



## **California Society for Respiratory Care**

### **Position Paper for Minimum Requirements of Respiratory Leadership**

The California Society for Respiratory Care (CSRC), an organization focused on patient care advocacy, promotion of healthcare safety and professional advancement, affirms its position the following recommendations for minimum degree, credentialing, and competency requirements for Leadership positions of Respiratory Care Practitioners (RCPs) in California. This position strategically aligns the profession with recent and upcoming changes in healthcare, improves patient care outcomes and consumer confidence, and provides leadership to advance the profession.<sup>1,2</sup> This position statement was created by a diverse group of RCPs from across the state of California. These RCPs hold roles as Academic Educators at the associate, baccalaureate, and graduate degree levels, as well as Educators, Managers, and bedside RCPs within industry and the acute care hospital setting.

#### **Leadership Education Level and Professional Community**

Leadership positions within the profession of respiratory care such as (directors, managers, educators, supervisors, etc.) require certain skills and traits. These skills and traits are not only obtained by experience, but with education as well. Typically, graduate level programs provide education on leadership theories and concepts to set a foundation in order to foster those leading a department, program, team, etc. In addition, graduate programs train and prepare their graduates to critically think and conceptualize advanced concepts within their area of expertise.

- **Education:** Directors, managers, supervisors, and department educators require a higher level of education as well as skills to accomplish their roles in the respiratory department. Having a graduate degree ensures that these individuals have advanced theories that focus on leadership capabilities. Advanced credentials such as Neonatal/Pediatric Specialty (NPS), Adult Critical Care Specialty (ACCS), Certified or Registered Pulmonary Function Technologist (CPFT or RPFT), Sleep Disorder Specialty (SDS), and/or Asthma Educator Certification (AE-C) help ensure that the leader has demonstrated a minimum level of knowledge to support them in their respected position.
- **Professional Community:** Those who hold leadership positions are expected to not only serve their team members and department, but also their professional community. Leaders in these positions should obtain and maintain memberships with the CSRC, American Association for Respiratory Care (AARC), American Thoracic Society (ATS), California Thoracic Society (CTS), and/or CHEST.



- It is the position of the CSRC that these individuals be required to have the following requirements for these positions:

	<b>Directors/Managers/Department Educators</b>	<b>Supervisors/Leads</b>
<b>Minimum Education</b>	Advanced Degree (graduate level degree preferred)	Entry Level Degree (advanced degree preferred)
<b>Credential</b>	RRT and one or more additional credentials preferred (e.g., NPS, ACCS, RPFT, SDS, AE-C, etc.)	RRT and one or more additional credentials preferred (e.g., NPS, ACCS, RPFT, SDS, AE-C, etc. preferred)
<b>Experience</b>	5 years' experience (2 years critical care or specialty care) and 2 years supervisory/lead experience	3 years' experience (2 years critical care or specialty care) and 2 years supervisory/lead experience
<b>Professional Affiliation</b>	AARC, CSRC, ATS, CTS, and/or CHEST	AARC, CSRC, ATS, CTS, and/or CHEST

The CSRC recognizes the following current and emerging trends that validate our position:

- California's January 1, 2015, implementation of RRT as a requirement for licensure.<sup>8, 9</sup>
- Healthcare focus shifting towards clinical management of chronic disease processes as a primary work requirement in healthcare.<sup>1, 5, 7</sup>
- An expanded patient care focus to include specialty areas such as sub-acute, rehabilitation, polysomnography and home care along with traditional hospital-based services.<sup>1, 2, 7</sup>
- Reimbursement changes focused on patient care outcomes, evidence-based treatment and effectiveness of protocol driven therapy.<sup>1, 2, 3</sup>
- Advancement of the profession and competency level to be consistent with recent changes adopted by Registered Nurses and Physical Therapists.<sup>6, 7</sup>

The CSRC expects the following benefits from this proactive position:

- Consumers – Value based care focused on leading to improved quality and safety across the healthcare continuum.<sup>5</sup>
- Practitioners - Confirmed advanced knowledge and skills required by the practitioners to provide quality care in all healthcare settings.<sup>2, 6</sup>
- Educators - Standardized and improved graduate competency level to perform effectively in current and future healthcare systems.<sup>4, 6</sup>



- Leaders - Leadership model adept in implementing and standardizing protocol-based care, systems-based delivery process, continuous quality improvement, organizational efficiency, and research.<sup>10</sup>

**Summary:**

The CSRC suggests and encourages decision makers hiring Respiratory Care leaders (hospitals, long-term acute care hospitals, subacute care facilities, PFT Labs, Sleep Centers, Home Care, Durable Medical Equipment, et. al) to adopt the above listed minimum requirements for their facilities, in order to improve quality and safety across the healthcare continuum. This action will effectively position the profession for current healthcare environments and align with the advancing healthcare industry.



## References

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