

From: [Sunset Advisory Commission](#)
To: [Janet Wood](#)
Subject: FW: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)
Date: Tuesday, June 24, 2014 4:11:18 PM

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

From: sundrupal@capitol.local [<mailto:sundrupal@capitol.local>]
Sent: Monday, June 23, 2014 6:46 PM
To: Sunset Advisory Commission
Subject: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)

Submitted on Monday, June 23, 2014 - 18:45

Agency: DEPARTMENT STATE HEALTH SERVICES DSHS

First Name: Peter

Last Name: Lockett

Title: Professor of Pediatrics and Medical Director of Respiratory Care Children's Medical Center Dallas

Organization you are affiliated with: UT Southwestern Medical Center

City: Dallas

State: Texas

Your Comments About the Staff Report, Including Recommendations Supported or
Opposed:
June 20, 2015
Senator Jane Nelson
Chair
The Texas Sunset Advisory Commission
P.O. Box 13066, Austin, Texas 78711

To the Honorable Jane Nelson:

I am writing you regarding the recommendation of your committee to de-license respiratory care practitioners (RCP) in the state of Texas. I have been a Pediatric Pulmonologist since 1984 when I finished my fellowship at Babies Hospital at Columbia University in New York City. In addition to pulmonary practice I have been in full time practice of Pediatric Critical Care since 1989 when I helped organize a pediatric critical care unit and a fellowship-training program at Harbor – UCLA Medical Center in Torrance, CA. I am a Professor of Pediatrics at UT Southwestern Medical Center in Dallas and have been a faculty member practicing Pediatric Pulmonary Medicine and Pediatric Critical Care since 1993. I have also served as the Medical Director of Respiratory Care since 1997.

I believe that the proposal to de-license Respiratory Care Practitioners if acted on would lead to multiple unintended negative consequences. Respiratory care training occurs at the college level and can vary from 2 to 4 years. All of the therapists who work in our hospital have achieved full Registry status and many have completed the BS degree. This is similar to the training that nursing requires. These therapists are then trained further for their specific roles within the institution. We maintain strict compliance with competencies for our staff. The RCP cares for the respiratory needs of our patients across the entire hospital day and night seven days a week. They have a critical

role in the care of our patients in the ED, ICU, on the floor and in our clinics. At our institution RCPs play a vital role in assessment, treatment recommendation and delivery of safe bedside therapy to our patients, many who are critically ill. RCPs are members of important emergency response teams including: hospital disaster response team, cardiac arrest team, and rapid assessment team, level one trauma team and high risk delivery team. In these roles and others the RCP is frequently at the bedside providing treatment for patients who are acutely decompensating. They often initiate (per protocol) or recommend life saving measures for many types of patients with and without lung disease. RCP's provide therapeutic procedures, invasive and non-invasive procedures, diagnostic testing, management and troubleshooting of mechanical ventilators (life support system) and delivery of medications for the treatment of asthma, COPD, and other pulmonary diseases. Many of these technological advancements in the field of medicine require the unique level of expertise possessed by the RCP to deliver high quality patient care safely.

As described above RCPs are important members of healthcare teams at our institution. Removal of the licensure process for respiratory care practitioners in Texas would most certainly endanger the health, safety and welfare of the patients that we serve. Moreover, the current state license allows RCPs to manage patients utilizing protocol directed therapy approved

by medical leadership. RCP driven protocols have been shown to be safe and effective in the medical literature. RCP directed protocols lead to better outcomes and more economical medical care. De-licensing RCPs will increase the cost of care, increase hospital length of stay, and decrease provider productivity. De-regulation of these healthcare professionals would certainly be a step backwards for acute health care in the state of Texas. It would make Texas an outlier with respect to this important profession. We depend on the licensing process to help us maintain the highest standards of healthcare. It is my professional opinion that in order for our institution to maintain a safe, patient centered, patient focused and trustworthy atmosphere for our patients, we require licensed, professional respiratory therapists as a part of our healthcare team. In the absence of this most basic requirement, it will become increasingly difficult to maintain a high standard as individuals that have had difficulty becoming or remaining licensed dilute the pool of qualified candidates. Therefore, I urge you to maintain mandatory respiratory care practitioner state licensure for Respiratory Therapists in the state of Texas.

Respectfully,

Peter M. Lockett M.D.

Professor of Pediatrics

UT Southwestern Medical Center

Medical Director of Respiratory Care

Children's Medical Center Dallas

Any Alternative or New Recommendations on This Agency: Contrary to the current proposal steps should be taken to support the professionalism of this important group of practitioners.

My Comment Will Be Made Public: I agree