

# You and the AARC – If not Now, When?

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http://www.aarc.org

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**Maximize Your Membership**

Take another look at all the AARC has to offer and make sure you're maximizing membership

**WE'RE LOOKING FOR A FEW GOOD MILITARY RTS**

Say Cheese! AARC Photo Contest

**PACT Visits Congressional Offices They're Working for You!**

**AARC News**

- ▶ [Magazine Tells How 2005 President John Hiser Got Into Respiratory Care](#) - Feb 16, 2006
- ▶ [Good Press: AARC Members in the News](#) - Feb 10, 2006
- ▶ [Quality Matters, Benchmarking Will Help](#) - Feb 8, 2006
- ▶ [Not All is Lost with the Passing of S. 1932 Budget Cuts](#) - Feb 2, 2006

[More AARC News...](#)

**Professional News**

- ▶ [AARC Member Michelle Clavier Rallies To Save Son](#) - Feb 24, 2006
- ▶ [Receptor for Treating ARDS Is Identified](#) - Feb 23, 2006
- ▶ [Kids Under 5 Should Get Flu Shot, Says Panel](#) - Feb 23, 2006
- ▶ [Hurricane Katrina Report: 125 Ways To Fix Disaster Response](#) - Feb 23, 2006

[More Professional News...](#)

**October RC Week**

AARC NEWS AND EVENTS CALENDAR

**AARC Professor's Rounds**

EARN UP TO 8 CRCE

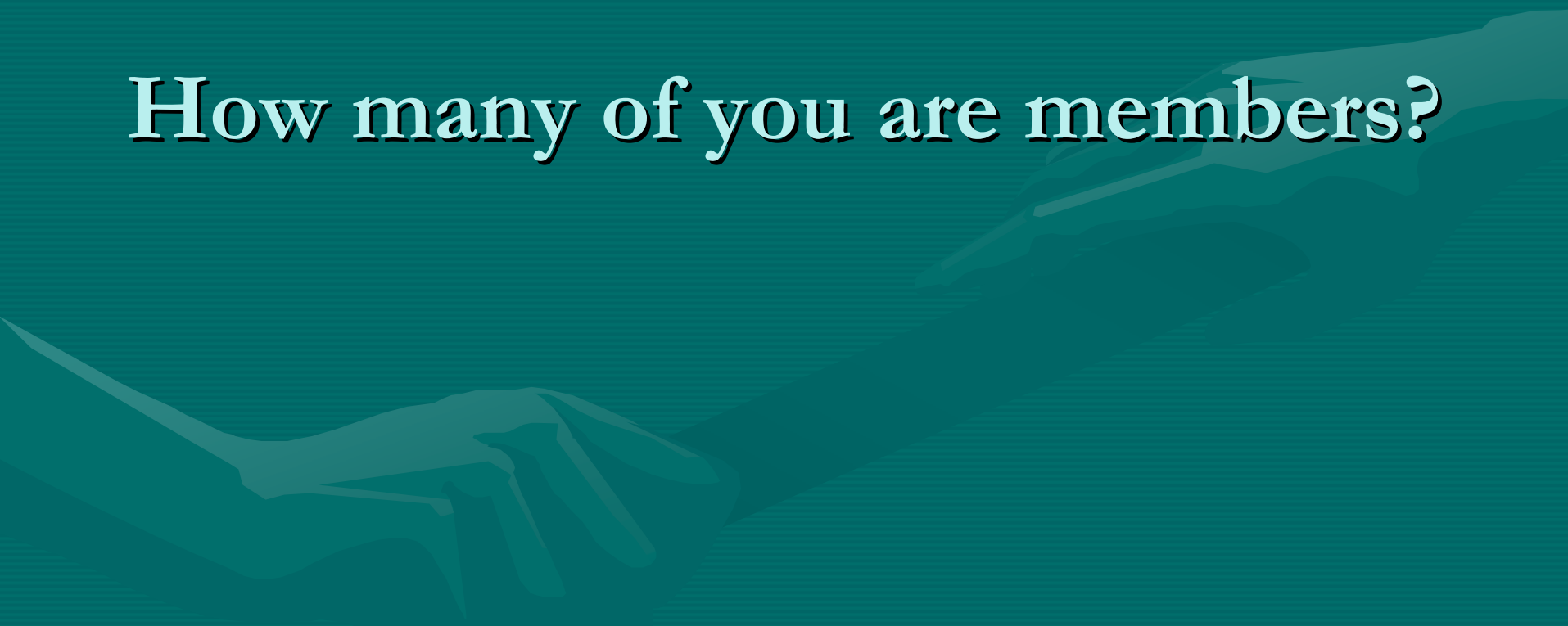
**EPA & Asthma**

FREE COURSE. FREE CREDITS.

**Hurricane Help**

**HON**

**How many of you are members?**



*My Story . . .*



# Definition: Professional

- “Profession” and “Professional”
  - Derived from Latin word “professio”
  - Meaning : a public declaration with the force of a promise.

# Respiratory Care Profession

- What are the benefits offered by the profession of respiratory care to the health care team and society in general?
  - Competence in a specialized body of knowledge and skill.

# Competence

- National Association for Medical Direction statement:
  - “ The hours of education and curriculum required for credentialing of a RT should be the standard for all non-physician providers of respiratory care services”

# Competence

- 1994 report by Indiana University comparing respiratory and nursing curriculum.
- Lewin Group, 1997
- Dr. James Stoller, 1998
- The Muse Study, 1999

# Purpose

- Acknowledgement of specific duties and responsibilities to society.
- Prior to mid 40's RT's did not exist
- Right combination of external and internal factors converge resulting in the need for our profession

# PURPOSE

- World War II driven technology spurred new diagnostic and therapeutic techniques related to the use of oxygen combined with positive pressure to improve respiratory function.

# PURPOSE

“We discovered that the important part of thoracic surgery was not so much what was done on the operating table, but what was done to prevent post-operative pneumonia by controlling secretions and breathing....It was necessary that when these patients received respiratory therapy they simply had to be supervised.”

Edwin R. Levine M.D., 1943

# PURPOSE

- So why respiratory therapy?

To fulfill a need for:

1. Advanced therapeutic knowledge of the physiology and pathology of respiratory disease
2. Implementation and operation of complex medical equipment
3. Monitoring critically ill patients and the highly complex medical equipment around the clock.

# PURPOSE

- Purpose: Called to provide patient advocacy in the area of maintaining and restoring normal function of the respiratory system.

# PURPOSE

Knowledge of disease pathology, anatomy and physiology and scientific principles as they apply to oxygenation and ventilation

## *RT*

Application and technology of advanced therapeutic procedures to maintain and restore normal respiratory function.

Born in Promise



Promise Unfulfilled



Disappointment



- **AMA** 1847
- **ANA** 1896
- **ASRT** 1920
- **APTA** 1921
- **AARC** 1947

# Current Reality

A promise is for a future time

We have been premature in our  
expectations

The time for our promise to be fulfilled is  
now!

The background is a solid teal color. A faint, semi-transparent silhouette of two hands shaking is visible, centered horizontally and slightly below the text. The text "OUR DESTINY" is written in a white, sans-serif, all-caps font, centered horizontally and positioned in the middle of the image.

OUR DESTINY

# The Promise

- The future promise of our trust related to patient advocacy:

*The profession of respiratory care has an appointment with destiny.*

# The Promise

- External Factors:
  - Changing demographics
  - Unchanging air quality
  - Socioeconomic factors
  - New and re-emerging infections
  - Potential risk of bio-terrorism

# Promise

- Internal factors - potential paradigm shifts in health care:
  - Evidence based medicine replaces traditional medicine
  - Consumer driven, patient centered healthcare
  - Prevention of disease with emphasis on healthy aging

# Promise

- Internal factors - potential paradigm shifts in health care:
  - Greater emphasis placed on data related to the quality of care provided
  - Cross-training of non-physician healthcare workers
  - Shifts in reimbursement mechanisms inevitable

# The Promise

- In Change There is Opportunity!

“It’s not the strongest species that survive, nor the most intelligent, but the ones most responsive to change.”

Charles Darwin

# The Promise

- Evidence based medicine replaces traditional medicine (AARC CPG)
- Consumer driven, patient centered healthcare (RT reimbursement under Medicare)

# The Promise

- Prevention of disease with emphasis on healthy aging (RT as disease manager/patient educator)
- Greater emphasis placed on specific data related to the quality of care provided. (RT-driven protocols)

# The Promise

- Cross-training of non-physician healthcare workers (Increased scope of practice)
- Shifts in U.S. health care reimbursement (Profit center vs. loss)
- Globalization of the profession

# Promise

- Next to a nurse, the Respiratory Therapist is the most frequently seen health care practitioner at the patient's bedside.
- US Department of Labor projects a 38% increase in job openings for Respiratory Therapists by the year 2012

# The Promise

Result: Prominent role and  
recognition for the Respiratory  
Care profession!

A faint, semi-transparent image of two hands shaking is visible in the background, centered behind the text. The hands are rendered in a light teal color, matching the overall theme of the slide.

# The Promise

Undisputed expert in the area of respiratory disease prevention, treatment, management and rehabilitation.

# OUR CHALLENGE



# Challenges for the Profession

- Challenge defined:  
A test of one's ability and/or resources in a demanding but stimulating undertaking or situation.

The way to avoid challenges is to .....

# Challenges for the Profession

There is no way to avoid challenges!

There is no opportunity without opposition

There is no winning without working

There is no open door without an obstruction to keep us from entering

There is no victory with out vigilance

Therefore the reaction to challenges determine the outcome.

# Challenges of the Past

- 1975: Rad Techs challenge over the use of AART logo in court
- 1982: California credentialing bill passed
- 1986: State level AHA not receptive to RT's taking ACLS
- 1987: Airline smoking survey results in the Durbin Amendment establishing a smoking ban on flights less than two hours.

# Challenges of the Past

- 1987: AMA Proposes Registered Care Technologists (RCT)
- 1988 CLIA "88" threatens to exclude RT's and their medical directors from rendering ABG and PFT services.
- 1993: JRCRTE changes their bylaws eliminating appointment provisions of reps to the committee by the AARC.
- 1996 : First discussions on "managed care" which becomes a major issue.

# Challenges of the Past

- 1998: Balanced budget act's cost reduction affects RCP jobs in skilled nursing facilities
- 1999: Licensure/credentialing of sleep lab personnel to become a major issue.
- 2001: Unlicensed Assistive personnel issues develop.
- 2004: AARC challenges revised CDC guidelines related to infection control of nebulizers.

# Challenges of the Future

- What will be your legacy?

“A person who doubt’s himself is like a man who would enlist in the ranks of his enemies and bears arms against himself. He makes his failure certain by himself being the first person to be convinced of it”

Ambrose Bierce

# Challenges of the Future

Do you believe in your profession enough to be undeterred by what you see and instead believe in what you could be?

# Challenges of the Future

What if we just let go of our:

Fears and insecurities

Disappointments and  
bitterness

Anger and resentment

Guilt and shame

# Challenges of the Future

But instead reaffirmed  
our identity as patient  
advocates and really  
stepped into it!

Here's the deal . . .

We're better positioned to  
hit the home run than we've  
ever been before!!!!

# Challenges of the Future

Our mantra being the patient deserves the best possible care therefore :

I NEED TO KNOW

I NEED TO HAVE

I NEED TO DO

I NEED TO SAY

I NEED TO GO

I TAKE RESPONSIBILITY FOR MAKING IT  
HAPPEN!

# Challenges of the Future

In making it happen, I am:

Aggressive but not arrogant

Questioning and not accepting

Validated and no longer needy

Acting and no longer waiting

Focused on the solutions rather than being stuck on the problems

Folks, We've got to  
“chunk” the “victim”  
mindset we've harbored  
for years!

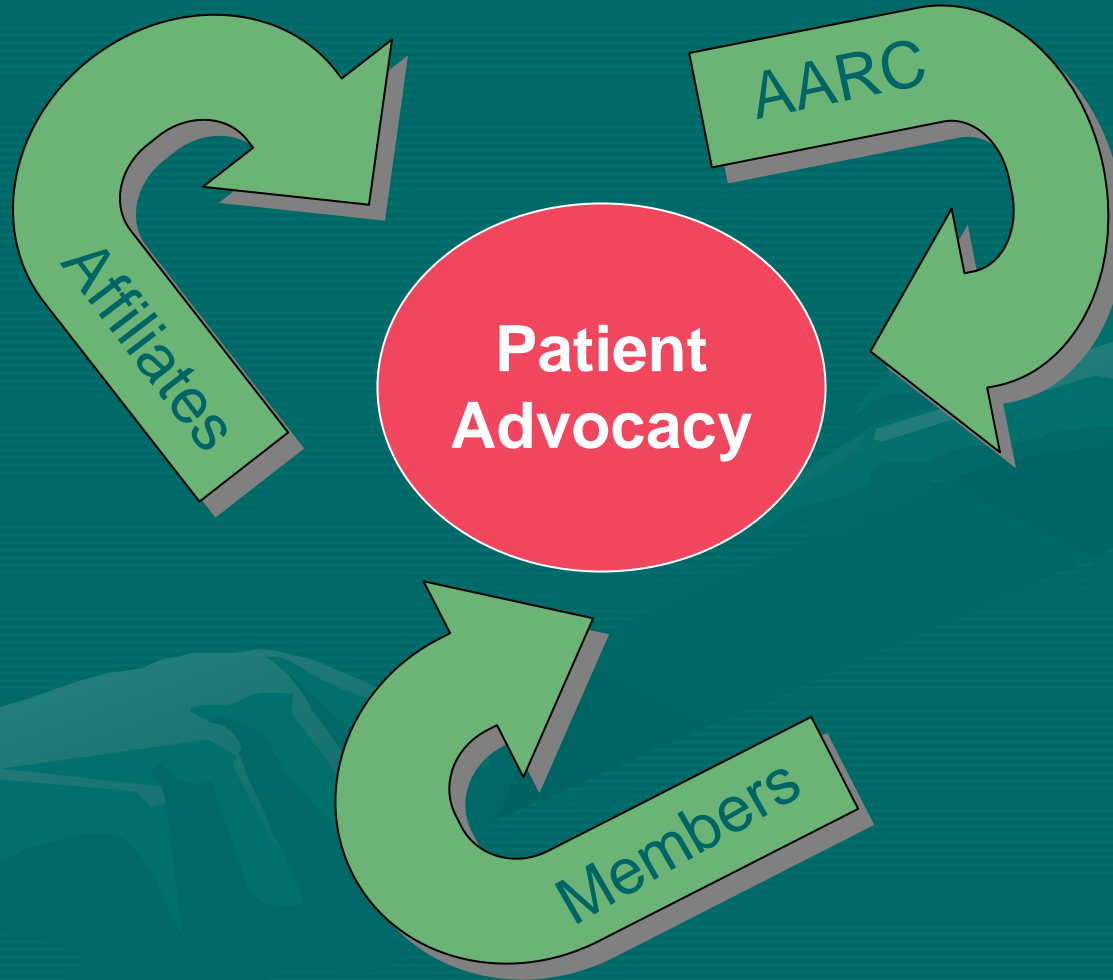
What are you going to be?

The Hammer or The Nail?

# Challenges of the Future

- To continually reinvent the profession
  - To avoid doing today's work with yesterdays skills
  - Having a clear vision of RCP 2012 and beyond
  - Attracting new practitioners
  - Researching and promoting new technologies and patterns of care.
  - Expanding our skill set to meet health care needs

To function in unity



# Challenges of the Future

- To stay true to the purpose for which we were created, Patient Advocacy:

The future of our profession depends upon fulfilling our individual and organizational promise as patient advocates:

## The Power of One Therapist:

The commitment of an individual therapist, at all times and in all venues, to the well being of patients with respiratory disease.

# We Need for You to “Get In The Game!”

- Own your responsibility as the patient advocate
- Own your responsibility as the lung health expert
- If you're not a member, please join us!
- If you are a member, help us make a difference!

# How Do I Make A Difference?

- Get involved in the local region or chapter of your state society, your Board of Directors or at the national level
- Take an active role in supporting national initiatives
- Look for opportunities to educate those around you as to the value a Respiratory Therapist truly brings to the healthcare team

# Bottom Line

THE POWER OF ONE TO MAKE A  
DIFFERENCE:

FOR BETTER OR WORSE

**We Need You Now!**

**We Need You ALL!!!!**



“To everything there is a  
season, A time for every  
purpose under Heaven.”

Ecclesiastes 3:1

This is our season folks!  
Let's grab the brass ring and  
do the right thing!

**You and the AARC . . .**

**If Not Now, When?????**





# Thanks!

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