The Connecticut Hospital Association (CHA) appreciates the opportunity to submit testimony concerning **HB 6618, An Act Concerning Various Revisions To Public Health Related Statutes**. CHA has concerns about two sections of the bill: Sections 2 and 5.

Section 2 discusses the patient care team parameters for patients on oxygen, as set forth in general statutes Section 19a-903b, and includes a technical correction to the title of a nuclear medical “technologist” (instead of “technician”). CHA fully supports that technical change.

We suggest, however, that an additional revision to the patient care team parameters in 19a-903b would better align the law with current practice in hospitals. Specifically, with respect to the transport of patients on portable oxygen, the law should be revised to expressly permit a person who is authorized by a hospital to transport a patient with a portable oxygen source. This would be accomplished by changing Section 2 of HB 6618 to state as follows:

Sec. 2. Section 19a-903b of the general statutes is repealed and the following is substituted in lieu thereof **(Effective October 1, 2011)**:

A hospital, as defined in section 19a-490b, may designate any licensed health care provider and any certified ultrasound or nuclear medicine [technician](#) technologist to perform the following oxygen-related patient care activities in a hospital: (1) Connecting or disconnecting oxygen supply; (2) [transporting a portable oxygen source; (3)] connecting, disconnecting or adjusting the mask, tubes and other patient oxygen delivery apparatus; and [(4)] (3) adjusting the rate or flow of oxygen consistent with a medical order. Any person authorized
by a hospital may transport a patient with a portable oxygen source. Such provider or technician may perform such activities only to the extent permitted by hospital policies and procedures, including bylaws, rules and regulations applicable to the medical staff. A hospital shall document that each person designated to perform oxygen-related patient care activities has been properly trained, either through such person’s professional education or through training provided by the hospital. In addition, a hospital shall require that such person satisfy annual competency testing. The provisions of this section shall not apply to any type of ventilator, continuous positive airway pressure or bi-level positive airway pressure units or any other noninvasive positive pressure ventilation.

Section 5 of HB 6618 attempts to mandate that every licensed health care provider report, under oath, concerns about the capability of all other health care providers to the DPH. This section should be deleted in its entirety because it would substantially interfere with numerous other existing rights, including due process and peer review, and also because the language is too broad.

At a minimum, if you do not strike this section entirely, we strongly recommend that it be made permissive, not mandatory, and include protections for existing law such as peer review and credentialing, as indicated in the following revision (deleted language appears with strikethrough, added language is underlined):

Sec. 5. (NEW) (Effective October 1, 2011) A health care professional with information which appears to show that another health care professional is or may be unable to practice with reasonable skill and safety due to (1) physical illness or loss of motor skills, including, but not limited to, deterioration through the aging process, (2) emotional disorder or mental illness, or (3) chemical dependency may, not later than thirty days after obtaining such information, file a petition with the Department of Public Health. Such petition shall be filed on forms supplied by the department, shall be signed and sworn to, and shall set forth in detail the matters complained of. Nothing herein shall affect the protections set forth in section 19a-17b of the general statutes, or any other statutory or common law that provides protection for reports to a public agency.

Thank you for your consideration of our position.

For additional information, contact CHA Government Relations at (203) 294-7310.

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