

**State Advisory Council on Quality Care at the End of Life  
Minutes from March 13, 2009 Meeting**

**Meeting time and place:** March 13, 2009, 10:00 a.m., in the Department of Aging's Conference Room, 301 West Preston Street, Room 1007.

**Council members present:** Catherine Boyne, Chair; Timothy Keay; Catherine Stavely, Wendy Kronmiller (Secretary of Health and Mental Hygiene's designee); Mike LaChance (Secretary of Aging's designee); Ted Meyerson, Paul Ballard (Attorney General's designee); Karen Kauffman (via speakerphone) ; Cari Watrous (Secretary of Disabilities' designee); Gloria Ramsey (via speakerphone).

**Others present:** Marni Abrams, Leslie Piet

Catherine Boyne convened the meeting at 10:00 AM and welcomed Council members and guests.

Mr. Ballard updated the Council on the legislative session. He talked about House Bill 30 and Senate Bill 546 which would have required health care providers to provide counseling to terminally ill patients about care options at the end of life and about hospice care options. He noted that the bills ran into a great deal of opposition from various groups because of concerns regarding whether these bills might encourage assisted suicide, might fail to protect disabled persons and their proxy decision makers from coercion, and might unduly burden physicians with additional duties.

After negotiations, House Bill 30 was amended to require that Mr. Ballard convene a workgroup to look at hospice options, its utilization, and solutions for increasing its utilization. The Council will be part of the workgroup. Mr. Ballard stated that he learned a great deal from the various representatives of different organizations regarding the issue and hoped they could arrive at a consensus solution. He also noted that many people are not getting timely referrals to hospice care and expressed his hope that the workgroup could find solutions to this problem.

In observing the discussions that took place at the legislature regarding House Bill 30, Ms. Kronmiller was surprised it was not already an accepted standard of care to provide counseling to terminal patients regarding their end-of-life care options. She found that people had different ideas regarding what was expected in this area and felt that a workgroup would be good way to arrive at a consensus of opinion on what should be the accepted standard of care. She believed the Council could be helpful to the workgroup by helping to set a framework for the study.

Mr. Ballard stated that he testified in support of Senate Bill 221 and told the legislature that the Council supported the bill. Senate Bill 221 would require hospitals and nursing homes to ask patient for a copy of any advance directive the patient has made prior to informing the patient of the right to make an advance directive. The bill would also require a health care facility to inform the patient of the facility's policies and procedures with regard to the implementation of the patient's advance directive and the use of CPR and DNR orders.

The Council discussed its workgroups. Dr. Ramsey reported that she has conducted a literature search on racial disparities and stated that the workgroup would be meeting soon.

Ms. Boyne said that Dr. Levenson was going to get the life-sustaining treatments options form workgroup together. Mr. Ballard provided them with an Oregon Health and Science study on the POLST.

The pediatric palliative care work group was scheduled to meet on March 31 with Cynda Rushton and Sue Hough. Ms. Boyne has made contacts with various people with expertise inside and outside the state.

Mr. Ballard updated the membership needs for the Council and asked for recommendations of people who could be appointed to the vacant positions. Members recommended various people.

No further items of business having been presented, Ms. Boyne adjourned the meeting at noon.