mail: WV Board of Respiratory Care – 106 Dee Drive, Suite 1, Charleston, WV 25311
- Email: Amber.Legg@wv.gov or WVBORC@WV.GOV

Thank you for your time and input.

Best regards,

Amber Shawver
Amber Shawver
West Virginia Board of Respiratory Care
106 Dee Drive, Suite 1
Charleston, WV 25311
(304) 558-1382
Home Page: (wvborc.com)

This email contains UNCLASSIFIED AND CONFIDENTIAL INFORMATION intended for the individual named above. If you are not the intended recipient, or the agent responsible for delivering it to an intended recipient, you are notified that disclosing or copying of this email is prohibited. If you received this email in error, please immediately notify us at amber.legg@wv.gov

WVBORC Comments on Licensure

1 message

Jordan Landis <jordan.lee.landis@gmail.com>

Thu, Aug 1, 2024 at 8:51 AM

To: Amber.Legg@wv.gov

Good morning,

I received the email about the updated terms of licensure. Personally I feel that WV should keep the RRT credential requirement for new graduates and licensees. As a new employee who just graduated and passed both boards, I feel it has made me a better RRT and I tried my hardest to pass both and it made me more knowledgeable and proficient in my career. I feel I am able to apply more things to the workforce knowing I have obtained my RRT credential. I understand it is difficult to pass but it helps people to work towards bettering themselves and not stopping just because they achieved the minimum required. I feel that an extension should be allowed, for instance a year after graduation to pass the RRT exam from a CRT, but I feel the RRT should still remain a requirement.

Thank you!

Jordan Landis, RRT

878-295-1128

jordan.lee.landis@gmail.com

Response to the licensure changes

1 message

Foringer, Brad <brad.foringer@wvmedicine.org>
To: "Amber.Legg@wv.gov" <Amber.Legg@wv.gov>

Thu, Aug 1, 2024 at 8:48 AM

Good morning

Here are my thoughts regarding the changes:

As a leader of respiratory care within the state, I promote and encourage the advancement of our profession and was and still in complete agreement with the changes that were made in 2022, requiring the RRT as a minimal license.

With the current conversations and concerns that have been raised, I do understand the challenges that we all are facing with staffing. The major focus needs to be on growing more programs throughout the state and the support to do so. But with the current climate and concerns, I am in favor, if this is a compromise, and the temporary license is needed to maintain our licensure and maintain the board of respiratory care.

Thanks,
Brad

Brad Foringer, RRT, CPFT
Administrative Director
Respiratory Care/Pulmonary Sys.
Morgantown, WV 26506-8066
Phone: 304-598-4106
Phone: 724-350-9769 (mobile)
WVU Medicine email: brad.foringer@wvmedicine.org

Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

Re: Request for Public Comments on Proposed §30-1 Rule Change

1 message

Eric Danley <danleye1216@gmail.com>

Thu, Aug 1, 2024 at 8:42 AM

To: "Board of Respiratory Care, WV" <wvborc@wv.gov>

I feel that this would be a big step in the wrong direction for our profession. This is only going to be a temporary fix and not one for the bigger picture/issue. We need more schools that promote and produce high grade RTs to keep the profession held to a higher standard. By doing this, it will be lowering our standards as a state. We are already the highest in worst health and COPD. This is why we need RTs with the highest education and certification to be taking care of our states patients. I'm sure that when it came to a loved one needing heart surgery , they would not want a non specialized doctor doing it instead of a thoracic surgery specialist.

Thank you,
-Eric Danley

Sent from iPhone

On Jul 31, 2024, at 3:07 PM, Board of Respiratory Care, WV <wvborc@wv.gov> wrote:

Dear Licensees,

The West Virginia Board of Respiratory Care seeks your comments on the proposed changes to §30-1: Criteria for Licensure. The deadline to submit a public comment is **August 30, 2024, by 12 PM**.

Attached, you will find the proposed rule changes. New language is underlined, and language to be removed is indicated with a strike-through.

You can submit your comments using any of the following methods:

- Mail: WV Board of Respiratory Care – 106 Dee Drive, Suite 1, Charleston, WV 25311
- Email: Amber.Legg@wv.gov or WVBORC@WV.GOV

Thank you for your time and input.

Best regards,

Amber Shawver

Amber Shawver

West Virginia Board of Respiratory Care

106 Dee Drive, Suite 1

Charleston, WV 25311

(304) 558-1382

Home Page (wvborc.com)

This email contains PRIVILEGED AND CONFIDENTIAL INFORMATION intended for the individual named above. If you are not the intended recipient, or the agent responsible for delivering it to the intended recipient, you are notified that dissemination or copying of this email is prohibited. If you received this email in error, please immediately notify us at amber.legg@wv.gov

**30csr1 Criteria for Licensure 7.31.24.docx**

28K

Re: Request for Public Comments on Proposed §30-1 Rule Change

1 message

Greg Shepherd <gshephrt@yahoo.com>
To: "Board of Respiratory Care, WV" <wvborc@wv.gov>

Thu, Aug 1, 2024 at 8:14 AM

To whom it may concern,
I do not support a change in the rule for CRT, I feel it diminishes the value and quality of care that our patients and providers expect and deserve.

Greg Shepherd RT-ACCS

Sent from my iPhone

On Jul 31, 2024, at 3:05 PM, Board of Respiratory Care, WV <wvborc@wv.gov> wrote:

Dear Licensee,

The West Virginia Board of Respiratory Care seeks your comments on the proposed changes to §30-1: Criteria for Licensure. The deadline to submit a public comment is **August 30, 2024, by 12 PM**.

Attached, you will find the proposed rule changes. New language is underlined, and language to be removed is indicated with a strike-through.

You can submit your comments using any of the following methods:

- Mail: WV Board of Respiratory Care -- 106 Dee Drive, Suite 1, Charleston, WV 25311
- Email: Amber.Legg@wv.gov or WVBORC@WV.GOV

Thank you for your time and input.

Best regards,

Amber Shawver

Amber Shawver
West Virginia Board of Respiratory Care
106 Dee Drive, Suite 1
Charleston, WV 25311
(304) 558-1382
Home Page (wvborc.com)

This email contains UNCLASSIFIED AND CONFIDENTIAL INFORMATION intended for one individual named above. If you are not the intended recipient, or the agent responsible for delivering it to the intended recipient, you are notified that dissemination or copying of this email is prohibited. If you received this email in error, please immediately notify us at amber.legg@wv.gov
<30csr1 Criteria for Licensure 7.31.24.docx>

Title 30 Rule Change

1 message

Julie mckinney <jamlrt@hotmail.com>
To: "WVBORC@wv.gov" <WVBORC@wv.gov>

Thu, Aug 1, 2024 at 12:15 AM

To Whom it May Concern

I am writing in support of the changes to the criteria for licensure, for title 30 legislative rule change for the Board of Respiratory Care.

Thank you,

Julie Mckinney RRT, RRT-ACCS

New Temporary License

Christopher P Trotter <trotter4@marshall.edu>
To: "WVBORC@WV.GOV" <WVBORC@wv.gov>

Wed, Jul 31, 2024 at 10:10 PM

I am entirely opposed to this change.

I have several issues with the following! They will be listed below!

3.3. The board may issue a Temporary Respiratory License valid for 12 months to individuals who completed a board approved respiratory care educational program on or after July 1, 2022 and hold a current valid Certified Respiratory Therapist credential conferred by the National Board of Respiratory Care or its successor organizations.

1- In the definitions section of the State of West Virginia Board of Respiratory Care 2024 Laws and Regulations on page 3 states - "Board" means the West Virginia Board for respiratory care. With that understanding, what does "completed a board approved respiratory care educational program" mean? The WVBORC needs to make public its criteria /process it uses to grant approval. The WBORC maybe could provide a list of the educational programs it approves – a list of nationwide educational programs. That statement needs to be removed. The board may want to say CoARC accredited programs. Furthermore, it should say a fully accredited (not on probation, not provisional accreditation) fully unencumbered accreditation.

2- Remove the requirement that the graduate obtain the CRT credential. CoARC recognizes that the CRT credential's time has passed—CoARC did eliminate the 100 level programs after it was determined that the needs of the patients are greater than the competencies attained in the 100 level (CRTT programs). Make this a one-year temporary license post-graduation. Eliminate the reference to CRT.

3- It needs to be clearly stated that these temporary licenses are one and done. There is no renewal, one year (12 months) one time only.

4- As these temporary license holders have not been able to demonstrate what WV has set as minimum competence, the RRT, there needs to be limited scope. These individuals must have a precise scope of practice. These temporary licenses must not be turned loose on the vulnerable patients.

5- The date is a real consideration. Suppose someone has not ever worked because they graduated in May 2022. Unfortunately, they were unable to achieve their CRT until August 2022. They have a credential; however, they have not done any respiratory care for two years. Realize, graduates of May 2022 that obtained a license in 2022 are having to report continuing education this year (2024). With the intention of the WBORC to protect the patient this does not seem safe. Does an individual that has not touched a piece of respiratory care equipment in two years need to obtain a temporary license? Keep in mind the professionals that have been working with patients, for the past two years, are having to report continuing education, to maintain license. This seems off to me....

Now then, I firmly expect this proposed law change not to satisfy WVHA

Therefore, the WVBORC must use this time to create a clear delineation between RRT and CRT competencies. There needs to be clear delineation in roles between CRT and RRT (There are clear delineations between LPN and RN). The CRT credential was based on education and competencies for the 100 level programs. Again, CoARC did a market survey. These surveys determined that the 100 level programs did not meet the needs of the patients. The WVBORC must be proactive, creating a clear delineation between CRT and RRT to protect WV patients.

I want to be perfectly clear; I am in complete disagreement with this action/ law change/ rule change. Back tracking on this RRT rule places the citizens in WV at jeopardy. There is a clear reason that CoARC stopped 100 level program (CRTT programs) they were not meeting the needs of the patients. It is shame that the NBRC did not eliminate the CRT credential when CoARC eliminated the 100 level programs. The WVHA that are promoting this is putting profit before patient care, West Virginia patients deserve better.

CHRIS TROTTER

Proposed §30-1 Rule Change

1 message

Boyce, Mamie <mboyce3@wvmedicine.org>
To: "amber.legg@wv.gov" <amber.legg@wv.gov>

Wed, Jul 31, 2024 at 8:58 PM

To Whom It May Concern:

I am responding to the Proposed §30-1 Rule Change.

These proposed changes have the potential to improve the respiratory job vacancies that our state and profession are currently experiencing and potentially retain local program students in our state to provide care in West Virginia.

A few things I would like to propose to be included are the following:

- The temporary license should expire at the one-year mark of being granted.
- The temporary license scope of practice needs defined.

Thank you for your time and consideration.

*/Mamie Boyce, MHA, RRT, RRT-NPS
Secretary, West Virginia Society For Respiratory Care (WVSR)*
Senior Systems Analyst – Inpatient Clinical Documentation
WVU Medicine
PO Box 8114
Information Technology Center
Morgantown, WV 26505-8114
304-598-4000 Ext. 152583
mboyce3@wvmedicine.org

Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

Proposed Changes to §30-1: Criteria for Licensure

1 message

Brian Ringler <brianrnt@gmail.com>
To: "WVBORC@wv.gov" <WVBORC@wv.gov>

Wed, Jul 31, 2024 at 8:57 PM

I have been a Licensed Registered Respiratory Therapist in West Virginia for 25 years. I have been a board member of the West Virginia Society for Respiratory Care for many of those years and I am currently the manager of Respiratory Care at the WVU Medicine Children's Hospital. I have been involved with our American Association of Respiratory Care and have a strong understanding of the respiratory profession and how important the Respiratory Therapist is to the health and wellness to West Virginia citizens.

I am writing to inform you that I am vehemently opposed to any changes to the WV Respiratory Care license and any proposed changes to §30-1: Criteria for Licensure. The WVBORC has made necessary changes to assure that the patients of WV receive the best respiratory care possible by licensing only RTs that capable of passing our highest credentialing exam, the RRT. Several other states have made this change as well and more states have begun to make the move to recognizing the RRT credential only.

You will hear that these proposed changes will aid in filling open RT positions throughout our state. I have not seen any legitimate data that supports this idea. There are very few unemployed CRTs that cannot find work in WV. These CRTs are unable to pass our standard RT exam and therefore are not able to provide the safest, highest level of care for our patients.

I feel it would be a professional national embarrassment to see our state roll back our license or permit any temporary licensing of CRTs.

Please feel free to contact me if you would like to further discuss these concerns.

Sincerely,
Brian Ringler, RRT-NPS
304.290.7726

Re: Request for Public Comments on Proposed §30-1 Rule Change

1 message

Chris McCormick <chrismac41@gmail.com>
To: "Board of Respiratory Care, WV" <wvborc@wv.gov>
Cc: Amber Legg <amber.legg@wv.gov>

Wed, Jul 31, 2024 at 8:23 PM

Amber and WVBORC,
I am supportive of allowing a 1 year temporary license.

Some additional language that I feel should be included:

- The temporary license expires 1 year from the time the license is granted
- Mentioning if it is renewable or not. I do not think temporary license renewal should be allowed.
- Who this affects- I think it should backdate to January 1, 2022 for those graduates and forward.
- Scope of practice for the temporary license holder needs defined

Thank you for the opportunity to comment on this!
-Chris McCormick, RRT

On Wed, Jul 31, 2024 at 3:07 PM Board of Respiratory Care, WV <wvborc@wv.gov> wrote:
Dear Licensee,

The West Virginia Board of Respiratory Care seeks your comments on the proposed changes to §30-1: Criteria for Licensure. The deadline to submit a public comment is **August 30, 2024, by 12 PM.**

Attached, you will find the proposed rule changes. New language is underlined, and language to be removed is indicated with a strike-through.

You can submit your comments using any of the following methods:

- Mail: WV Board of Respiratory Care – 106 Dee Drive, Suite 1, Charleston, WV 25311
- Email: Amber.Legg@wv.gov or WVBORC@WV.GOV

Thank you for your time and input.

Best regards,

Amber Shawver

Amber Shawver
West Virginia Board of Respiratory Care
106 Dee Drive, Suite 1
Charleston, WV 25311
(304) 558-1382
Home Page (wvborc.com)

This email contains PRIVILEGED AND CONFIDENTIAL INFORMATION intended for the individual named above. If you are not the intended recipient, or the agent responsible for delivering it to the intended recipient, you are notified that dissemination or copying of this email is prohibited. If you received this email in error, please immediately notify us at amber.legg@wv.gov

—
Chris McCormick
304-280-0647

Re: Thank You for Attending - WVBORC Board Meeting on July 11, 2024

1 message

Dean, Hillary <hillary.dean@wvmedicine.org>
 To: "Legg, Amber" <amber.legg@wv.gov>

Wed, Jul 31, 2024 at 8:13 PM

I support this.
 Thanks,
 Hillary

/ Hillary Dean, RRT, BSRC
 Outpatient Pulmonary Services Clinical Coordinator
 WVU Medicine
 Thomas Hospitals
 4605 MacCorkle Avenue, SW
 South Charleston, WV 25309
 304-414-2971
hillary.dean@wvmedicine.org

From: Legg, Amber <amber.legg@wv.gov>

Sent: Tuesday, July 30, 2024 4:14 PM

To: WV Board of Respiratory Care <wvborc@wv.gov>; Amber Legg <Amber.Legg@wv.gov>

Cc: Nancy J Massey <nancy.j.massey@wv.gov>; Johnson, Gary <gary.johnson@wvmedicine.org>; hgunter@pmhwv.org <hgunter@pmhwv.org>; Katerry179@comcast.net <Katerry179@comcast.net>; mchibeknr17@gmail.com <mchibeknr17@gmail.com>; Brandib50@yahoo.com <Brandib50@yahoo.com>; Ringler, Brian <brian.ringler@wvmedicins.org>; Barbara Folden <barbarafold@aol.com>; Jack, Holly <holly.jack@wvmedicins.org>; JPhillips@graftonhospital.com <JPhillips@graftonhospital.com>; gregory.shepherd@vandaliahealth.org <gregory.shepherd@vandaliahealth.org>; cmhnm69@gmail.com <cmhnm69@gmail.com>; Foringer, Brad <brad.foringer@wvmedicine.org>; stephanie.daniel@southernwv.edu <stephanie.daniel@southernwv.edu>; DONNA M WALLS <dmwalls@mail.kana.k12.wv.us>; Keith.Terry@st-marys.org <Keith.Terry@st-marys.org>; christopher.trotter@vandaliahealth.org <christopher.trotter@vandaliahealth.org>; Tracy Matthews <Tracy.Matthews@camc.org>; penningtont@davishealthsystem.org <penningtont@davishealthsystem.org>; Vaughan, Charles <charlie.vaughan@wvmedicine.org>; Henderson, Christopher D. RRT <christopher.henderson@st-marys.org>; Richard E Street <richard.e.street@wv.gov>; Duncan Cindy <Cindy.Duncan@ipnt.net>; laura.tate@camc.org <laura.tate@camc.org>; Mikakie@aol.com <Mikakie@aol.com>; annodominiae@gmail.com <annodominiae@gmail.com>; amduncan1973@gmail.com <amduncan1973@gmail.com>; Chuck.Zuhars@st-marys.org <Chuck.Zuhars@st-marys.org>; adam.purdy@vandaliahealth.org <adam.purdy@vandaliahealth.org>; Zorick, Richard <zorickr@wvmedicine.org>; Ihle, Rayan E. MD <Rayan.Ihle@vandaliahealth.org>; mark.james@vandaliahealth.org <mark.james@vandaliahealth.org>; heather.clayborne@va.gov <heather.clayborne@va.gov>; wcarte@bmi.org <wcarte@bmi.org>; caleb.adams@vandaliahealth.org <caleb.adams@vandaliahealth.org>; serenacasto@icloud.com <serenacasto@icloud.com>; ashl@monhealthsys.org <ashl@monhealthsys.org>; Dean, Hillary <hillary.dean@wvmedicine.org>; White, Becky <rebecca.white6@wvmedicine.org>; kevin.curnutte@vandaliahealth.org <kevin.curnutte@vandaliahealth.org>; Neff, Julie <julie.neff@wvmedicine.org>; Nichols, Diane <DIANE.NICHOLS@wvmedicins.org>; julie.davis@ipnt.net <julie.davis@ipnt.net>; dickensdean@hotmail.com <dickensdean@hotmail.com>; Vest, Rodney <rodney.vest@wvmedicine.org>; Rodgers, Eric <eric.rodgers@wvmedicine.org>; Alt, Shawn <shawn.ali@wvmedicine.org>; Mehall, Michael <michael.mehall@hsc.wvu.edu>; mthomas3@valleyhealthlink.com <mthomas3@valleyhealthlink.com>; Hornbeck, Peter <peter.hornbeck@wvmedicine.org>; Aufdenkampe, Susan <susan.aufdenkampe@wvmedicins.org>; Fillman, David <david.fillman@wvmedicins.org>; CHendersonRT@gmail.com

Request for Public Comments on Proposed §30-1 Rule Change

1 message

Cindy Keely <cynthia.keely@gmail.com>

Wed, Jul 31, 2024 at 8:04 PM

To: WVBORC@wv.gov

Cc: Cindy Keely <cynthia.keely@gmail.com>

WVBORC Board,

I write in favor of the proposed change to the current RT license law.

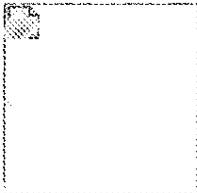
However, can any clarifying language be made in regard to the following:

1. as it does not say if the temporary permit can be renewed or not
2. it doesn't list the scope of practice or limitations for the temporary permit holder if any
3. It doesn't take into account the students who may have graduated in May 2022 who failed to get their CRT license prior to the June 30, 2022, deadline to be added to this temporary license option. I'm not sure if any graduates at the time failed to do so, but wanted to ensure they also have the opportunity for gaining a license if only passing the Low Cut Score on the NBRC exam - if there are maybe it should go back to January 1, 2022, to include those graduates as well.

I appreciate your time and dedication to protecting the public and the rights of licensed RTs in WV.

Sincerely,
Cindy

—
 Cynthia A. Keely, BA, RRT, LRTR
 Senior Delegate, West Virginia Society For Respiratory Care (WVSRC)
 Advisory Chair, RT Program, Carver Career Center
 email: cynthia.keely@gmail.com
 website: www.wvsrc.org
Follow us on Facebook: <https://www.facebook.com/groups/WVSRC>



Re: Request for Public Comments on Proposed §30-1 Rule Change

1 message

Ashlee Higgins <ashleemhiggins2011@yahoo.com>
To: "Board of Respiratory Care, WV" <wvborc@wv.gov>
Cc: Amber Legg <amber.legg@wv.gov>

Thu, Aug 1, 2024 at 8:59 AM

Hello,

My name is Ashlee Schneider, and I have been licensed in the state of WV for 10 years. I have reviewed the attached document and do have comments. I currently am working at WVU Medicine as a clinical educator/specialist. I do not think that changed should be made to revert to allowing CRTs to practice within the state of West Virginia. I understand why this change may be enticing to some due to the restraints many of us are experiencing with staffing shortages. However, I believe allowing individuals to practice under a CRT license for a year would only provide a temporary fix as the number of pass rates are not high at this time. As a clinical specialist, I spend time with new hires and brand-new respiratory therapist. The caliber of students and the number of students that are graduating every year is a bigger issue that should be investigated and improved.

Since COVID, the respiratory profession has gained more recognition and respect for the job that we all choose to do every day. I believe that by maintaining our current law that West Virginia is an RRT only state will only enhance our profession. I believe that holding our respiratory therapist to a higher standard will only continue to enhance our profession and enhance the quality of care we are providing to the residents of West Virginia.

Thank you,

Ashlee Schneider, RRT

Sent from my iPhone

On Jul 31, 2024, at 15:08, Board of Respiratory Care, WV <wvborc@wv.gov> wrote:

Dear Licensee,

The West Virginia Board of Respiratory Care seeks your comments on the proposed changes to §30-1: Criteria for Licensure. The deadline to submit a public comment is **August 30, 2024, by 12 PM**.

Attached, you will find the proposed rule changes. New language is underlined, and language to be removed is indicated with a strike-through.

You can submit your comments using any of the following methods:

- Mail: WV Board of Respiratory Care -- 108 Dee Drive, Suite 1, Charleston, WV 25311
- Email: Amber.Legg@wv.gov or WVBORC@WV.GOV

Thank you for your time and input.

Request for Public Comments on Proposed §30-1 Rule Change

1 message

Purdy, Adam B. <adam.purdy@vandaliahealth.org>
To: "WVBORC@WV.GOV" <WVBORC@wv.gov>

Thu, Aug 1, 2024 at 8:54 AM

Hello,

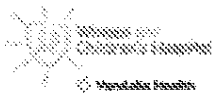
I want our profession to move forward and set a higher standard to achieve RRT requirement. The school programs are designed to educate and train students to achieve RRT, they should not be satisfied to lower their standards and decrease potential of our future employees. We know that West Virginia ranks last or near to last nationally in education, and we should push to elevate students to accomplish a higher level of tuition.

Nevertheless, I am not opposed to a temporary license. I would like to see more regulation with attaining a 1 yr. CRT Temporary License. There should be more language added to proposal to hold the temporary license holder more accountable to their standing.

- A 1 yr CRT Temporary License Holder must submit proof (examples listed) at the 6 month mark to the WVBORC:
 - Attending NBRC Kettering Seminar
 - Attempt of test completion
 - Supervisor/Manager/Director signoff of X amount of study hours
 - Action Plan to attain RRT
 - etc..

If Temporary License Holders are not motivated to achieve RRT at 1 year mark, the hospitals are placed into another difficult position and those employees might seek work outside the state.

(E-mail associated with WVBORC is adambpurdy@gmail.com) (it was more convenient to respond with my work e-mail)



Adam Purdy, RRT-NPS
Respiratory Care Manager



adam.purdy@vandaliahealth.org



304-388-2354

500 Pennsylvania Ave., Charleston, WV 25302

csmc.org vandaliahealth.org

CONFIDENTIALITY NOTICE: The information contained in this message may be privileged, confidential and / or proprietary and should be handled accordingly. If this message contains protected health information, any dissemination, distribution or copying is strictly prohibited, except as permitted by law. If you have received this communication in error, please promptly notify the sender and delete it and all attachments from your computer. Thank you.

Re: Request for Public Comments on Proposed §30-1 Rule Change

1 message

Jamie Schnopp <jdallas1980@hotmail.com>

Thu, Aug 1, 2024 at 9:05 AM

To: "Board of Respiratory Care, WV" <wvborc@wv.gov>, Amber Legg <amber.legg@wv.gov>

Please find attached file in response to the board. Thank you.

Jamie Schnopp, RRT

Get Outlook for Android

From: Board of Respiratory Care, WV <wvborc@wv.gov>
Sent: Wednesday, July 31, 2024 3:06:38 PM
To: Amber Legg <amber.legg@wv.gov>
Subject: Request for Public Comments on Proposed §30-1 Rule Change

Dear Licensee,

The West Virginia Board of Respiratory Care seeks your comments on the proposed changes to §30-1: Criteria for Licensure. The deadline to submit a public comment is **August 30, 2024, by 12 PM.**

Attached, you will find the proposed rule changes. New language is underlined, and language to be removed is indicated with a strike-through.

You can submit your comments using any of the following methods:

- Mail: WV Board of Respiratory Care – 106 Dee Drive, Suite 1, Charleston, WV 25311
- Email: Amber.Legg@wv.gov or WVBORC@WV.GOV

Thank you for your time and input.

Best regards,

Amber Shawver

Amber Shawver

West Virginia Board of Respiratory Care


106 Dee Drive, Suite 1

Charleston, WV 25311

(304) 558-1382

Home Page (wvborc.com)

This e-mail contains PRIVILEGED AND CONFIDENTIAL INFORMATION intended for the individual named above. If you are not the intended recipient, or the agent responsible for delivering it to the intended recipient, you are notified that dissemination or copying of this e-mail is prohibited. If you received this e-mail in error, please immediately notify us at amber.legg@wv.gov

 **WV Board Response.docx**
15K

August 1, 2024

To Whom It May Concern,

Good morning. I was writing as a current licensee holder in the state of WV regarding the proposed changes to Criteria for Licensure. As a professional, I have many concerns. The West Virginia Board of Respiratory Care holds each licensee to a standard. We need to support the profession by producing high quality therapists. West Virginia needs more schools. Standards need to be elevated. As a citizen, I want the best, most knowledgeable personnel taking care of me and my loved ones. Respiratory care has grown immensely over the years and the technology available needs a higher understanding. Therapists not only need to understand disease processes and physiological functions, but also equipment to make beneficial changes to a patient's health and not adversely affect them. This all comes from proper education. As a licensee, I want to continue to see the profession flourish, not take a step back. We need to keep people accountable.

As an educator and someone who onboards employees, I see firsthand the caliber of personnel. I had an employee who started and shared her story with me. She was an immigrant who obtained US citizenship. English was her second language. She was a non-traditional student who went through the program during the COVID pandemic. Once graduating, she attempted to take her boards. It took her multiple times to pass. I believe she said 1 year. She understood what she needed to make happen to get licensed. She made it happen and is now a practicing RRT. The moral of this story is that we can still hold people to a high standard, and they will make it happen.

WV has a high obesity, heart disease and COPD prevalence. As healthcare providers, we owe it to our population to be able to deliver the best quality care available.

While allowing therapists to obtain a temporary certified license, it is a temporary fix. We need to focus on education and elevating potential therapist to a higher level.

Thank you for your time.

Jamie Schnopp, RRT

Re: Request for Public Comments on Proposed §30-1 Rule Change

1 message

Jacy Wilhelm <jacywilhelm@hotmail.com>

Thu, Aug 1, 2024 at 8:51 AM

To: "Board of Respiratory Care, WV" <wvborc@wv.gov>, Amber Legg <amber.legg@wv.gov>

To whom it may concern,

I agree with the changes that are being looked at to be adjusted with the licensure. I feel this would help benefit those who are CRT credential to become RRT in timely manner as well applying their skills through the first year as working as a CRT.

Thank you,
Jacy Wilhelm

Get Outlook for iOS

From: Board of Respiratory Care, WV <wvborc@wv.gov>
Sent: Wednesday, July 31, 2024 3:06:38 PM
To: Amber Legg <amber.legg@wv.gov>
Subject: Request for Public Comments on Proposed §30-1 Rule Change

Dear Licensee,

The West Virginia Board of Respiratory Care seeks your comments on the proposed changes to §30-1: Criteria for Licensure. The deadline to submit a public comment is **August 30, 2024, by 12 PM**.

Attached, you will find the proposed rule changes. New language is underlined, and language to be removed is indicated with a strike-through.

You can submit your comments using any of the following methods:

- Mail: WV Board of Respiratory Care – 106 Dee Drive, Suite 1, Charleston, WV 25311
- Email: Amber.Legg@wv.gov or WVBORC@WV.GOV

Thank you for your time and input.

Best regards,

Amber Shawver

Amber Shawver

West Virginia Board of Respiratory Care

106 Dee Drive, Suite 1

Charleston, WV 25311

(304) 558-1382

Home Page (wvborc.com)

This email contains PRIVILEGED AND CONFIDENTIAL INFORMATION intended for the individual named above. If you are not the intended recipient, or the agent responsible for delivering it to the intended recipient, you are notified that dissemination or copying of this email is prohibited. If you received this email in error, please immediately notify us at amber.legg@wv.gov

Proposed change

1 message

Duncan Cindy <Cindy.Duncan@lpnt.net>

Thu, Aug 1, 2024 at 9:51 AM

To: "wvborc@wv.gov" <wvborc@wv.gov>

I approve the proposal for the temporary license. I think it gives everyone a extra chance so they don't just give up on their degree, or move out of state where they can work.

The information transmitted via this e-mail is intended only for the person or entity to which it is addressed and may contain confidential and/or proprietary information. Any use, review, retransmission, dissemination or other use of, or pursuing of any action in reliance upon this information by persons or entities other than the intended recipient is strictly prohibited. If you are the recipient of this e-mail transmission in error, please reply to the sender and delete the material from any computer. Thank you.

Changes to §30-1

1 message

James Navaretta <jcpaugh001@gmail.com>
To: "amber.legg@wv.gov" <amber.legg@wv.gov>

Thu, Aug 1, 2024 at 9:46 AM

I personally disagree with the proposed changes to 30-1 because I believe requiring your RRT should be the minimum. I believe RTs should go the extra mile to ensure they have the highest credential in order to work as an RT in WV. Our state is among the top in citizens with COPD and/or sleep apnea, and I believe WV needs to have the highest credentialed therapists to educate and care for such patients.

Thank you,
James Paugh-Navaretta

Proposed change

Jeanie Bower <jbower32@hotmail.com>
To: "WVBORC@wv.gov" <WVBORC@wv.gov>

Thu, Aug 1, 2024 at 9:50 AM

I approve the proposal for the temporary license!

My comments & concerns for the new board law

1 message

Nina Lagrotteria <ninalagrotteria@gmail.com>

Thu, Aug 1, 2024 at 10:02 AM

To: Amber.Legg@wv.gov

Hello,

As a fellow RRT at the WVU Ruby Memorial Hospital, I believe having a board of respiratory backing us is very important. I understand WV became a full RRT state, but I do think it was a good and bad choice during that time period. Yes, we are short staffed and most new grads were not able to pass their SIMS, but at least they passed their TMC. We could've had a few more hires during that time period and not have been so short staffed if we were able to hire CRTs. I believe having your CRT for at least a year as a full time hire would be beneficial, but once that year is up they need to get their RRT. During that year those CRT hires have at most one year of learning and growing in order to pass their test.

If we are to take away our necessary learning capabilities, I do not believe that patients will get the care that they need. Patients will end up suffering if we stop our full education. School should be at least 2 years, if not 4 years. There should be boards test no-matter what, just to make sure we are hiring competent people.

If anything, we as RRTs should be doing more for the respiratory standard's practice and helping our fellow CRT's, not less! Respiratory is an important rule inside and outside of the hospital. For our practice and board of respiratory to be taken away and changed is a shame and shows that respiratory gets put on the back burner.

Thank you,
Nina Lagrotteria BSM, RRT

Comments on new Licensure

1 message

Amber Keffer <kefferamber@outlook.com>
To: "Amber.Legg@wv.gov" <Amber.Legg@wv.gov>

Thu, Aug 1, 2024 at 10:03 AM

Amber,

I just wanted to reach out and comment on the new licensure - I think that we need to continue to encourage thoughts of being a RRT state.

I think we need to continue to have CRTs working while achieving their RRT. Think of it as on the job training. They'll be able to work while practicing as a CRT and continue to study and test for RRT. We need to encourage RRT for all therapists in the state- We need to advance our education to keep up with the rapidly growing technology and medicines. The RRT requirement I believe is allowing our practice to be more respected in this state.

Please consider these thoughts when discussing this licensure at the next meeting.

Thanks,
Amber K

Sent from my iPhone

RE: Request for Public Comments on Proposed §30-1 Rule Change

1 message

Zorick, Richard <richard.zorick@wvumedicine.org>
To: "Amber.Legg@wv.gov" <Amber.Legg@wv.gov>

Thu, Aug 1, 2024 at 9:57 AM

Amber,

Please see my attached response. Thanks

Rich Zorick, RRT, LRTR

Director Respiratory Therapy/Sleep Center



UNITED HOSPITAL CENTER

327 Medical Park Dr

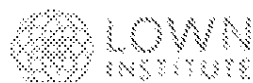
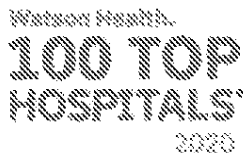
Bridgeport, WV 26330

Office: 681.342.2410

Fax: 681.342.2408

Pager: 1997 SPOK

richard.zorick@wvumedicine.org



<https://practitionerportal.nbrc.org/badge/2F60A>

8/1/2024 08:41:11

Amber,

My comments regarding 3.3. The board may issue a Temporary Respiratory License valid for 12 months to individuals who completed a board approved respiratory care educational program on or after July 1, 2022 and hold a current valid Certified Respiratory Therapist credential conferred by the National Board of Respiratory Care or its successor organizations.

are as follows:

- ✓ Extend the 12 month Temporary License to 24 months, this will allow ample time for students to pass at the Registry level. This will extend their testing opportunities from 4 attempts to 8 & will allow for more tutoring from staff/management at the respective Licenses hospital.
- ✓ This extension will allow us to retain these graduates, the schools & the hospitals have expended extensive resources training these students. Some out of frustration have already moved on to other degree programs or to practice in other states, further hindering our profession in West Virginia.
- ✓ Will allow RT Departments to fill critical vacancies & save substantial amounts of funding that is currently spent on traveling Respiratory Therapists (whom half the time are only Certified Therapists).
- ✓ I alone have expended \$1,000.000 on traveling Therapists in a calendar year, I could literally hire 2.5 RT's for the cost of 1 traveling Therapist. Most hospitals cannot afford to continue to expend these types of resources.


Thank you for your time & consideration.

Best regards,

Rich Zorick, RRT, LRTR

Director Respiratory Therapy/Sleep Center

WVU 

UNITED HOSPITAL CENTER 

Criteria for licensure comments.

1 message

Fike, Nicole <nicole.fike@wvmedicine.org>
To: "WVBORC@WV.GOV" <WVBORC@wv.gov>

Thu, Aug 1, 2024 at 10:12 AM

I take pride in my field and my career. I think reverting back to a CRT state takes a lot from us. I do however believe that passing this law and making WV a RRT state in the middle of a pandemic was a bad time to do so. To compromise I believe that passing the national board and being a CRT should allow you to work. And then giving additional time to work on obtaining your RRT would make the most sense. Our profession will never grow if we set the bar at CRT. There must be room for advancement.

Get Outlook for IOS

Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

Request for Public Comments on Proposed §30-1 Rule Change

1 message

Eric Hayes <ehayes19@hotmail.com>
To: "Amber.Legg@wv.gov" <Amber.Legg@wv.gov>

Thu, Aug 1, 2024 at 10:28 AM

To whom it may concern,

I wanted to share a brief comment on the proposed rule changes. I feel keeping the RRT requirement for WV is imperative for the respiratory profession. I do understand the existing shortage of healthcare professionals and budgetary constraints this has on organizations but feel that as a State, WV should not sacrifice the knowledge and quality of care that a RRT provides to each and every patient that we interact with on a daily basis. It is no secret that as WV is near the top of all unhealthy categories and if we want to change that trajectory, RRT's play a pivotal role in changing that through the care and education they provide.

I do agree with granting a temporary license for up to year to allow CRT's to successfully obtain their RRT credentials.

Respectfully,
Eric Hayes RRT

RE: Public Comment

1 message

Johnson, Gary <gary.johnson@wvumedicine.org>
To: "Amber.Legg@wv.gov" <Amber.Legg@wv.gov>

Thu, Aug 1, 2024 at 12:29 PM

Good Day,

Here is my comments on the proposal.

1. I believe the temporary CRT licensure should be a minimum of two years (24 months) instead of one year due to the NBRC's rules that make applicants wait four months after failing three times. This will ensure a higher rate of CRT successfully passing and obtaining the RRT in this proposed temporary licensure change.
2. I also support this change to hire CRT's as I believe we should take care of West Virginians that actually decided to go to respiratory school here in our state but cannot be hired by WV hospitals and are leaving state or leaving the profession that we desperately need and support for our future. They deserve better and they deserve a chance.
3. On top of that, we are constantly hiring traveling therapist at a much higher cost and many of those are CRT only. It is a direct slap in the face to WV students that have actually passed a national board (NBRC) that they themselves currently bestow a certification to applicants that score at the lower level but "we" as one of the very few states (which I believe only 6) states say they cannot work.
4. Lastly, I believe the NBRC is moving toward eliminating the CRT and it would only make sense to follow their pursuit in changing to RRT when that is the only option in the future.

With all my support to our profession, respectfully yours,

Gary Johnson BS, RRT

Respiratory Therapy Supervisor

681-342-2405, Pager #1004 SPOK

gary.johnson@wvumedicine.org

WVU Medicine United Hospital Center



<https://practitionerportal.nbrc.org/badges/36849>

Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

RE: Request for Public Comments on Proposed §30-1 Rule Change

1 message

Johnny Mullins <Johnny.Mullins@swvhs.org>
To: "Board of Respiratory Care, WV" <wvborc@wv.gov>

Thu, Aug 1, 2024 at 1:35 PM

 **Johnny Mullins** reacted to your message:

From: Board of Respiratory Care, WV <wvborc@wv.gov>
Sent: Wednesday, July 31, 2024 7:03:07 PM
To: Amber Legg <amber.legg@wv.gov>
Subject: Request for Public Comments on Proposed §30-1 Rule Change

CAUTION: This email originated from outside source. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Licensee,

The West Virginia Board of Respiratory Care seeks your comments on the proposed changes to §30-1: Criteria for Licensure. The deadline to submit a public comment is **August 30, 2024, by 12 PM**.

Attached, you will find the proposed rule changes. New language is underlined, and language to be removed is indicated with a strike-through.

You can submit your comments using any of the following methods:

- Mail: WV Board of Respiratory Care – 106 Dee Drive, Suite 1, Charleston, WV 25311
- Email: Amber.Legg@wv.gov or WVBORC@WV.GOV

Thank you for your time and input.

Best regards,

Amber Shawver

Amber Shawver
West Virginia Board of Respiratory Care
106 Dee Drive, Suite 1
Charleston, WV 25311
(304) 558-1382
Home Page (wvborc.com)

This email contains **PRIVILEGED AND CONFIDENTIAL INFORMATION** intended for use in the interest stated above. If you are not the intended recipient, or the agent responsible for delivering it to the intended recipient, you are notified that dissemination or copying of this email is prohibited. If you received this email in error, please immediately notify us at amber.legg@wv.gov

Proposed Changes to §30-1: Criteria for Licensure

message

Andrea Mullins <aundimullins@yahoo.com>

Sat, Aug 3, 2024 at 12:55 PM

cc: wvborc@wv.gov

Let CRT work with less pay than RRT like it used to be. The lack of RT's in WV are rising and when you can't test for 120 days due to the testing rules, it hurts the RT and hospitals who can't find anyone to hire. This will become more of a problem for the respiratory field in general.

Thank you! I hope you vote to take these problems into consideration.

Proposed new RT law/rule

message

CHRISTOPHER P TROTTER <ctrotter@mail.kana.k12.wv.us>
cc: amber.legg@wv.gov

Mon, Aug 5, 2024 at 2:15 PM

One more personal opinion/suggestion --Eliminate the CRT language and just offer 1 year graduate therapist licenses.

If there is a hard demand to bring back the CRT license-- require that the applicant have achieved the High Cut Score on the NBRC therapist multiple choice exam. That would benefit schools, as they are held to high cut standard, and benefit hospitals in allowing them to hire CRT. To help rationalize this, the Low Cut Score is more reflective of the eliminated 100 Level programs. Thus, requiring the High Cut Score CRT demonstrates the high level of competence (High Cut Score) associated with the 200 level programs.

--

Chris Trotter, DEL, RRT
Director Clinical Education
Respiratory Therapy
Carver Career Center
304-348-1965 EXT:129

Proposed changes comments

1 message

Chelsee Brown <clfhdr@yahoo.com>
To: Amber.Legg@wv.gov

Tue, Aug 6, 2024 at 6:53 PM

The changes regarding licensure changes are sufficient and acceptable. I propose to abide by these changes as they apply to me. Thank you.
Sent from my iPhone

30-1 Rule change

1 message

Mckinney, Alexis <alexis.mckinney@wvumedicine.org>
To: "Amber.Legg@wv.gov" <Amber.Legg@wv.gov>

Wed, Aug 7, 2024 at 12:49 AM

Good morning!

My name is Alexis McKinney. I currently am working for WVU Medicine in Bridgeport WV and have been a CRT since 2021. I absolutely love the career path I have chosen and am grateful for the opportunity I have been given to continue working by being grandfathered in as a CRT from the recent law change. With that being said, the recent WV law change that occurred in July 2023 has TREMENDOUSLY damaged the ability for the new generations to work in the state of WV. And to be honest I think this was the DUMBEST thing WV could have done. We just finished going through pandemic that limited our staffing ratios so why are we making it even HARDER to have people that can work?! Why am I able to work as a CRT but a new grad, who passed their TMC with CRT score (same as I), cannot. I have worked with three individuals who have passed the TMC with the CRT cut score but have not been able to progress to the SIMS cut, have to move out of state just to find a job because this state no longer allows them to stay. WVBRC also makes it very hard to retake the test as they put a cap on how many times you can take it a year. (Having to wait x amount of weeks until you can take it again)

I am not sure if this email will be read or have any type of influence in anyone's decision but I am hoping it starts a spark. We as RTs are hurting right now in regards to staffing. We are understaffed, overworked, and underappreciated. It is a huge slap in the face to have these new CRTs not be able to work while the grandfathered CRTs are employed and have been for years. In my tiny opinion, I think we should abolish the rule requiring the title of RRT in the state to work all together. We should go back to allowing both CRT and RRT work in patient care facilities. While I agree we should continue to push the CRTs to advance their education and credentials, we should not limit their ability to work. Another point I would like to make is how are the CRTs that are not able to work going to pay for the testing required to become RRT? There is no difference between me and a RRT besides one letter. We should make decisions for the state of West Virginia that benefit and help it grow.

Thank you for your time.

Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

Request for Public Comments on Proposed §30-1 Rule Change

1 message

Weaver, Tommie <weavertr@collins-cc.edu>

Wed, Aug 7, 2024 at 9:50 AM

To: "Legg, Amber" <Amber.Legg@wv.gov>, "Board of Respiratory Care, WV" <WVBORC@wv.gov>

I have attached my comments to this email.

Tommie Weaver, RRT, MS
Program Director/ Respiratory Therapy
Collins Career Technical Center
740-867-6641 Ext. 415



Request for Public Comments on Proposed §30-1 Rul...



Request for Public Comments on Proposed §30-1 Rule Change - Google Docs.pdf

105K

August 7, 2024

West Virginia Board of Respiratory Care
106 Dee Drive, Suite 1
Charleston, WV 25311

Request for Public Comments on Proposed §30-1 Rule Change

3.3. The board may issue a Temporary Respiratory License valid for 12 months to individuals who completed a board approved respiratory care educational program on or after July 1, 2022 and hold a current valid Certified Respiratory Therapist credential conferred by the National Board of Respiratory Care or its successor organizations.

If I am understanding the rule change correctly then it seems that the rule change affects newly credentialed CRT applicants. It sounds like it would allow them to work temporarily for only 12 months in the state of West Virginia. However, if the definition of license in section 3-1-2.3. "Reinstatement of License" means any type of license, then the temporary license of a CRT applicant can be reinstated or "Renewed" and they can continue to work. Or, if the "Reinstatement of License" definition does not include temporary license, then they can not "Renew" unless they have obtained the RRT credential.

I understand that the purpose of this change is to increase the declining workforce of Respiratory Therapists in West Virginia and quite frankly the nation. I know if the graduate of an accredited Respiratory Therapy program receives a quality education then having them work as a CRT or RRT would not much matter. However it seems that we are moving farther away from the AARC 2015 vision for the field of Respiratory Therapy. The Commission on Accreditation for Respiratory Care (CoARC) has already relaxed their education requirements for the entry-level to practice Respiratory Therapy by allowing the accreditation of new associate degree (2 year) programs. Now, more states are encouraging the licensing of CRT. If we keep going back, we will have OJT's working in our field again.

I do not favor this rule change. Maybe if the hospitals could offer more incentives for Respiratory Therapist (RRT), then more people might go into the field and we can fix the shortage. We try to keep the nursing community happy and I believe that we can not afford a nursing shortage either. But, putting them ahead of the pay curve and more benefits does not help us to keep or gain Respiratory Therapists. I believe if the hospitals would increase the wages of the Respiratory Therapist above nurses then you would have nurses change their field. I have seen very qualified Respiratory Therapists leave the field and go to nursing for the "better pay and benefits."

Tommie Weaver, RRT, MS
Program Director/ Respiratory Therapy
Collins Career Technical Center
740-867-6641 Ext. 415

Board change for CRT

Chloe Sindedecker <chloesindedecker805@gmail.com>
To: Amber.Legg@wv.gov

Thu, Aug 8, 2024 at 12:53 PM

To whom it may concern,

I wanted to take the time and express my opinions and concerns about letting CRT's work in the state of WV. I recently graduated on May 12, 2024. I took my exam 3 times and missed the RRT cut off by 1 point. To express my disappointment and frustration is an understatement. I studied constantly to have the information down pat but struggled on how to answer the questions at times. I've never been a good test taker or the greatest at school and always felt like I lagged behind compared to others. I had to try harder to keep up it's everyone else. When you work your butt off and try your best, never missed class or a clinical day then can't work in the state you grew up in is heartbreaking. I'm currently a student RT at United Center Hospital in Clarksburg, WV which will expire on October 11, 2024. During April/May I applied for a full time RRT position at Ruby Memorial for Children's. They were able to hold the position for me until August 31, 2024. With me not passing at the RRT level I lose both jobs. I can keep the student position until then but after that I'm not sure. I've had to look for jobs outside of WV and gather information about licensure in other states. I pretty much have to pick up and move and leave my family to keep working as a RT if I would like. The whole process as been mentally exhausting and taxing because I don't know where I'll end up and it's scary. I also have to work a bunch because I need money so I can move-where ever that will be.

I think this new proposal would be a really good thing because it gives me time to try to plan for what I need to do. I know the hospital I work for as a student therapist have had a bunch of staffing issues recently with people being sick, 2 people out for injuries then having surgery, then people being sick. I could've been a full time hirer and helped cause the issue instead of travelers being hired. If only I had more time between having to test again and my student license expiring I would be less stressed and not overwhelmed. I explained to my therapist that I felt like I was a cherry blossom tree that got cut down and have to start over, I feel like a stump. Everything I hoped and dreamed for just got cut down and have to restart. It's also frustrating when you work with a CRT and she's able to work at the same hospital that you're forced to leave because I'm not registered.

I hope you take the time to review my opinion and hope this policy is granted. Because not only will it benefit me but it will benefit others as well.

Thank you,
Chloe Sindedecker

RE: CHANGES TO 30.1: CRITERIA FOR LICENSURE

1 message

George Fisher <kd4zua@hotmail.com>

Fri, Aug 9, 2024 at 6:02 AM

To: "Amber.Legg@wv.gov" <Amber.Legg@wv.gov>, "WVBORC@WV.ORG" <WVBORC@wv.org>

Looks like they are working to accomplish two things:

First some hospitals were taking the stance that it was too expensive to hire and train a new graduate only to fire them or extend probation until they passed the exam. Some hospitals only wanted grads who had already achieved the NBRC credential. This changed with some with COVID.

Second they want to put a defined time limit on the temporary permit and again take the burden off of the hospitals.

Some other factors are probably in the mix. **I don't see a negative.**

GEORGE FISHER III RRT
213 FINCASTLE LANE
BLUEFIELD, VA 24605
304-731-2901

Re: Request for Public Comments on Proposed §30-1 Rule Change

1 message

Poach, Desiree <desiree.poach@wvmedicine.org>
To: Amber Legg <amber.legg@wv.gov>

Wed, Aug 14, 2024 at 2:59 PM

Amber,

I will only be in favor of the rule change if our board stays intact and we do not open our license during a legislative session. We still are able to hire CRT's provided they have been licensed prior to July 1, 2022. We have worked really hard to keep progressing our state and I feel that this is a step back in our state and profession. The schools in our state have the curriculum to prepare the students for critical thinking skills and to pass at the RRT level. We are one of eight states that are progressive and ahead of the curve, why go backwards. Do we not want to provide the citizens of this great state with the highest level of care they can have? We need more overall schools and more recruitment in our state! Let's support HOSA to promote the Respiratory Therapy profession to middle and high school students. Education is the key to keep progressing WV forward!

Thank you!

Sincerely,

Desiree' J. Poach BS, RRT, RRT-NPS
Manager Respiratory Care/Pulmonary Services
WVU Medicine
desiree.poach@wvmedicine.org
(304)598-4106/ext 73507

From: Board of Respiratory Care, WV <wvborc@wv.gov>
Sent: Wednesday, July 31, 2024 3:04 PM
To: Amber Legg <amber.legg@wv.gov>
Subject: Request for Public Comments on Proposed §30-1 Rule Change

CAUTION **EXTERNAL EMAIL Do NOT click links, or open attachments unless you recognize the sender and know the content is safe.**

Dear Licensee,

The West Virginia Board of Respiratory Care seeks your comments on the proposed changes to §30-1: Criteria for Licensure. The deadline to submit a public comment is **August 30, 2024, by 12 PM.**

Attached, you will find the proposed rule changes. New language is underlined, and language to be removed is indicated with a strike-through.

You can submit your comments using any of the following methods:

- Mail: WV Board of Respiratory Care -- 106 Dee Drive, Suite 1, Charleston, WV 25311
- Email: Amber.Legg@wv.gov or WVBORC@WV.GOV

Thank you for your time and input.

Re: Request for Public Comments on Proposed §30-1 Rule Change

1 message

Johnson, Gary <gary.johnson@wvumedicine.org>
To: "amber.legg@wv.gov" <amber.legg@wv.gov>

Thu, Aug 15, 2024 at 9:28 AM

I wanted to put in a second opinion before the deadline:

The more I think about it, there should not be any limitations on hiring CRT therapist in WV. Many of these young kids that do graduate and pass at the CRT level have had several "life events" that happen like getting married, having kids, divorces, etc. that could delay them from having the time to study for the RRT but not that they wouldn't in the future.

Furthermore, we cannot hire WV residents/students that are CRT, but many hospitals throughout the state are hiring traveling therapist that are only CRT, this is self-contradictive. There are several of our own students that we could hire immediately and fill our job openings if we would follow the "national" standard by the NBRC that grants CRT and RRT.

I feel we need to relinquish the band on CRT hiring until the NBRC changes to only one RRT exam, if they ever decide to do that, and as only one of six states that have this band I feel we should not be more restrictive than any other state around us.

Thank you for your time in this matter and I look forward to a resolution.

Gary Johnson BS, RRT

Respiratory Therapy Supervisor

681-342-2405, Pager #1004 SPOK

gary.johnson@wvumedicine.org

WVU Medicine United Hospital Center<https://practitionerportal.nbrc.org/badge/36040>

From: hatpac2005 <hatpac2005@gmail.com>**Sent:** Thursday, August 1, 2024 12:06 PM**To:** Johnson, Gary <gary.johnson@wvumedicine.org>**Subject:** FW: Request for Public Comments on Proposed §30-1 Rule Change

CAUTION **EXTERNAL EMAIL** Do **NOT** click links, or open attachments unless you recognize the sender and know the content is safe.

Sent from my U.S.Cellular® Smartphone

AARC position on roll-back of RRT

1 message

Miriam O'Day <miriam.oday@aarc.org>

Mon, Aug 19, 2024 at 4:57 PM

To: "amber.legg@wv.gov" <amber.legg@wv.gov>

Cc: Cindy Keely <cynthia.keely@gmail.com>, "bhatfield@wvha.org" <bhatfield@wvha.org>

Dear Ms. Shawyer: I have attached comments from the American Association for Respiratory Care who are opposed to the change from RRT to CRT as a minimum for licensure on a permanent basis. Thank you in advance for your attention to this matter. My best, Miriam O'Day

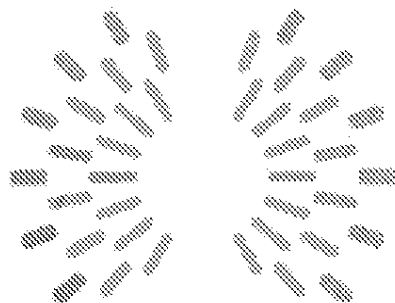
Miriam O'Day

Sr. Vice President, Government Affairs

202.246.1231 Main. 972.243.2272

9425 N. MacArthur Blvd, Suite 100

Irving, TX 75063-4706



aarc

American Association
for Respiratory Care



wv letter carl hinkson.docx

329K



aarc

Those helping
the world breathe

American Association
for Respiratory Care

9425 N. MacArthur Blvd, Suite 100
Irving, TX 75063-4706

Subject: Opposition to West Virginia Hospital Association's Proposal to Reinstate CRTs as Minimum Requirement for Licensure

Introduction

The American Association for Respiratory Care (AARC) supports the West Virginia Society for Respiratory Care in strongly opposing the West Virginia Hospital Association's (WVHA) proposal to permanently reinstate Certified Respiratory Therapists (CRTs) as the minimum requirement for licensure in the state. While we acknowledge the temporary Emergency Rule issued by the WVSRC Board of Respiratory Care, which allows for a 12-month temporary license for CRTs, the AARC firmly opposes any permanent rollback from the current standard of Registered Respiratory Therapist (RRT) licensure. Such a move would be detrimental to patient care, quality, and the long-term professionalization of the respiratory care field.

Background

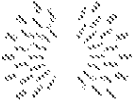
The field of respiratory care has undergone significant advancements over the past decades, with the RRT credential emerging as the gold standard for ensuring the highest quality of patient care. The CRT credential was created to recognize competency testing for graduates of one year training programs. These abbreviated programs no longer exist. The decision to elevate the RRT as the minimum requirement for licensure, effective from July 1, 2022, was rooted in a commitment to better outcomes, enhanced clinical skills, and a more robust and comprehensive knowledge base among practitioners.

The WVHA's recent request, submitted to the Board on June 6, 2024, seeks to revert to the outdated licensure model that included CRTs. This request is driven by concerns over access to care and the recruitment of healthcare professionals, particularly considering current staffing challenges. While these concerns are valid, the AARC believes that reverting to a lower standard for licensure is not the solution. Instead, efforts should focus on supporting and expanding the workforce while maintaining the RRT standard that upholds the quality of care.

Position of AARC

1. Support for the Emergency Rule

The AARC supports the Emergency Rule allowing for a temporary 12-month license for CRTs. This rule is a necessary and temporary measure to address immediate staffing challenges without compromising long-term standards. However, it is critical that this measure remains temporary and does not lead to permanent changes in licensure requirements.



2. Opposition to Permanent Rollback

The AARC strongly opposes the WVHA's efforts to permanently reinstate CRTs as the minimum requirement for licensure. The RRT credential represents a higher level of education, training, and clinical competency, which directly correlates with improved patient outcomes. Reverting to CRTs would be a step backward, undermining the progress made in elevating the respiratory care profession.

3. Commitment to Quality Patient Care

Patient safety and care quality are the foremost priorities of the AARC. The move to make RRT the minimum licensure requirement was driven by evidence showing that RRTs are better equipped to handle the complexities of modern respiratory care. A rollback would place patients at risk by lowering the standard of care they receive.

4. Addressing Workforce Challenges

The AARC recognizes the workforce challenges faced by healthcare providers in West Virginia. However, instead of lowering standards, we advocate for initiatives to increase the number of RRTs through enhanced recruitment, education, and retention strategies. This could include offering incentives, expanding educational programs, and creating pathways for CRTs to advance to RRT status.

Conclusion

The AARC stands ready to collaborate with the WVHA, the West Virginia State Respiratory Society, and other stakeholders to find solutions that address workforce challenges without compromising the quality of care.

Sincerely,

Carl Hinkson, MS, RRT, FAARC
AARC President

Criteria for Licensure Statement

1 message

Kalei Haines <kaleihaines@yahoo.com>

Tue, Aug 20, 2024 at 11:58 AM

To: "Amber.Legg@wv.gov" <Amber.Legg@wv.gov>, "WVBORC@WV.GOV" <WVBORC@wv.gov>

Hello! Attached below is my statement regarding the changes in criteria for the WV respiratory therapist licensing. Thank you so much for the opportunity to voice my comments.

Best,

-Kalei Haines, CRT



WV Board of RT Statement copy added.docx

17K

Dear,

West Virginia Board Of Respiratory Care

My name is Kalei Haines. I wanted to write a statement regarding the changes in Criteria for Licensure in the state. I graduated from Allegany College of Maryland's Respiratory Therapy program in May of 2023 and obtained my CRT, passing with a high cut score in June of 2023. All I have ever wanted is to work in my home state, WV. In 2022, the board passed a law where new grads can no longer get licensed as Certified Respiratory Therapists in the state and must have the RRT credential to do so.

The change to the requirements to become licensed in West Virginia were made while we were in the middle of our program, while the class who just graduated not even a year before were "grandfathered" in. I understand that our state is trying to make registry a priority to go along with nursing qualifications, however LPN's can still work in our state while those with the CRT credential are forced to work elsewhere if they cannot pass the CSE.

The CSE is one of the most difficult allied health exams with a 63% pass rate for first time candidates and a 53% pass rate for repeat candidates. Not only are the cost of the examinations outrageous, but there is also a 120 day wait period after the third attempt for not passing the exam and I think new grads struggle even more with passing the exam due to that long waiting period. Not only is that a long time, it is a long time to go without being able to work and in this economy, not everyone can afford the gas to go out of state and get jobs due to WV being only one of eight states that have the registry requirement.

The staffing is also a large issue for many WV hospitals. Many hospitals are forced to hire on travel respiratory therapists which is unnecessary when we have so many great respiratory therapists in our own state that just have trouble passing the clinical simulation exam. Our state is very understaffed in all areas for healthcare. It is beyond discouraging.

I currently have an active license in the state of Maryland. I have an hour and ten-minute commute to my job while working full-time nightshift as a CRT at Garrett Regional Medical Center in Oakland, MD. It hasn't been easy having this kind of commute especially in the winter months. There are plenty of job opportunities in the state of WV with a reasonable

commute for me but I'm unable to work no where due to the licensing requirements. I have worked alongside with some wonderful CRTs while being out of school. Even my two preceptors from my last semester of respiratory therapy school are CRTs in WV. Julie and Christina taught me something new every day. They both went above and beyond to make it a meaningful clinical experience for me and assuring that I saw/did as many things as possible during my time spent with them. Also, after graduating in May of 2023 and passing my TMC I worked in WV at Grant Memorial with my temporary student license until it expired in October. CRT Kristen @ Grant Memorial instilled a whole new level of confidence within me during those couple months of being able to work there. I can't thank her enough for being a reminder of why I chose this profession and for being such an amazing role model for me to follow in the footsteps of during my time at GMH.

In conclusion, I propose some changes to the new requirements. To waive the requirements for a short time for those who graduated in May of 2023 and passed the TMC with high cut, and if that is not possible I think a temporary license should be granted to those who have to wait 120 days between CSE exams for those who passed the TMC with the high cut score and just struggle to pass the CSE, and can be done on a case to case basis if it is possible. I am asking the board to reconsider the requirements for licensing new grads in WV that just want to make their state a better place and truly make a difference in the place we are all so lucky to call home. Please take into consideration waiving the RRT requirement for new graduates until 2027 when the TMC/CSE will become one big exam.

Sincerely,

Kalei Haines, CRT

(304)-359-8081

kaleihaines@yahoo.com

(no subject)

1 message

Nichols, Diane <diane.nichols@wvumedicine.org>

Thu, Aug 22, 2024 at 12:49 PM

To: "wvborc@wv.gov" <wvborc@wv.gov>

This letter is in reference to respiratory therapy students having to become an RRT to work in the state of West Virginia and CRT credentials would be eliminated.

I realize our BORC wants to raise the bar eliminating CRTs to RRTs only, but this is not fair to our young people that put forth the effort to go to college to become a therapist in health care and not being able to pass the RTT exam.

I attended the call at the WVBORC meeting and what was communicated to us from all schools is the students that applied for the program were not qualified (not smart enough) to attend RT programs.

I will share my story about RT school. I applied at Beckley College in 1988, I had been out of school for 10 years, so to say the least my ACT score was not up to par. There were over 50 students that applied for the RT program. My interview got me into the program. While I was in school, I maintained high scores and graduated fourth in my class. I am now a manager and have held this position for 23 years.

There are four CRTs that work in my department and happen to be the best therapists I have. Becoming a CRT verses an RRT makes no difference in the big scheme of things when it comes to patient care.

After conversing with a few of my co-horts on this subject, I feel strongly about not removing CRTs from working in WV.

Our hospitals are suffering for workers and this action of eliminating the CRT from the field in the state of WV has hurt us financially.

I am asking to help change the ruling to reinstate CRTs back into the work force.

Thank you for your time in reading this letter and considering the change.

Diane Nichols, RRT

Manager of Respiratory Therapy

Manager of Cardiac/Pulmonary Rehab

400 Fairview Ht. Rd.

Summersville, WV 26651

304-872-8565 Office

304-619-3770 Cell

Diane.Nichols@wvumedicine.org

<http://www.donatelife.net/blue-green-day/>

Diane Nichols, RRT

Manager of Respiratory Therapy

Manager of Cardiac/Pulmonary Rehab

400 Fairview Ht. Rd.

Summersville, WV 26651

304-872-8565 Office

304-619-3770 Cell

Diane.Nichols@wvumedicine.org

<http://www.donatelife.net/blue-green-day/>

Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

Criteria for Licensure

1 message

Kelly Ferren <stevensferren@yahoo.com>

Mon, Aug 26, 2024 at 3:15 PM

To: WV Board of Respiratory Care <wvborc@wv.gov>

In reference to Criteria for Licensure I myself have just retired. It was my choice to get registered, it was my choice to get my Bachelor degree, as well as my choice to do other credentials. Those choices open many doors to those 46 years, but again it was my choice. I do not believe a few should dictate to all. If someone wants to advance it should be their choice.

In my 46 years I have worked with Certified Therapist that were clinically superior to a Registered Therapist.

It is not a National requirement. That being said the biggest problem is staffing for the whole state of WEST VIRGINIA not just Ruge Memorial. Smaller community health care systems need staffing.

WVBORC should be looking out for the whole state.

Kelly Ferren, RRT.

Respiratory Care Interstate Compact

1 message

Grant Minix <gminix@csg.org>

Tue, Aug 27, 2024 at 9:54 AM

Hello,

I want to provide a reminder that we have extended the deadline for feedback to be submitted on the Respiratory Care Interstate Compact. We will gladly welcome your feedback within the next two weeks if you have any to provide before we finalize the document.

Thank you,

Grant

Grant Minix

Policy Analyst

The Council of State Governments Center of Innovation


1776 Avenue of the States | Lexington, KY 40511

859-244-8024



**National Center for
Interstate Compacts**

THE COUNCIL OF STATE GOVERNMENTS

 **RCIC SR Draft.pdf**
413K

Request for Public Comment

1 message

Neff, Julie <julie.neff@wvmedicine.org>
To: "Amber.Legg@wv.gov" <Amber.Legg@wv.gov>

Tue, Aug 27, 2024 at 8:38 AM

Good Day

I am responding to the request for public comment on the matter of the "Temporary Respiratory License" .

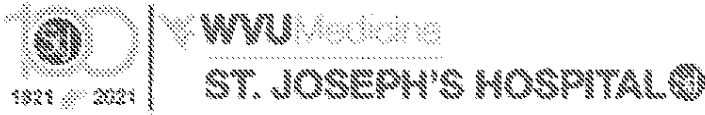
I am currently the Director of Cardiopulmonary at St Joseph's Hospital in Buckhannon, WV. I currently have four vacancies in staffing and have filled these vacancies with travelers, most of whom are Registered, but at least one is not, and all are licensed in the state of WV. Over the past two years I have had two Respiratory Therapy program graduates show interest in working at this facility, but I was unable to offer a job to them because they could not obtain a WV Respiratory license.

The current "Criteria for Licensure" is preventing me from hiring personnel that potentially could fill my open positions and cut the costs of hiring travelers. The cost of travelers is almost triple what I pay my employees, and I feel the proposal to grant a "Temporary Respiratory License" , will do little to alleviate this issue. Both of my potential candidates have moved on to other employment. They are disillusioned with the respiratory therapy profession as a whole and have walked away from a significant investment that they thought would provide for their futures.

When I received my credentials from the National Board of Respiratory Care it was a three-step process. When I initially sat for my boards, I could only receive the "Certified" level. I was **required** to work in the field for at least a year before I could sit for the "Registry" and after passing that I had to pass "Clinical Sims". I understand the NBRC is looking to change the boards (which I know has already been changed several times since I took them) and I believe that it is necessary to do so, however, I feel that as a responsive and representative board, the WVBORC should follow the directives of the NBRC instead of preceding them. National numbers for Respiratory Therapist have been declining and there is a definite shortage all over the state and the predictions are that this will continue. I have heard from colleagues that they have lost potential therapists (Certified-CRT) to surrounding states and this issue was brought up at the July 11th Leadership Meeting . I don't understand why we are making it more difficult to hire staff when there is a staffing shortage. It has been my experience that graduates are overwhelmed with requirements and some don't realize that on top of paying for sitting for their National Boards, that they also have to pay for a state license and potentially a Point of Care License. I feel it would be in our best interests to follow the NBRC's directives and that newly Certified Therapists can practice in the state of WV to be in line with the NBRC standards.

/ **Julie Neff, RRT**

Director of Cardiopulmonary
WVU Medicine -- St. Joseph's Hospital
One Amalia Drive
Buckhannon, WV 26201
(O) 304-473-2177
(F) 304-473-2094
julie.neff@wvmedicine.org
www.stj.net



Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

WVHA and WVHCA public comments re 30CSR01

1 message

Brandon Hatfield <bhatfield@wvha.org>

Tue, Aug 27, 2024 at 1:34 PM

To: "amber.legg@wv.gov" <amber.legg@wv.gov>

Cc: Jim Kaufman <jkaufman@wvha.org>, Tony Gregory <tgregory@wvha.org>, Amber Furman <afurman@wvha.org>

Good afternoon, Ms. Shawver-


On behalf of the West Virginia Hospital Association and the West Virginia Health Care Association, please find attached our public comment letter re: Legislative Rule 30CSR01, Criteria for Licensure. We appreciate the opportunity to provide comment. If you have any questions, please feel free to contact me.

Thanks




Brandon Hatfield | Vice President and General Counsel

West Virginia Hospital Association
100 Association Drive Charleston, West Virginia 25311
bhatfield@wvha.org | 304.353.9720 | www.wvha.org

HEALTH CARE LEADERSHIP SUMMIT
September 25-27, 2024
The Greenbrier
A Joint Annual Meeting
West Virginia Hospital Association
West Virginia Health Care Association

Confidentiality Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message. If you are a public employee and received this e-mail message, it is your responsibility to adhere to your agency's standards of conduct and comply with lobbying disclosure requirements.

 **WVBORC comment letter WVHA final.docx**
439K



100 Association Drive
Charleston, WV 25311-1871
Phone (304) 344-9744
www.wvha.org



August 8, 2024

Amber Dawn Shawver
Executive Director
West Virginia Board of Respiratory Care
106 Dee Drive
Charleston, WV 25301
Re: Emergency Rule 30CSR1: Respiratory Care Licensure

Dear Executive Director Shawver,

On behalf of the 72 members of the West Virginia Hospital Association (WVHA) and 120 members including nursing facilities, assisted living communities, and residential retirement centers of the West Virginia Health Care Association (WCHCA), we are writing to express our appreciation for the recent proposal to amend the rule to issue a temporary 12-month license to Certified Respiratory Therapists (CRTs) in West Virginia. This proposal represents a positive step toward addressing the current workforce challenges, and we commend the Board for its proactive approach.

However, while we recognize the board's efforts, we must reiterate our critical request to reinstate full licensure for CRTs as it existed prior to July 1, 2022. This request is driven by significant concerns from respiratory therapy, hospitals, and other health care leaders across West Virginia regarding the adverse impact the current licensure changes have had on access to care and the recruitment of critically needed healthcare professionals.

West Virginia hospitals are currently grappling with a 12.7% vacancy rate among respiratory therapists. This issue is further compounded by a 2.6% increase in vacancy rates between 2022 and 2023, as highlighted in the WVHA's 2024 workforce survey. The urgency of reverting to the previous full licensure for CRTs cannot be overstated. The Board's decision to exclusively license Registered Respiratory Therapists (RRTs) has significantly narrowed the pool of eligible respiratory therapists, potentially exacerbating the staffing shortages already impacting our hospitals and health care institutions across the state.

Data from the Commission on Accreditation for Respiratory Care (CoARC) indicates that respiratory care programs in West Virginia achieved a state average of 71% for achieving the

"TMC high cut score," compared to the CoARC-established threshold of 60%. This means that up to 30% of graduates from these programs are unable to be licensed in West Virginia, despite being eligible for licensure as CRTs in 41 other states including Pennsylvania, Virginia, Kentucky, and Maryland.

This situation not only places additional strain on our current workforce and access to care but also risks compromising the quality of care provided to patients across the state. Without an expanded pool of qualified respiratory therapists, who have achieved a national credential, patients will inevitably experience delays in accessing the care they require. It is important to note that the ability of CRTs to deliver high-quality care is well-established, as evidenced by the fact that 41 states recognize the national credential, and the West Virginia Board of Respiratory Care continues to relicense CRTs who received their national credential prior to July 1, 2022.

By reinstating licensure criteria that include both CRTs and RRTs, we believe we can work together to mitigate staffing shortages and enhance the capacity of our health care facilities to deliver optimal respiratory care. This adjustment would align West Virginia with the majority of states that successfully recognize both credentials, ensuring that we can recruit and retain a sufficient number of qualified respiratory therapists and expand access to the critical care our patients need.

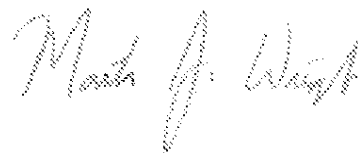
As advocates for high-quality health care, we believe that reverting to the licensure standards in place prior to July 1, 2022, is in the best interest of both health care providers and the patients they serve. We remain committed to collaborating with the Board to ensure that our state's health care system remains robust and that our health care professionals are held to the highest standards. West Virginia should be with the majority of states, not an outlier, due to our significant challenges of recruiting and retaining health professionals in our rural communities.

Thank you for considering our comments on this important matter. We look forward to your support and are available for further discussion should you require additional input or clarification.

Sincerely,



M. James Kaufman, PhD
President & CEO
West Virginia Hospital Association



Martin J. Wright, Jr
Chief Executive Officer
West Virginia Health Care Association

Public comment for license change rule

1 message

Faith May <faithmay72617@gmail.com>
To: wvborc@wv.gov

Wed, Aug 28, 2024 at 12:30 AM

Hello, my name is Faith May, CRT.

I myself graduated in 2023, I was in the program for respiratory therapy when you all decided to change the rule for anyone who become CRT to not be able to work in WV, until we become RRT. I do feel as if that rule should not have been taken into effect until the new incoming class started, due to the fact that when it was in place our class was already working on our degree. For me, I feel as if it is very unfair to make someone take a 2 year program, pass 2 exams to be able to work all the while you have nurses who do a 2 year program, can pass one exam and work as long as they please. While I disagree with the fact that anyone who's taken then program could work under this change, I do think they should have to atleast carry a CRT badge. I feel those who have already passed CRT should be able to work, always, not just for 12 months even if it's at a lower rate of pay. Those who were already in the process of their degree in 2022 should have been grandfathered in just as those who held their CRT in that year or before.. I do feel as if this is one of the main reasons there is such a shortage of respiratory therapists in our area, and I do think that it is something our wv board of respiratory should consider.

My best regards,
Faith May CRT
Sent from my iPhone

Public Comments on Proposed changes to 30-1: Criteria for Licensure

1 message

Terry, Keith A. RRT <Keith.Terry@st-marys.org>
To: "Amber.Legg@wv.gov" <Amber.Legg@wv.gov>

Wed, Aug 28, 2024 at 1:45 PM

To the West Board of Respiratory Care Board

I do not support the 3.3 change for a Temporary Respiratory License. However, I understand the Board's current position addressing the state's workforce shortage. CRTs and RRTs currently can perform the same functions to provide patient care and are employed at the same places. If CRT Temporary Respiratory Licenses are awarded, there should be different rules and regulations regarding the therapies and job functions to delineate between an RRT and CRT within the scope of practice. For years, the profession has identified that CRTs hold an entry-level certification, while RRTs hold a more advanced certification.

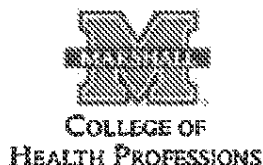
Respectfully,

Keith A. Terry, Ed.D, RRT, RRT-ACCS, RN

Associate Professor – Director of Clinical Education

St. Mary's/Marshall University

Cooperative School of Respiratory Care



<https://practitionerportal.nbrc.org/badge/1060B>

Office: 304-399-7145

Fax: 304-399-1981

Email: keith.terry@st-marys.org

terry35@live.marshall.edu