

Approved March 15, 1989
Date

MINUTES OF THE Senate COMMITTEE ON Agriculture

The meeting was called to order by Senator Allen at
Chairperson

10:08 a.m./~~p.m.~~ on March 14, 1989 in room 423-S of the Capitol.

All members were present ~~except~~

Committee staff present: Raney Gilliland, Legislative Research Department
Lynne Holt, Legislative Research Department
Jill Wolters, Revisor of Statutes Department

Conferees appearing before the committee: Max Foster, Director, Division of Laboratories,
State Board of Agriculture
Joseph Bailey, D.V.M., Chairman, Impaired
Veterinarians' Committee, Kansas
Veterinary Medical Association
Gerald Gurss, D.V.M., Kansas Veterinary Medical
Association
Frank Solomon, Jr., D.V.M., President, Kansas
Veterinary Medical Association
Tom Vincent, D.V.M., Executive Director, Kansas
Board of Veterinary Examiners
Wilbur Leonard, Committee of Kansas Farm
Organizations

Senator Allen called the committee to order and attention to HB 2133 and then called on Max Foster to testify for the bill.

Mr. Foster gave copies of his testimony (attachment 1) to the committee. Mr. Foster provided a sample of native seeds such as the laboratory receives for analysis and explained that it takes from 2 to 10 hours to analyze such a sample. Mr. Foster explained that the proposed fee charges in HB 2133 would allow the charges for seed analysis to be such as to cover costs. Mr. Foster answered that about 15% of the seeds they test are native seeds.

The Chairman declared the hearing closed for HB 2133 and turned committee attention to HB 2424 and then called on the following to testify in support of HB 2424.

Dr. Bailey gave copies of his testimony to the committee (attachment 2) and requested committee support for HB 2424 and that the committee recommend passage.

Dr. Gurss provided the committee with copies of his testimony (attachment 3). Dr. Gurss gave the committee copies of testimony for Dr. Solomon who could not be present for the hearing (attachment 4) and for Dr. Vincent who could not be in attendance to present his testimony (attachment 5). Dr. Gurss requested passage of HB 2424, a bill that would help the Veterinary Board of Examiners carry out their duties and also would provide protection for the general public.

Wilbur Leonard gave the committee copies of his testimony (attachment 6) and expressed support for HB 2424 and requested the committee recommend passage.

The Chairman declared the hearing closed for HB 2424 and called for committee action on HB 2133.

CONTINUATION SHEET

MINUTES OF THE Senate COMMITTEE ON Agriculture

room 423-S, Statehouse, at 10:08 a.m.~~pm~~ on March 14, 1989

During committee discussion it was pointed out that the new fee rates would allow for charges to be raised and that increased charges would only be charged when needed; also it was pointed out that different rates are charged for different seed testing depending on the time it takes to do an analyses. Senator Montgomery made a motion the committee recommend HB 2133 favorably for passage. Senator Daniels seconded the motion. Motion carried.

The Chairman called for committee action on HB 2424.

Senator Montgomery made a motion the committee recommend HB 2424 favorable for passage; seconded by Senator Karr; motion carried.

The Chairman called for committee action on committee minutes.

Senator Lee made a motion the committee minutes of March 2 be approved; seconded by Senator Francisco; motion carried.

Senator Allen adjourned the committee at 10:46 a.m.

Testimony on
House Bill 2133

Presented
to the
Senate Committee on Agriculture

By

Mr. Max Foster
Director, Division of Laboratories
Kansas State Board of Agriculture

14 March 1989

*Senate agriculture
3-14-89
attachment |*

THANK YOU MR. CHAIRMAN AND COMMITTEE MEMBERS FOR ALLOWING ME TO PROVIDE TESTIMONY ON HOUSE BILL 2133. MY NAME IS MAX FOSTER, THE DIRECTOR OF THE DIVISION OF LABORATORIES OF THE STATE BOARD OF AGRICULTURE.

HOUSE BILL 2133 WOULD PROVIDE FOR AN INCREASE IN THE STATUTORY MAXIMUM LIMITATION ESTABLISHED FOR FEES CHARGED FOR TESTS AND EXAMINATIONS OF SEEDS BY THE KANSAS STATE BOARD OF AGRICULTURE'S LABORATORY. THE INCREASE WOULD RAISE THAT MAXIMUM LEVEL FROM \$20.00 PER TEST OR EXAMINATION TO \$45.00 PER TEST OR EXAMINATION. IT IS NECESSARY FOR SUCH AN UPWARD MOVEMENT OF THE FEE STRUCTURE TO ESTABLISH WITHIN THE BOARD OF AGRICULTURE'S LABORATORY A MORE COST REFLECTIVE LEVEL OF CHARGES FOR TESTS PERFORMED IN THE AREA OF SEED EXAMINATION.

THE STATE SEED LABORATORY HAS BEEN ON A SELF-SUPPORTING BASIS; THIS INCREASE IN FEES WOULD HELP TO CONTINUE THAT BASIS. FROM 1961 FORWARD, NO CHANGES HAVE BEEN MADE IN THE LIMITS ALLOWED ON FEES FOR SEED TESTING AND EXAMINATION.

WE BROUGHT A SAMPLE OF NATIVE GRASS WITH US TODAY. IT IS THIS CROP THAT WILL BE MOST AFFECTED BY THIS CHANGE. ABOUT 1000 NATIVE GRASS SAMPLES WERE ANALYZED LAST YEAR; SOME OF THESE SAMPLES CAN TAKE UP TO 10 HOURS TO EXAMINE. IT IS THIS TIME RELATIONSHIP WHICH CAUSED US TO ASK FOR AN INCREASE IN THE MAXIMUM LEVEL TO \$45.00.

THE KANSAS CROP IMPROVEMENT LABORATORY'S FEES ARE EQUAL TO THE BOARD OF AGRICULTURE'S EXCEPT FOR AN HOURLY RATE FOR NATIVE GRASS EXAMINATION AT \$12.00 PER HOUR.

THE NEBRASKA DEPARTMENT OF AGRICULTURE'S FEES ARE SLIGHTLY HIGHER, WITH AN HOURLY RATE FOR NATIVE GRASS.

IOWA STATE UNIVERSITY LABORATORY'S ARE 30-40% HIGHER, WITH AN HOURLY RATE FOR NATIVE GRASS.

SOUTH DAKOTA'S AGRICULTURE LABORATORY'S FEES ARE 30% HIGHER, WITH AN HOURLY RATE FOR NATIVE GRASS.

COLORADO'S AGRICULTURE LABORATORY'S FEES ARE 40-50% HIGHER, AND HAS AN HOURLY RATE FOR NATIVE GRASS.

OKLAHOMA'S AGRICULTURE LABORATORY'S FEES ARE 40-50% LOWER.

THUS, SUCH A INCREASE WOULD ALLOW THE STATE BOARD OF AGRICULTURE'S SEED LABORATORY TO RECOVER ITS COST OF OPERATION AND REMAIN FEE COMPARABLE TO OTHER LABORATORIES TESTING SEED.

THANK YOU MR. CHAIRMAN AND MEMBERS OF THE COMMITTEE FOR ALLOWING ME TO APPEAR BEFORE YOU TODAY, I STAND OPEN FOR QUESTIONS.

4-2-17a. Schedule of charges for seed tests. (a) Any person may submit to the state seed laboratory samples of agricultural seed for germination, purity tests, or both, or other examination and receive the test upon paying to the secretary a fee per sample, test or examination. The following charges shall be made for all seed tests on samples submitted to the state seed laboratory:

KIND	PURITY ONLY WITH		NOXIOUS WEEDS	
	NOXIOUS WEED EXAMINATION	GERMINATION ONLY	FULL TEST	EXAMINATION ONLY
AUS. WINTER PEAS	\$ 9.00	\$5.00	\$14.00	-----
ALFALFA	10.00	5.00	15.00	5.00
AGROTIRITICUM	9.00	5.00	14.00	5.00
BARLEY	9.00	5.00	14.00	5.00
BLUESTEM (BIG, LITTLE, CAUC.)	25.00	20.00	45.00	5.00
BERMUDA & BENTGRASS	12.00	5.00	17.00	5.00
BLUEGRASS, REDTOP	12.00	5.00	17.00	5.00
BUFFALOGRASS	11.00	11.00	22.00	5.00
BROMEGRASS	12.00	6.00	18.00	5.00
CANARYGRASS	9.00	6.00	15.00	5.00
CLOVERS	10.00	5.00	15.00	5.00
CORN	-----	5.00	-----	-----
CORDGRASS	13.00	6.00	19.00	5.00
COWPEAS	7.00	5.00	12.00	5.00
DROPSEED	11.00	8.00	18.00	5.00
FESCUE	10.00	5.00	15.00	5.00
BLUE GRAMAGRASS	17.00	12.00	29.00	5.00

GAMAGRASS	9.00	13.00	17.00	5.00
INDIANGRASS	25.00	20.00	45.00	5.00
LESPEDEZA	10.00	5.00	15.00	5.00
LOVEGRASS	11.00	8.00	18.00	5.00
MILLETS	8.00	5.00	13.00	5.00
OATS	9.00	5.00	14.00	5.00
ORCHARDGRASS	12.00	6.00	18.00	5.00
RAPE SEED	10.00	6.00	16.00	5.00
CANARYGRASS	9.00	6.00	15.00	5.00
RYE	9.00	5.00	14.00	5.00
RYEGRASS	11.00	5.00	16.00	5.00
SUNFLOWER	8.00	5.00	13.00	5.00
SORGHUM	9.00	5.00	14.00	5.00
SOYBEANS	9.00	5.00	14.00	-----
SAND DROPSEED	11.00	8.00	18.00	5.00
SUDANGRASS	9.00	5.00	14.00	5.00
SWITCHGRASS	10.00	7.00	17.00	5.00
TIMOTHY	8.00	5.00	13.00	5.00
VETCH	7.00	5.00	12.00	5.00
VETCH (CROWN)	10.00	5.00	15.00	5.00
WHEAT	9.00	5.00	14.00	5.00
WHEATGRASSES	13.00	7.00	20.00	5.00
TRITICALE	9.00	5.00	14.00	5.00
SIDEOATS GRAMA	25.00	20.00	45.00	5.00
PRAIRIE CONEFLOWER	10.00	5.00	15.00	5.00
WINTERBERRY EUONONYMUS	10.00	5.00	15.00	5.00

VEGETABLES	-----	5.00	-----	-----
CREEPING FOXTAIL	-----	7.00	-----	-----

Fees for examining or testing crops not listed shall be charged at same rate as for similar species listed.

(b) Special services and tests. Mixtures shall be charged at 50% over normal rate of purity separations, plus an additional 50% of the normal germination charge for each additional crop specie germinated.

(1) "Purity ahead" on written report. A charge of \$5.00 shall be made for each purity report that is prepared and mailed prior to germination report.

(2) "Purity ahead" or any other information requested by telephone. A charge of \$1.00 shall be made for each long distance telephone call via the Kans-a-n system.*

(3) "Tetrazolium test". "Tetrazolium tests" (TZ tests) shall be handled as a rush service whenever possible. TZ testing shall be limited to small grains, corn, soybeans, sorghums, bromegrass, fescues and switch-grass. The charge shall be \$10.00. All results of TZ tests will be reported by telephone free of charge.

(4) "Soybean stress test". The charge for AA-stress test will be \$5.00 is submitted separately, or \$9.00 for both an AA test and a standard germination performed on the same sample concurrently.

(5) "All states noxious weed examination". The charge for this test shall be \$5.00 extra per sample.

(6) "Any state noxious weed examination". The charge for this test shall be \$5.00 extra per sample.

(7) "Excessive time". No additional charge will be made for difficult samples when the seed appears to be fit for seeding purposes or when the seed can be processed to a salable quality.

(8) "Caryopsis count Buffalo grass". The charge for this test shall be \$10.00 extra per sample.

(9) "Filled seed count". The charge for this test shall be \$5.00 extra per sample.

(10) "Rush charge". The charge for this service shall be \$5.00 extra per sample. This charge shall apply to all tests for which expedited service is requested.

(c) This regulation shall be in force and effect on and after July 1, 1989.

Authorized and implementing K.S.A. 2-1425 as amended by 1989 HB 2133;
effective T - _____, _____; effective P _____.)

TO: AGRICULTURE ~~AND BUSINESS~~ COMMITTEE
OF THE KANSAS SENATE

FROM: JOSEPH BAILEY, D.V.M.
CHAIRMAN
IMPAIRED VETERINARIANS' COMMITTEE
KANSAS VETERINARY MEDICAL ASSOCIATION

SUBJECT: REQUESTING PASSAGE OF HOUSE BILL 2424

I would ask for your consideration in the passage of House Bill 2424. This legislation is intended to assist in the efforts of developing a Peer Assistance Program for the Kansas Veterinary Community.

OCCASION FOR AN IMPAIRED VETERINARIANS COMMITTEE

The Impaired Veterinarians' Committee of the Kansas Veterinary Medical Association has been appointed since December 1986. The occasion for appointment was the untimely death of a colleague.

INTENT OF THE COMMITTEE

The intent of this committee has been to encourage awareness of wellness themes, and to assist in implementing educational, informational, and peer assistance programs on impairment issues. The American Veterinary Medical Association has had in place an Impaired Veterinarians' Committee. This Kansas Committee has followed the "Model Program" as suggested by the A.V.M.A. Committee (copy attached). At last report there are 46 state veterinary programs established or in the process of organization. This committee has surveyed existing peer assistance programs in an effort to develop a successful program for Kansas Veterinarians. Our efforts have brought us to this committee to gain the necessary legislation that would initiate peer assistance programs for Kansas Veterinarians.

Impairment results from anxiety, depression, chemical dependence, mental and physical disabilities, and many other causes. It is recognized that impairment is not an individual condition. Many times, close associates, family, and friends may become entangled in the impairment process. Fortunately, if an impairment is recognized, early treatment can be highly successful. Untreated cases of impairment too often have a prognosis of worsening symptoms leading to death. Veterinarians are as easily subject to impairment as other health care professionals. Access to drugs and pressures of solo practices may lead to increased risk for impairment from drug dependencies.

NEED FOR LEGISLATION

Legislation enacted in 1986 and 1988 gave opportunity for other health care professions to implement peer assistance programs. Our committee has been advised that the legislation provided for in House Bill 2424, would allow the Kansas Board of Veterinary Examiners to implement such a peer assistance program.

Senate agriculture
3-14-89
attachment 2

COOPERATIVE EFFORTS OF THE KANSAS VETERINARY COMMUNITY

House Bill 2424 will establish the procedures for executive, review, or impairment committee activities. These actions are expected to be cooperative efforts by the Kansas Board of Veterinary Examiners and the Kansas Veterinary Medical Association through the aforementioned committees.

SECTION 1: defines those recognized entities involved in this legislation. The Kansas Board of Veterinary Examiners is the legal authority of licensed veterinary practitioners in Kansas. As a sponsor of impairment activities for the veterinary community, essentially, this legislation enables all Kansas veterinarians to be included.

SECTION 2: describes the process of reporting individuals that may be in need of assistance, the proper routing of reports and subsequent actions by committee and appropriate protection that some action will be taken by an appointed committee.

SECTION 3: contains a number of items giving the Kansas Board of Veterinary Examiners a process to implement and/or contract with existing programs pertaining to fact finding and verification of reported incidences of impairment. Included would be professional assistance for intervention if necessary, as well as assistance in establishing a reentry into the profession following treatment, with monitoring, support and assistance. Reports of committee activities and non-cooperative impaired individuals would be referred to the Board. Steps 1 - 7, outlined in Section 3, have been shown to be essential elements of a successful impairment program. It is imperative that an impaired individual receive treatment, and be provided professional support and assistance into recovery.

SECTION 4: pertains to the confidentiality of individual participants of a peer assistance program, especially in the reports of executive, or review, or impairment committee actions. Confidentiality is essential for any impairment program to gain credibility and to be able to provide assistance for impaired individuals especially where a license and livelihood are involved.

SECTIONS 5, 6, 7, & 8: pertain to the safety from liability "for acts of good faith" regarding participants in reporting alleged impaired individuals. Protection and recourse is provided to employees acting in good faith to report a suspected impairment. This is similar to protection afforded other health care professionals and encourages early reporting of an individual who is impaired. Early recognition and treatment enhances the recovery of an impaired individual.

I would ask for your support in the passage of House Bill 2424 as a necessary step in allowing veterinarians the development of peer assistance programs.

FACT FINDING AND VERIFICATION

- Responsible person/committee member should immediately visit the referring person to gather facts and background information.
- Information gathered should be reduced to time, date, and place of significant incidents, and limited to absolute facts.
- Fact finding should take a minimum of 4 hours, and probably more.
- Significant or meaningful individuals should be contacted to confirm initial findings.
- Employees interviewed may be reluctant to participate because of potential for loss of employment. Interviewers should make employees aware of this potential.
- Primary information to be collected should include:
 - What prompted referral? What happened? How? Why?
 - Who is most affected? Spouse? Children? Colleagues? Clients? Employees?
 - Family history – Others in family involved with drugs or alcohol? Other background?
 - Meaningful or most significant person or persons in impaired individual's life. (employer, colleague, employee, spouse, personal friend, representative of the state licensing authority, etc.).
 - Other persons who are important to the impaired individual.
 - Insurance Coverage or other means available to cover cost of treatment for the impaired individual.²

Group Insurance covers cost of treatment for impaired individuals who patients in an approved treatment and rehabilitation center. Limited out-patient after-care coverage is also provided.

- 2-3
- Primary information (continued)
 - Availability of hospital or treatment center.
 - Persons available to cover impaired veterinarian's practice.
 - Alternative arrangements for contingencies.
 - Personal information:
 - Is affected individual requesting help?
 - Is affected individual remorseful? Suicidal? Impaired driving record?
 - Can affected individual withstand pressure of intervention?
 - Will intervention be a surprise to affected individual?
 - Has affected individual —
 - had blackouts, i.e. periods of memory loss?
 - missed work or appointments?
 - failed to answer telephone or taken it off hook for extended periods?
 - abused anyone?
 - Does affected individual have medical problems? Ulcer history? Is he or she seeing a physician?
 - Are there financial problems, excessive spending?
 - Are spouse and family prepared for "rough" phases of intervention and treatment process?
 - Primary chemical or chemicals involved.³
 - How chemicals are used.
 - Fact finding and verification should be followed as soon as possible by intervention.

³Note: This and other questions are very important to the physician and treatment center during detoxification and later treatment, and should not be viewed as simple curiosity.

INTERVENTION

- **Intervention team must consist of a minimum of two persons, one of whom is a recovering individual.**
- The interviewer/fact finder (usually a member of the permanent committee) assembles the intervention team, and may serve as team leader.
- The intervention team's composition is dependent upon facts available, but should include meaningful individuals who will have a specific role in the intervention. Depending upon circumstances, experienced/instructed individuals on the permanent committee need not actually participate in intervention.
- Persons with a punitive intent or excessive sympathy toward the impaired individual should be **excluded** from the intervention team.
- Prior to intervention, the team should rehearse "role playing" assignments and be prepared for alternatives during the actual confrontation. Use notes, if needed.
- Actual intervention must take place in an atmosphere of firm but loving care for the affected individual.
- Confrontation (actual intervention) should take place in neutral surroundings, possibly not the individual's home.⁴

⁴The person's office or the office or home of a colleague or friend may be more appropriate. The time and place of the confrontation should be determined during fact finding and role playing.

DISCOVERING (IDENTIFYING) IMPAIRED INDIVIDUALS

- **Absolute confidentiality is the most important feature of any successful program.¹**
- Referral of an impaired person to a program may be done by the affected person, a family member, colleague, close friend, or a state licensin agency.
- Telephone hotlines, preferably manned on a 24-hour basis, should be part of any successful program. When 24-hour coverage is not possible, one or two alternative telephone numbers of persons intimately involved with the program should be publicized.
- Information about the program and, when indicated, immediate personal assistance should be promptly furnished to persons who contact the telephone hotline or other individuals intimately concerned about helping impaired individuals.
- Referrals from state licensing agencies should be received with the understanding that the agency will not interfere with an impaired person who is undergoing treatment so long as satisfactory progress is being made.
- Verifying the facts in each case and confronting the impaired individual with the facts (called "intervention") should always follow discovery unless t/ impaired individual goes immediately into treatment or begins a, Alcoholics/Narcotics Anonymous program.

¹Several states have laws that protect recovering persons under treatment from being reported to state licensing agencies and from any action licensing agency so long as the individual is making progress in an im, professionals program.

FUNDING IMPAIRED PROGRAMS

Impaired programs need money to cover travel expense for persons involved with program function, development of educational and promotional materials, and presentation of conferences and workshops. In addition to funds from veterinary medical and auxiliary associations, financial support for impaired programs may be available from health and malpractice insurance carriers, pharmaceutical firms, and private foundations.

PREVENTION

- Brochures and other educational materials describing the problem of chemical impairment and the impaired veterinarian's program have been developed for distribution to state associations by AVMA. A resource manual for state committees can be obtained by contacting AVMA.
- **Every state association should organize and fund a permanent committee on impaired veterinarians, consisting of at least two persons.** (Some associations may establish several permanent committees to cover specific geographic regions within the state.)
- **Auxiliary support** and cooperation will be important to the success of state programs. When a person is chemically impaired, spouses and family members are usually those most affected. Auxiliary members should be on the program's committee.
- Educational programs for animal technology and veterinary students should be included in impaired programs.
- Conferences and workshops to discuss chemical impairment and publicize the program should be held.
- Publicity about the program should appear periodically in veterinary, auxiliary, student, and animal technician publications.
- Veterinary convention booths sponsored by state association committees on impaired veterinarians are an important means of publicizing the assistance available to impaired individuals, their families, friends, and associates.

- 2-4
- During the confrontation, the intervention team should state the facts of the impaired person's condition, recommend treatment, and be prepared to "close off escape routes" by having solutions available for real or imagined reasons why the individual cannot start treatment immediately. The recovering individual on the intervention team will be familiar with various evasion tactics that are likely to ensue.
 - **Once the individual has agreed to treatment, a team member should always accompany the person to the hospital or treatment center. Transportation and admission to a treatment center should take place immediately.**
 - The intervention team must be prepared for emotional outbursts by the impaired individual including denial, disbelief, anger, aggression, refusal, and/or self-destructive impulses.
 - Suicidal tendencies are prevalent among impaired individuals. The intervention team must be aware that such tendencies are not necessarily exacerbated by the confrontation/intervention process, but that impaired individuals may exhibit suicidal impulses. Nevertheless, the intervention team should not be diverted from its primary goal – to get the individual into treatment.
 - Unsuccessful intervention may be successful at a later time. An impaired person who refuses treatment may be subject to being reported to the state licensing agency. If unsuccessful, follow-up contact should be maintained at timely (monthly) intervals via telephone or personal visits.
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TREATMENT

- In-patient therapy at approved alcohol and drug treatment and rehabilitation centers is highly recommended. Most courses of therapy include four days of hospitalized detoxification followed by a competent evaluation and four weeks to four or more months of therapy in a treatment center.
- Appropriate follow up in an alcoholic or narcotics rehabilitation program is a mandatory component of a successful program for impaired individuals, and may include participation in special professional programs specified by the appropriate authority.
- Non-resident therapy for impaired individuals is usually less than satisfactory. Some state laws require in-patient therapy for licensed professionals.
- Concomitant therapy for family members must also be included in a successful program.
- The impaired person who drops out of the program may be subject to being reported to the state licensing authority. Many insurance companies will not honor claims from persons who have dropped out of in-patient treatment and therapy programs.
- Persons who drop out of courses of therapy should be encouraged to begin the program again. Many impaired individuals who are recovering successfully have reentered the program several times before being able to make it completely through the active treatment portion of the program.

INTRODUCTION

This program is a model for state veterinary medical associations wishing to assist chemically impaired veterinarians, animal technicians, veterinary dentists, and their families. A chemically impaired individual is defined as whose use of alcohol or other drugs interferes with that person's ability to function professionally, socially, or in personal relationships. Chemical impairment affects nearly 1 out of every 15 persons in the United States. Veterinarians as well as others involved in the delivery of veterinary service and their families are not immune to this disease. As a matter of fact, ready access to alcohol and other drugs may contribute to an increased incidence of impairment among this group.

The steps in any program to assist chemically impaired individuals should begin with prevention and end with efforts to prevent the recovering person from relapse. The following outline describes the steps in the program and provides additional information to assist with implementation of a program. Although the program is described in a step by step fashion, these steps will be, of necessity, intertwined, repetitive, and omitted or modified in individual cases. These programs may be more successful if conducted in conjunction with other programs for impaired professionals and in cooperation with state licensing agencies. Several state veterinary, medical, dental, pharmaceutical, and other professional associations have established programs for impaired professionals. Some have been structured to operate on an interprofessional level. In less populated states, the success of programs to assist impaired individuals may be dependent upon the cooperative efforts of several professional associations.

This model program was developed by AVMA's Committee on Impaired Veterinarians. Members listed below are working with established programs in their home states and are available to assist in the development of programs in other states at no cost other than travel reimbursement:

Dr. F.M. Garner, 4416 Oak Hill Road, Rockville, MD 20853
(301-924-3794)

Dr. H. Larry Gore, 7131 Lake Ellenor Dr., Orlando, FL 32809
(305-851-3862)

Dr. J. Martin McDaniel, P.O. Box 396, Clackamas, OR 97015
(503-655-1771)

Dr. Blaine McGowan, 320 W. 8th St., Davis, CA 95616
(916-678-3026 or 916-756-0674)

Dr. Robert D. Painter, Helena Veterinary Service, 2930 N. Montana,
Helena, MT 59601 (406-442-6450)

Dr. Dan G. Parmer, 4350 W. Ford City Dr., Apt 402, Chicago, IL 60652
(312-767-6526 or 312-650-1389)

Dr. Thomas E. Roberts, Chairman, P.O. Box 1147, Cody, WY 82414
(307-587-3151)

Dr. Robert Shomer, 10 Indian Field Court, Mahwah, NJ 07430
(201-825-1763 or 201-837-3470)

GOD GRANT ME THE SERENITY TO ACCEPT
 THE THINGS I CANNOT CHANGE
 THE COURAGE TO CHANGE THE THINGS I CAN
 AND THE WISDOM TO KNOW THE DIFFERENCE

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TERMINATION OF ACTIVE TREATMENT

- An adequately monitored follow-up program of three-to-five years duration is an absolute necessity to assist the recovering individual. Some states or programs require that impaired individuals sign a written contract agreeing to undergo rehabilitation.
- Volunteers who monitor the recovering individual should have a case load of not more than three persons.
- Long-term recovering persons are often ideal volunteer monitors.
- Individuals who are recovering from drug impairments should have periodic chemical analysis of urine specimens. Some state programs require samples to be taken with a physician in attendance.
- Impaired individuals must bear the costs of laboratory tests and other procedures during the follow-up period.
- **Involvement in alcohol or narcotics rehabilitation programs must be a part of the follow-up period.**
- Family follow-up and support, such as AL-ANON, etc., must be included.

PREVENTING RECURRENCE

- **The most crucial period occurs when the impaired person reenters the profession. Reversion to the impaired state is more likely to occur at this time than at any other time in the recovery process.**
- Persons reentering the profession may need licensure advocacy, continuing education deficit correction, financial and legal counselling, and/or alternative meaningful employment, if reentry is not possible.
- Support from persons acquainted with the problem and maintenance of continued confidentiality will be particularly helpful to the impaired individual.
- Recovering persons need to receive continuous positive reinforcement of the benefits of recovery.
- **Continued attendance at an alcohol or narcotics rehabilitation program has proven to be the best form of prevention.**

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**AVMA MODEL PROGRAM
TO ASSIST
CHEMICALLY IMPAIRED
VETERINARIANS
VETERINARY STUDENTS
ANIMAL TECHNICIANS
AND THEIR FAMILIES**



For additional information about chemical
impairment, or for assistance, please contact the
AVMA

930 North Meacham Rd.
Schaumburg, IL 60196
312-885-8070
or
800-248-2862

TO: SENATE AGRICULTURE COMMITTEE

FROM: G. D. GURSS, Representative of Kansas Veterinary
Medical Association

SUBJECT: H.B. 2424

House Bill 2424 is a modified version of the legislation covering the Impaired Professional People of the Human Health Providers. The act authorizes and provides for the establishment of Impaired Veterinary Committees and outlines the functions and responsibilities of these Committees. HB 2424 gives the Veterinary Board of Examiners authority to refer investigations and reports to an Impaired Veterinarian Committee and also to enter into agreements with such committees.

It is important for HB 2424 to provide that no person, organization, committee member, or professional society, shall be subject to liability in a civil action for damage related to reporting, except upon clear and convincing evidence that the report was based on false information or the information was completely false, and that the falsity was actually known to the person making the report, providing the information or conducting the investigation at the time.

It is a fact that most associations and organizations have members that could be classified as Impaired Professional People and are in need of an Impaired Program. The veterinary profession is no exception. The intent of the program is to protect the public from Impaired Veterinarians, provide high quality Veterinary Service and direct and assist an impaired veterinarian to correct his or her impaired problem. For these reasons, the KVMA membership request passage of HB 2424. Thank you.

*Senate agriculture
3-14-89
attachment 3*

TO: Senate Agriculture Committee

FROM: Dr. Frank Solomon, Jr., President of the Kansas Veterinary
Medical Association

SUBJECT: House Bill 2424

HISTORY

I am Dr. Frank Solomon, a practicing veterinarian at Wichita, Kansas, and President of the Kansas Veterinary Medical Association. During my tenure as an officer of the KVMA, the committee on Impaired Veterinarians was created. This was in 1986. Under the direction of Dr. Joe Bailey, as chairman, this Committee met with the American Veterinary Medical Association committee on Impaired Veterinarians, and reviewed and studied their program. They also reviewed legislation that was adopted by other states, attended educational meetings and training seminars held by committees of other organizations related to Impaired Professional People. With the use of this informative experience, training and general knowledge related to Impaired Veterinarians, the Committee was convinced that there was need for a program, and that legislation was needed to reach their objective. The KVMA membership and Board agreed with this decision, and feel that House Bill 2424 provides this legislation.

CONTENTS OF HOUSE BILL 2424

House Bill 2424 defines the four main ingredients of this Act - Board - Committees - Impaired Veterinarians - and Veterinarian.

Sections, 2, 3 and 4 authorize certain procedures, duties, reports, action, functions, and responsibilities of persons, committees, organizations, veterinarians, and the Kansas Board of Veterinary Examiners, regarding Impaired Veterinarians.

Sections 5, 6, 7 and 8 authorize and grant immunity from civil liability to persons, committees and organizations, for certain actions.

Section 8 emphasizes the need and reasons for this act.

Section 9 provides that this act be supplemental to and a part of the Kansas Veterinary Practice Act.

This act provides the authorization, procedures and immunity for persons, veterinarians and committees that are needed for an Impaired Veterinarian Program.

For these reasons, the Kansas Veterinary Medical Association membership and the Board of the KVMA, recommend passage of House Bill 2424.

Thank you.

*Senate agriculture
3-14-89
attachment 4*

TO: Senate Agriculture Committee

FROM Dr. Tom Vincent, Executive Director of the Kansas Board of Veterinary Examiners.

SUBJECT: House Bill 2424.

House Bill 2424 authorizes certain procedures and action related to Impaired Veterinarians, and makes the act supplemental and a part of the Veterinary Practice Act. Therefore, the Kansas State Board of Veterinary Examiners will be implementing the statutory intent of this act as related to Impaired Veterinarians.

The Kansas Veterinary Board of Examiners have approximately 2350 persons licensed to practice veterinary medicine; of this number, approximately 600 are practicing in the State of Kansas. The renewal license fee is \$20.00 annually, and this money creates the Veterinary Board of Examiner's fee fund.

The Board recognizes that the Act authorizes the Board to enter into certain agreements with Impaired Veterinarian committees of the appropriate State Professional Society or organization to provide functions and responsibilities as specified in the Agreement. The Board is willing to consider procedures that would provide payments from moneys appropriated for such functions.

The Board feels there was, and is, a need for an Impaired Veterinarian program, and feels that the Act will be beneficial in assisting the Board in performing its duties with reference to veterinarians classified as being impaired. The Veterinary Board of Examiners supports and asks that House Bill 2424 be passed by the committee.

*Senate agriculture
3-14-89
attachment 5*

Committee f . . .

Kansas Farm Organizations

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TESTIMONY IN SUPPORT OF HOUSE BILL NO. 2424

BEFORE THE SENATE COMMITTEE ON AGRICULTURE

March 14, 1989

Chairman Allen and Members of the Committee:

I am Wilbur Leonard, appearing for the Committee of Kansas Farm Organizations.

We are pleased to have this opportunity to add the support of our members to the Kansas Veterinary Medical Association in recommending the passage of House Bill No. 2424. We applaud this move by the veterinary medical profession to provide counselling and treatment for their members who demonstrate a need for it and who can benefit from such procedures.

It is a gross understatement that our members have a genuine interest in the quality of veterinary medical service available to them. By establishing a peer assistance program similar to that available to other health providers the continuing high standard of Kansas veterinary service should be maintained.

Thank you for your consideration and we trust you will give favorable consideration to this measure.

*Senate agriculture
3-14-89
attachment 6*