
SENATE BILL 6373

State of Washington

55th Legislature

1998 Regular Session

By Senators Wood, Thibaudeau, Franklin, McAuliffe, Brown, Prentice, Snyder, Rasmussen, Kohl, Oke and Swecker

Read first time 01/16/98. Referred to Committee on Health & Long-Term Care.

1 AN ACT Relating to an end-of-life care center; adding a new chapter
2 to Title 70 RCW; and making an appropriation.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

4 NEW SECTION. **Sec. 1.** The legislature finds that although medical
5 technology enables some patients to live longer, many at the end of
6 life still suffer from pain, fear, unresolved personal issues, and
7 psychosocial discomfort. There is growing concern in the medical and
8 legal community and among patients and their families and friends that
9 care at the end of life needs to become more compassionate, varied, and
10 enhanced by special services such as hospice, and by the support and
11 sensitivity of caregivers in a variety of settings.

12 The legislature intends to set a model for the United States, by
13 addressing end-of-life concerns in a creative way, through the
14 establishment of a Washington state end-of-life care center. The
15 legislature intends for the mission of the end-of-life care center to
16 be improvement of medical education regarding terminality; better
17 public and patient understanding of advance directives and care
18 options; and creation of a special educational, treatment, and outreach
19 center for the palliative care of children. The legislature's goal is

1 to increase public understanding of the dying process and, by improving
2 communication between patients and health care professionals, to assure
3 more Washingtonians compassionate care at the end of life.

4 The legislature intends to establish the end-of-life care center as
5 a public-private partnership, enabling the medical, legal, and
6 insurance communities, as well as concerned citizens, business, and
7 charitable organizations to become involved in developing a new model
8 of terminality.

9 NEW SECTION. **Sec. 2.** The Washington state end-of-life care center
10 is established at the University of Washington, for the purpose of
11 increasing knowledge and understanding of end-of-life care issues in
12 order to benefit patients and their families. The goals of the end-of-
13 life care center include:

14 (1) Improving training for physicians and other health care
15 professionals in end-of-life care, including developing medical school,
16 nursing school, and continuing medical education curricula regarding
17 palliative care, pain management, the role of hospice, and the
18 psychosocial needs of terminal patients, including children;

19 (2) Providing, with cooperation by the office of the attorney
20 general and the department of health, public education regarding end-
21 of-life legal and medical decision making, as well as provision of
22 information regarding available state and community resources,
23 including home health and hospice services, and information on organ
24 donation; and

25 (3) Establishing a teaching and resource center in palliative care
26 for children in order to improve the quality and availability of such
27 care throughout the state.

28 NEW SECTION. **Sec. 3.** (1) The end-of-life care center shall be
29 governed by a board of directors consisting of seven members as
30 follows:

31 (a) A person appointed by the University of Washington school of
32 medicine;

33 (b) A person appointed by the University of Washington school of
34 nursing;

35 (c) A representative of the attorney general, appointed by the
36 attorney general;

1 (d) A representative of the health care insurance community,
2 appointed by the governor;

3 (e) A patient advocate, appointed by the governor;

4 (f) A person appointed by agreement of the house of representatives
5 and the senate; and

6 (g) A representative of the department of health, appointed by the
7 secretary of the department of health.

8 (2) Members of the board of directors shall serve four-year terms
9 of office, except that three of the initial seven board members shall
10 serve two-year terms. A vacancy shall be filled in the same manner as
11 the original appointment was made, and the person appointed to fill a
12 vacancy shall serve for the remainder of the unexpired term of the
13 office for the position to which he or she was appointed.

14 (3) A director appointed by the governor or by a state agency may
15 be removed from office by the governor. Any other director may be
16 removed from office by the action of the appointing authority or at
17 least two-thirds of the legislature for legislative appointments.

18 NEW SECTION. **Sec. 4.** (1)(a) The board of directors of the end-of-
19 life care center shall adopt a resolution that may be amended from time
20 to time establishing the basic requirements governing methods and
21 amounts of reimbursement payable to directors and employees for travel
22 and other business expenses incurred on behalf of the end-of-life care
23 center. The resolution shall establish procedures for approving
24 expenses, and requirements regarding the use of credit cards. The
25 resolution may also establish procedures for payment of per diem to
26 board members. The state auditor shall, as provided by law, cooperate
27 with the end-of-life care center in establishing adequate procedures
28 for regulating and auditing the reimbursement of all such expenses.

29 (b) The board may authorize payment of actual and necessary
30 expenses of board members and employees for lodging, meals, and travel-
31 related costs incurred in attending meetings or conferences on behalf
32 of the end-of-life care center, and strictly in the public interest and
33 for public purposes. Directors and employees may be advanced
34 sufficient sums to cover anticipated expenses, in accordance with rules
35 adopted by the state auditor.

36 (2) Each member of the board of directors may receive compensation
37 of fifty dollars per day for attending meetings or conferences on
38 behalf of the end-of-life care center, not to exceed three thousand

1 dollars per year. A director may waive all or a portion of his or her
2 compensation under this section as to a month or months during his or
3 her term of office, by a written waiver filed with the end-of-life care
4 center. The compensation provided in this section is in addition to
5 reimbursement for expenses paid to the directors.

6 (3) The board may purchase liability insurance, with such limits as
7 the directors may deem reasonable, for the purpose of protecting and
8 holding personally harmless the board members against liability for
9 personal or bodily injuries and property damage arising from their acts
10 or omissions while performing or in good faith purporting to perform
11 their official duties.

12 NEW SECTION. **Sec. 5.** The end-of-life care center may accept and
13 expend funds or other contributions that may be donated for the
14 purposes of the end-of-life care center. The end-of-life care center
15 shall encourage the voluntary participation of legal, health care, and
16 other professionals in the work of the end-of-life care center. The
17 end-of-life care center shall seek corporate and charitable grant
18 funding to the fullest extent possible.

19 NEW SECTION. **Sec. 6.** (1) The end-of-life care center constitutes
20 a body corporate, and shall possess all the usual powers of a
21 corporation for public purposes, as well as other powers that may now
22 or hereafter be specifically conferred by statute, including without
23 limitation, the authority to hire employees and staff, to enter into
24 contracts, and to sue and be sued.

25 (2) The end-of-life care center has the following specific
26 authority:

27 (a) To contract with public and private entities, including private
28 nonprofit entities, for facilities, goods, and services to establish
29 and maintain the end-of-life care center;

30 (b) To seek grants from public and private foundations, research,
31 and charitable entities for the establishment, development, research,
32 outreach, and programs of the end-of-life care center;

33 (c) To research, create, make available, and present public
34 education programs regarding end-of-life issues, in order to increase
35 public awareness. Such programs may include education regarding
36 advance directives, home health and hospice services, improved
37 communication between patient, family, and health care providers, and

1 availability of state and community resources to assist patients and
2 their families with end-of-life care. Public education may include
3 community forums, written materials, audiotapes, and videotapes; and
4 (d) To accept donation from businesses, corporations, and
5 individuals for the work of the end-of-life care center.

6 NEW SECTION. **Sec. 7.** The legislature finds that as many as a
7 thousand Washington state children suffer from life-limiting conditions
8 that require special care. In many cases, this special care cannot be
9 obtained in the child's home community, and the child and family relies
10 upon the children's hospital and medical center affiliated with the
11 University of Washington and other resources for relevant care. The
12 legislature intends to enlarge upon the special expertise and varied
13 resources available through the children's hospital and medical center
14 affiliated with the University of Washington by establishing a
15 pediatric palliative care center focused on education, research, and
16 direct service to address the diverse needs of patients, families,
17 providers, and communities more completely. The legislature intends
18 that the pediatric palliative care center serve as a consulting and
19 outreach resource for health care professionals throughout Washington
20 state, eventually enabling more local communities to be supported in
21 providing terminal care to children with life-limiting conditions.

22 NEW SECTION. **Sec. 8.** (1) The pediatric palliative care center is
23 established with the cooperation of the children's hospital and medical
24 center affiliated with the University of Washington and the end-of-life
25 care center, under the direction of the end-of-life care center.
26 Funding for the pediatric palliative care center is provided through
27 the Washington state end-of-life care center's public-private
28 partnership.

29 (2) The goals of the pediatric palliative care center are to:
30 (a) Work with existing medical and nursing school programs to
31 improve palliative care curricula to include culturally sensitive
32 information on end-of-life and palliative care for children;
33 (b) Assist health care professionals in coordination of care and
34 interdisciplinary communication, improve the transition of care from
35 curative to palliative to terminal, and span clinical and
36 organizational relationships;

1 (c) Improve, through education and training, clinical practice
2 regarding pain and symptom management for children, and to teach
3 providers and parents optimal pain and symptom relief;

4 (d) Provide the availability of an inpatient or palliative care
5 clinic setting for children, focusing on comfort care, not cure, and on
6 parental support as well as the needs of the child patient;

7 (e) Where feasible, act as a resource and referral to connect
8 children with appropriate hospice care in their communities; and

9 (f) Act as a state-wide resource for physicians with questions
10 regarding pediatric palliative care.

11 NEW SECTION. **Sec. 9.** This chapter may be known and cited as the
12 Washington state end-of-life care center act.

13 NEW SECTION. **Sec. 10.** Sections 1 through 9 of this act constitute
14 a new chapter in Title 70 RCW.

15 NEW SECTION. **Sec. 11.** The sum of . . . dollars, or as much
16 thereof as may be necessary, is appropriated for the fiscal year ending
17 June 30, 1999, from the general fund to the University of Washington
18 school of medicine for the purposes of this act.

19 NEW SECTION. **Sec. 12.** If any provision of this act or its
20 application to any person or circumstance is held invalid, the
21 remainder of the act or the application of the provision to other
22 persons or circumstances is not affected.

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