Florida Senate - 2005

By Senator Wise

	5-1186-05 See HB 701
1	A bill to be entitled
2	An act relating to the withholding or
3	withdrawal of nutrition or hydration from
4	incompetent persons; creating part VI of ch.
5	765, F.S.; providing a part title; providing
6	definitions; declaring that an incompetent
7	person is presumed to have directed health care
8	providers to provide the necessary nutrition
9	and hydration to sustain life; prohibiting a
10	court, proxy, or surrogate from withholding or
11	withdrawing nutrition or hydration except under
12	specified circumstances; providing that the
13	presumption to provide nutrition and hydration
14	is inapplicable under certain circumstances;
15	amending ss. 765.106, 765.107, 765.204,
16	765.305, 765.401, and 765.404, F.S.; conforming
17	provisions to changes made by the act;
18	prohibiting an inference of incapacity due to a
19	person's developmental disability; providing
20	for the act to apply to pending litigation;
21	declaring that the act supersedes existing
22	court orders otherwise applicable on or after
23	the effective date of the act; providing an
24	effective date.
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26	Be It Enacted by the Legislature of the State of Florida:
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28	Section 1. Part VI of chapter 765, Florida Statutes,
29	consisting of sections 765.601, 765.602, 765.603, and 765.604,
30	is created to read:
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CODING: Words stricken are deletions; words <u>underlined</u> are additions.

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1	765.601 Part titleThis part may be cited as the
2	"Starvation and Dehydration of Persons with Disabilities
3	Prevention Act."
4	765.602 DefinitionsAs used in this part, the term:
5	(1) "Express and informed consent" means consent
6	voluntarily given with sufficient knowledge of the subject
7	matter involved to enable the person giving consent to make a
8	knowing and understanding decision without any element of
9	force, fraud, deceit, duress, or other form of constraint or
10	coercion. Sufficient knowledge of the subject matter involved
11	includes a general understanding of:
12	(a) The proposed treatment or procedure for which
13	consent is sought.
14	(b) The medical condition of the person for whom
15	consent for the proposed treatment or procedure is sought.
16	(c) Any medically acceptable alternative treatment or
17	procedure.
18	(d) The substantial risks and hazards inherent if the
19	proposed treatment or procedure is carried out and if the
20	proposed treatment or procedure is not carried out.
21	(2) "Nutrition" means sustenance administered by way
22	of the gastrointestinal tract.
23	(3) "Reasonable medical judgment" means a medical
24	judgment that would be made by a reasonably prudent physician
25	who is knowledgeable about the case and the treatment
26	possibilities with respect to the medical conditions involved.
27	765.603 Presumption of nutrition and hydration
28	sufficient to sustain life
29	(1) Each incompetent person shall be presumed to have
30	directed his or her health care providers to supply him or her
31	with the nutrition and hydration necessary to sustain life.

1	(2) A proxy, surrogate, or court may not decide on
2	behalf of an incompetent person to withhold or withdraw
3	hydration or nutrition from that person except in the
4	circumstances and under the conditions specifically provided
5	<u>in s. 765.604.</u>
6	765.604 Presumption of nutrition and hydration; when
7	inapplicableThe presumption in s. 765.603 does not apply
8	<u>if:</u>
9	(1) In reasonable medical judgment:
10	(a) The provision of nutrition or hydration is not
11	medically possible;
12	(b) The provision of nutrition or hydration would
13	hasten death; or
14	(c) The medical condition of the incompetent person is
15	such that provision of nutrition or hydration would not
16	contribute to sustaining the incompetent person's life or
17	provide comfort to the incompetent person;
18	(2) The incompetent person has executed a written
19	advance directive executed in another state in accordance with
20	s. 765.112, executed a designation of a health care surrogate
21	prepared in accordance with s. 765.202, or executed a written
22	living will prepared in accordance with s. 765.302, any of
23	which specifically authorizes the withholding or withdrawal of
24	nutrition or hydration, to the extent that the authorization
25	applies; or
26	(3) There is clear and convincing evidence that the
27	incompetent person, when competent, gave express and informed
28	consent to withdrawing or withholding nutrition or hydration
29	in the applicable circumstances.
30	Section 2. Section 765.106, Florida Statutes, is
31	amended to read:

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1	765.106 Preservation of existing rightsThe
2	provisions of this chapter are cumulative to the existing law
3	regarding an individual's right to consent, or refuse to
4	consent, to medical treatment and do not impair any existing
5	rights or responsibilities which a health care provider, a
б	patient, including a minor, competent or incompetent person,
7	or a patient's family may have under the common law, Federal
8	Constitution, State Constitution, or statutes of this state <u>;</u>
9	however, this section may not be construed to authorize a
10	violation of part VI.
11	Section 3. Subsection (1) of section 765.107, Florida
12	Statutes, is amended to read:
13	765.107 Construction
14	(1) This chapter shall not be construed to repeal by
15	implication any provision of s. 766.103, the Florida Medical
16	Consent Law. For all purposes, the Florida Medical Consent Law
17	shall be considered an alternative to provisions of this
18	section; however, this section may not be construed to
19	authorize a violation of part VI.
20	Section 4. Section 765.204, Florida Statutes, is
21	amended to read:
22	765.204 Capacity of principal; procedure
23	(1) A principal is presumed to be capable of making
24	health care decisions for herself or himself unless she or he
25	is determined to be incapacitated. Incapacity may not be
26	inferred from the person's voluntary or involuntary
27	hospitalization for mental illness or from her or his mental
28	retardation or developmental disability.
29	(2) If a principal's capacity to make health care
30	decisions for herself or himself or provide informed consent
31	is in question, the attending physician shall evaluate the
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principal's capacity and, if the physician concludes that the 1 2 principal lacks capacity, enter that evaluation in the principal's medical record. If the attending physician has a 3 question as to whether the principal lacks capacity, another 4 physician shall also evaluate the principal's capacity, and if 5 б the second physician agrees that the principal lacks the 7 capacity to make health care decisions or provide informed 8 consent, the health care facility shall enter both physician's evaluations in the principal's medical record. If the 9 principal has designated a health care surrogate or has 10 delegated authority to make health care decisions to an 11 12 attorney in fact under a durable power of attorney, the 13 facility shall notify such surrogate or attorney in fact in writing that her or his authority under the instrument has 14 commenced, as provided in chapter 709 or s. 765.203. 15 (3) The surrogate's authority shall commence upon a 16 17 determination under subsection (2) that the principal lacks 18 capacity, and the such authority shall remain in effect until a determination that the principal has regained such capacity. 19 Upon commencement of the surrogate's authority, a surrogate 20 21 who is not the principal's spouse shall notify the principal's 22 spouse or adult children of the principal's designation of the 23 surrogate. If In the event the attending physician determines that the principal has regained capacity, the authority of the 2.4 surrogate shall cease, but shall recommence if the principal 25 26 subsequently loses capacity as determined under pursuant to 27 this section. 2.8

(4) A determination made <u>under pursuant to</u> this
section that a principal lacks capacity to make health care
decisions shall not be construed as a finding that a principal
lacks capacity for any other purpose.

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1 (5) In the event the surrogate is required to consent 2 to withholding or withdrawing life-prolonging procedures, the provisions of parts part III and VI shall apply. 3 Section 5. Subsection (1) of section 765.305, Florida 4 Statutes, is amended to read: 5 б 765.305 Procedure in absence of a living will.--7 (1) In the absence of a living will, the decision to 8 withhold or withdraw life-prolonging procedures from a patient 9 may be made by a health care surrogate designated by the patient under pursuant to part II unless the designation 10 limits the surrogate's authority to consent to the withholding 11 12 or withdrawal of life-prolonging procedures or unless the 13 surrogate's authority is limited by part VI. Section 6. Section 765.401, Florida Statutes, is 14 amended to read: 15 16 765.401 The proxy.--17 (1) If an incapacitated or developmentally disabled 18 patient has not executed an advance directive, or designated a surrogate to execute an advance directive, or the designated 19 or alternate surrogate is no longer available to make health 20 21 care decisions, health care decisions may be made for the 22 patient by any of the following individuals, in the following 23 order of priority, if no individual in a prior class is reasonably available, willing, or competent to act: 2.4 (a) The judicially appointed guardian of the patient 25 or the guardian advocate of the person having a developmental 26 27 disability as defined in s. 393.063, who has been authorized 2.8 to consent to medical treatment, if such guardian has previously been appointed; however, this paragraph shall not 29 be construed to require such appointment before a treatment 30 decision can be made under this subsection; 31

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1 (b) The patient's spouse; (c) An adult child of the patient, or if the patient 2 has more than one adult child, a majority of the adult 3 children who are reasonably available for consultation; 4 (d) A parent of the patient; 5 б (e) The adult sibling of the patient or, if the 7 patient has more than one sibling, a majority of the adult 8 siblings who are reasonably available for consultation; (f) An adult relative of the patient who has exhibited 9 special care and concern for the patient and who has 10 maintained regular contact with the patient and who is 11 12 familiar with the patient's activities, health, and religious 13 or moral beliefs; or (g) A close friend of the patient; or. 14 (h) A clinical social worker licensed pursuant to 15 chapter 491, or who is a graduate of a court-approved 16 17 guardianship program. Such a proxy must be selected by the provider's bioethics committee and must not be employed by the 18 provider. If the provider does not have a bioethics committee, 19 then the such a proxy may be chosen through an arrangement 20 21 with the bioethics committee of another provider. The proxy 22 will be notified that, upon request, the provider shall make 23 available a second physician, not involved in the patient's care to assist the proxy in evaluating treatment. Decisions to 2.4 withhold or withdraw life-prolonging procedures shall will be 25 26 reviewed by the facility's bioethics committee involved in the 27 proxy's selection. Documentation of efforts to locate proxies 2.8 from prior classes shall must be recorded in the patient 29 record. 30 (2) Any health care decision made under this part must

31 be based on the proxy's informed consent and on the decision

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1 the proxy reasonably believes the patient would have made 2 under the circumstances. If there is no indication of what the patient would have chosen, the proxy may consider the 3 patient's best interest in deciding that proposed treatments 4 5 are to be withheld or that treatments currently in effect are 6 to be withdrawn. Any decision concerning the withholding or 7 withdrawal of nutrition or hydration must comply with part VI. 8 (3) Before exercising the incapacitated patient's rights to select or decline health care, the proxy must comply 9 with the provisions of ss. 765.205 and 765.305, except that a 10 proxy's decision to withhold or withdraw life-prolonging 11 12 procedures must be supported by clear and convincing evidence 13 that the decision would have been the one the patient would have chosen had the patient been competent or, if there is no 14 indication of what the patient would have chosen, that the 15 decision is in the patient's best interest. Any decision 16 17 concerning the withholding or withdrawal of nutrition or 18 hydration must comply with part VI. (4) Nothing in this section shall be construed to 19 preempt the designation of persons who may consent to the 20 21 medical care or treatment of minors established under pursuant 22 to s. 743.0645. 23 Section 7. Section 765.404, Florida Statutes, is 2.4 amended to read: 765.404 Persistent vegetative state.--For persons in a 25 26 persistent vegetative state, as determined by the attending 27 physician in accordance with currently accepted medical 2.8 standards, who have no advance directive and for whom there is 29 no evidence indicating what the person would have wanted under such conditions, and for whom, after a reasonably diligent 30 inquiry, no family or friends are available or willing to 31

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1 serve as a proxy to make health care decisions for them, 2 life-prolonging procedures may be withheld or withdrawn under the following conditions: 3 (1) The person has a judicially appointed guardian 4 5 representing his or her best interest with authority to 6 consent to medical treatment.; and 7 (2) The guardian and the person's attending physician, in consultation with the medical ethics committee of the 8 facility where the patient is located, conclude that the 9 condition is permanent and that there is no reasonable medical 10 probability for recovery and that withholding or withdrawing 11 12 life-prolonging procedures is in the best interest of the 13 patient. If there is no medical ethics committee at the 14 facility, the facility must have an arrangement with the medical ethics committee of another facility or with a 15 16 community-based ethics committee approved by the Florida 17 Bioethics Bio ethics Network. The ethics committee shall 18 review the case with the guardian, in consultation with the person's attending physician, to determine whether the 19 condition is permanent and there is no reasonable medical 20 21 probability for recovery. The individual committee members and 22 the facility associated with an ethics committee shall not be 23 held liable in any civil action related to the performance of any duties required in this subsection. 2.4 25 Any decision concerning the withholding or withdrawal of 26 27 nutrition or hydration must comply with part VI. 2.8 Section 8. This act shall apply prospectively in litigation pending on the effective date of this act and shall 29 supersede any court order issued under the law in effect 30 before the effective date of this act to the extent that the 31

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1	court order conflicts with this act and would otherwise be
2	applied on or after the effective date of this act. This act
3	shall apply with respect to every person living on or after
4	the effective date of this act.
5	Section 9. This act shall take effect upon becoming
6	law.
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