

Ken Levine
Director
Texas Sunset Commission
P.O. Box 13066
Austin, Texas 78711

June 9, 2014

Dear Mr. Levine,

As a licensed, practicing physician in Texas, I am very concerned and shocked about the suggestion of elimination of the licensure for Texas Respiratory Care Practitioners. I work extensively with RCPs in my practice and rely on the person in that role to be safe, experienced, competent and regulated by their scope of practice in Texas—as am I, the nurses I work with and the multitude of other health care providers.

In May 2014, the Sunset Advisory Commission Staff Report recommended to discontinue 19 regulatory programs currently housed at the Department of State Health Services (DSHS) which includes Respiratory Care Practitioners (RCPs) Program (Page 4, Issue 3 and Pages 106-108, Appendix E).

The Commission's reasons for eliminating this licensing program consist of the following summation:

1. That deregulation would have little impact on public health or safety
2. That RCPs operate in a highly regulated environment
3. That regulation is provided by another state or local regulatory program or private sector accreditation agency
4. That the current licensure division generates very little regulatory activity

Removing this RCP licensure does exactly the opposite of these stated reasons and would allow for untrained, inexperienced, un-credentialed persons in the state of Texas to treat our patients. These could be people who have a criminal history, who have little training (or NO training), who are unable to make critical decisions in high stress environments. The lack of a formal state licensure process in Texas would mean that RCPs' whom are incompetent, engaged in criminal activity, or have lost their license to practice in another state can work in Texas without any review or screening to protect the citizens of Texas. The national credentialing for the field does not allow for any regulation of activities, screening or ongoing review of Texas RCPs.

I do not want to prescribe my patients any respiratory therapy orders knowing an unlicensed individual will be giving the therapy. This is simply not safe.

In healthcare, it is very easy for outsiders to look in and make decisions without knowing all the details, the facts that make the system work. In this example, licensing and regulation of a hands-on, valuable, critical decision making healthcare provider is a minimal expectation a physician requires when ensuring his care and orders are being provided to his patients.

Please do not repeal the Respiratory Care Practitioners Certification Program Title 25, Texas Administrative Code Subchapter E, Chapter 140. Doing so will put every Texan at risk for unsafe care and every physician will be vulnerable to respiratory care that is substandard for his patients.

Respectfully submitted,

Roger Gleason, MD

- Pulmonologist
- Texas Pulmonary Consultants
- Medical Director, Respiratory Therapy Department