	LEGISLATIVE ACTION	
Senate		House
Comm: RCS		
03/25/2014		
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The Committee on Health Policy (Sobel) recommended the following:

Senate Amendment (with title amendment)

3 Delete lines 40 - 130

and insert:

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supervised by a physician, a physician assistant, or an advanced registered nurse practitioner.

(c) "Palliative care" means patient- and family-centered medical care offered throughout the continuum of an illness which optimizes quality of life by anticipating, preventing, and treating suffering caused by serious illness. Palliative care

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involves addressing physical, emotional, social, and spiritual needs and facilitating patient autonomy, access to information, and choice. The term includes, but is not limited to, discussions of the patient's goals for treatment; discussion of treatment options appropriate to the patient, including, if appropriate, hospice care; and comprehensive pain and symptom management.

- (d) "Serious illness" means a medical illness or physical injury or condition that substantially impacts quality of life for more than a short period of time. The term includes, but is not limited to, cancer, renal or liver failure, heart or lung disease, and Alzheimer's disease and related dementias.
- (2) PALLIATIVE CARE AND QUALITY OF LIFE INTERDISCIPLINARY ADVISORY COUNCIL.—There is established within the Department of Health a Palliative Care and Quality of Life Interdisciplinary Advisory Council, which is an advisory council as defined in s. 20.03, Florida Statutes.
- (a) The primary purpose of the council is to consult with and advise the department on matters relating to the establishment, maintenance, operation, and outcome evaluation of palliative care initiatives in this state.
- (b) The council shall consist of nine members appointed by the Governor in consultation with the State Surgeon General and include professionals who have expertise in various aspects of palliative care, including, but not limited to, interdisciplinary palliative care, medical, nursing, social work, pharmacy, and spiritual expertise; patient and family caregivers or their advocates; and such other members as the State Surgeon General deems appropriate. The Governor in

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consultation with the State Surgeon General shall ensure that representation on the council reflects a broad perspective of palliative care and includes experience in palliative care in a variety of inpatient, outpatient, and community settings, such as acute care, long-term care, and hospice, and with a variety of populations, including pediatric, youth, and adult. One council member shall be a designee of the American Cancer Society. At least two council members shall be board-certified hospice and palliative medicine physicians, physician assistants, or nurses. Members shall serve for a term of 3 years.

- (c) The council shall adopt internal organizational procedures as necessary for its efficient organization which must, at a minimum, require the council to elect a chair and vice chair whose duties shall be established by the council.
- (d) The department shall provide such staff, information, and other assistance as is reasonably necessary to assist the council in carrying out its responsibilities.
- (e) Members of the council shall serve without compensation, but may receive reimbursement as provided in s. 112.061, Florida Statutes, for travel and other necessary expenses incurred in the performance of their official duties.
- (f) The department shall fix a time and place for regular meetings of the council, which shall meet at least twice a year.
- (3) PALLIATIVE CARE CONSUMER AND PROFESSIONAL INFORMATION AND EDUCATION PROGRAM.-
- (a) The department shall establish a palliative care consumer and professional information and education program. The purpose of the program is to maximize the effectiveness of

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palliative care initiatives in this state by making comprehensive and accurate information and education about palliative care available to the public, health care practitioners, and health care facilities. (b) The department shall publish on its website information

- and resources, including links to external resources, about palliative care, which shall include, but not be limited to, continuing education opportunities for health care practitioners, information about palliative care delivery in the home and in primary, secondary, and tertiary care settings, best practices for palliative care delivery, and consumer educational materials and referral information for palliative care, including hospice.
- (c) The department may develop and implement other initiatives regarding palliative care services and education to further the purposes of this section.
- (d) The department shall consult with the Palliative Care and Quality of Life Interdisciplinary Advisory Council in implementing this subsection.

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======== T I T L E A M E N D M E N T =========

90 And the title is amended as follows:

Delete lines 21 - 27

and insert: 92

to implement this act; providing an effective date.