

HOUSE BILL REPORT

HB 2078

As Reported By House Committee On:
Health Care

Title: An act relating to respiratory care.

Brief Description: Modifying regulation of respiratory care practitioners.

Sponsors: Representatives Dyer and Thibaudeau.

Brief History:

Committee Activity:

Health Care: 2/1/96, 2/2/96 [DPS].

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 11 members: Representatives Dyer, Chairman; Hymes, Vice Chairman; Cody, Ranking Minority Member; Murray, Assistant Ranking Minority Member; Campbell; Casada; Conway; Crouse; Morris; Skinner and H. Sommers.

Minority Report: Do not pass. Signed by 2 members: Representatives Backlund, Vice Chairman; and Sherstad.

Staff: John Welsh (786-7133).

Background: Currently, respiratory care practitioners are certified by the Department of Health for practice. The Secretary acts as the disciplinary authority. An ad hoc advisory committee advises the Secretary on the implementation and operation of the regulatory program.

Respiratory care practitioners work under the direct order and supervision of physicians, and are employed in the treatment, management, diagnostic testing, rehabilitation, and care of patients with deficiencies and abnormalities affecting the cardiopulmonary system.

Summary of Substitute Bill: A licensure program for practicing respiratory care is established to be administered by the Secretary of Health, and only licensed respiratory care practitioners may practice in this state unless exempted by law.

The respiratory care scope of practice is expanded to include the insertion of devices for drawing and analyzing venous blood, and the diagnostic monitoring of and therapeutic interventions for aiding the physician in diagnosis.

Exemptions from licensure are provided to other licensed practitioners, employees of the federal government, students and trainees in respiratory care, registered nurses employing the title, and for family members.

Applicants for licensure must have completed an approved school program with a two-year curriculum.

The Secretary is authorized by rule to establish requirements for continuing education.

Substitute Bill Compared to Original Bill: The authority of the ad hoc committee to expand the scope of practice by rule is deleted. The effective date is moved from 1995 to 1996.

Appropriation: None.

Fiscal Note: Not requested.

Effective Date of Substitute Bill: The bill takes effect July 1, 1996.

Testimony For: Over time the practice of respiratory care has changed and requires skills which are more intrusive and, consequently, increase risks to the safety of the patient. Licensure is an appropriate form of regulation for this health profession.

Testimony Against: The sunrise report on this bill, requested by the House Health Care Committee from the Department of Health and Board of Health, recommended against licensure.

Testified: Jeff Larsen, Washington Society of Respiratory Care Practitioners; Steve Borudrowitz, Department of Health; and Jerry Luedke, Respiratory Care Society of Washington.