



CONNECTICUT CENTER
FOR PATIENT SAFETY
QUALITY HEALTHCARE IS A RIGHT.

House bill 7155
March 14, 2007
Public Health Committee

Testimony submitted by Jean Rexford, Executive Director

The CT Center for Patient Safety, representing the health care consumer, opposes House Bill 7155 in its current form. We want impaired and addicted health care professionals to get help. Two of our members have family members who are in permanent vegetative states because of an impaired anesthesiologist who had an ongoing problem with drugs. Four children are being raised without their mothers.

The health care consumer needs a seat at the table that has been trying to hammer out a solution to a very serious problem. But we do not want CT to move against a standard that is almost national as 36 states work toward the system endorsed by the Federation of State Medical Boards. Over the last ten years, due in part to the work of Dr Lucian Leape, Harvard School of Public Health, we have a better understanding of the impaired physician. Dr Leape believes that while the environmentally induced problems such as fatigue, stress, isolation and easy access to drugs contribute to dependency for physicians, the over all rate is probably comparable to the public – 10% become addicted. He does note that the rate of suicide is 40 % higher in male physicians and more than two-fold higher in female physicians than in the general population. Yes, we want these people to get help and we want co-workers to intervene. We do not want the public to be at the receiving end of their “care.”

CT Center for Patient Safety would like to see changes in three areas of the proposed bill.

Funding
Contractual agreement
Consumer representation on the oversight committee

1. Funding is absolutely essential for a successful program. Funding in some states is supported by a dedicated portion of the licensing fee. CT could do the same.
2. Without a contract we are a “trust me” state –trusting the program to do the right thing. We need greater accountability and we know that in other states that relied on “trust me”, it did not work and those states moved to contracts. The health

care professional should sign a contract with his society agreeing to a course of action and the society needs to have a contractual agreement with the Department of Health. Let's do it now and keep unsafe practioners who need to be referred for disciplinary action from harming CT residents.

3. Currently there is no health care consumer represented on the oversight committee. There are many informed and concerned health care consumers who would be an asset to that committee.

Please do not send this legislation out of committee in its present form. Yes to helping addicted health care providers. This legislation does not reflect a standard of care nor professionalism that the CT Center for Patient Safety believes CT residents and the health care consumer deserve.