

From: [Sunset Advisory Commission](#)
To: [Janet Wood](#)
Subject: FW: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)
Date: Thursday, June 19, 2014 8:23:26 AM

-----Original Message-----

From: sundrupal@capitol.local [<mailto:sundrupal@capitol.local>]
Sent: Thursday, June 19, 2014 4:26 AM
To: Sunset Advisory Commission
Subject: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)

Submitted on Thursday, June 19, 2014 - 04:25

Agency: DEPARTMENT STATE HEALTH SERVICES DSHS

First Name: Donald

Last Name: Kubenka

Title: Respiratory Care Practitioner

Organization you are affiliated with:

City: Hutto

State: Texas

Your Comments About the Staff Report, Including Recommendations Supported or
Opposed:

Dear Senator or Representative,

I am writing this letter to express my concern and voice strong opposition to the proposal to discontinue Respiratory Care Practitioners (RCP) program currently regulated by the Texas Department of State Health Services (TSHS).

My colleagues and I believe that the Sunset Commission Committee does not have adequate information regarding the respiratory care profession, scope of practice for respiratory care practitioners, and patient safety practices that conflict with the proposal for discontinuing RCP licensing.

I have been a Respiratory Care Practitioner in the state of Texas for over 8 years in the Austin area. I am employed by a Neonatal and Maternal Transport Team that transports critical neonates and critical expecting woman from any hospital facility to an appropriate hospital that can meet the needs of this fragile population. Our transport method is by ambulance or helicopter. Our team is made up of a registered nurse and a Respiratory Care Practitioner that specializes in neonatal and maternal critical care. The Respiratory Care Practitioner position on our team is trained and practices neonatal and adult intubations, neonatal umbilical venous and arterial line placement, neonatal thoracentesis, neonatal peripheral intravenous access placement, attends high risk infant vaginal deliveries, attends all cesarean sections at our home hospital facility, neonatal and adult conventional ventilation management, neonatal high frequency flow interrupter management, neonatal nasopharyngeal prong CPAP management, and oxygen administration management.

All of our transport team's scope of practice is under a neonatologist and neonatal nurse practitioner or high risk OB physician. Due to our highly critical care environment a high degree of education and clinical skill is necessary in treating our neonatal and maternal populations. This requires respiratory care practitioners on our transport team to exercise a high level of independent judgment. Our team deals everyday with high acuity patients and

surroundings. We expect to have the best of respiratory care practitioners and nurses that we can find. We believe that the deregulation of RCP licensing program would lower expectations for the scope of respiratory therapy. We want the best RCPs caring for our smallest of infants!

There are currently 14,986 Respiratory Care Practitioners currently licensed by the Texas Department of State Health Services. To become a Respiratory Care Practitioner in the state of Texas one must pass an accredited National Board for Respiratory Care (NBRC) college or university program and obtain an associates, bachelors, or master's degree in the science of respiratory care. Then, pass the NBRC national board exam for a Certified Respiratory Therapist (minimum credential) or Registered Respiratory Therapist credential. The National Board for Respiratory Care is a voluntary credentialing agency that administers credentialing exams to those who graduate accredited college or university programs. The NBRC cannot check criminal or abuse backgrounds of individuals applying for a voluntary credentials. Only licensing boards may perform criminal background checks.

The National Board for Respiratory Care cannot legally enforce actions taken against a respiratory care practitioner who commits practice offences or demonstrates behavior that would cause someone to question a practitioner's ability to perform their duties in a professional and competent manner.

There are 49 states, District of Columbia, Puerto Rico, and Guam that Respiratory Care Practitioners are licensed by the state. At present, Alaska is in the process of addressing state licensure for RCPs. If Texas were to repeal licensure, it would draw individuals who do not meet their own state's qualifications for licensure! Texas would attract those who have committed an act that would render them ineligible for licensure in other states.

My colleagues and I are strongly opposed to the deregulation and de-licensing of Respiratory Care Practitioners in Texas. Texas Respiratory Care Practitioner licensure is imperative in protecting our public's health and safety. We strongly feel that the Sunset Commission should remove Respiratory Care Practitioners from the list of health care professions recommended to be discontinued.

Respectfully,

Donald Kubenka, RRT-NPS, RCP

Any Alternative or New Recommendations on This Agency:

We strongly feel that the Sunset Commission should remove Respiratory Care Practitioners from the list of health care professions recommended to be discontinued.

My Comment Will Be Made Public: I agree