

**STATE ADVISORY COUNCIL FOR QUALITY CARE AT THE END OF LIFE  
MINUTES – OCTOBER 17, 2003 MEETING**

**Meeting time and place:** October, 2003, 1 p.m., in the Conference Room of the Department of Planning, 301 West Preston Street, 11th floor.

**Council members present:** Ms. Ruth Eger; Ms. Muriel Foos; Dr. Timothy Keay; Rev. Daniel Mindling; Dr. Cynda Rushton; Ms. Catherine Stavely; Mr. Jack Schwartz (Attorney General’s designee); Hon. Jacqueline Phillips (Secretary of Aging’s designee); Ms. Melinda Evans; Dr. Steven Levenson; Ms. Toni Pajardo

**Council members unable to attend:** Rabbi Mark Loeb; Hon. Jean Roesser; Ms. Lennita Anderson-Selvey; Ms. Sharon Fine; Dr. Richard Fornadel; Ms. Marguerite Gilner; Ms. Karen Kauffman; Ms. Carol Benner (Secretary of Health and Mental Hygiene’s designee); Hon. Paula Hollinger; Hon. Barbara Frush

**Others present:** Mr. Anand Das; Dr. Karen Spencer; Ms. Fran Stoner; Mr. Mike Lachance; Ms. Deborah Pyles; Dr. Anita Tarzian; Hon. Larry Kimble (Maryland Department of Veterans Affairs); Mr. Robert Ruschell; Ms. Tracy Novak (representing Delegate Dan Morhaim)

Dr. Cynda Rushton welcomed the group and thanked them for their participation in the recent Council activities. Once introductions were made, the focus of the Council and the findings of the Last Acts Report Card were reviewed. Mr. Anand Das summarized the subcommittee conference calls in which Council members and interested members of the public had participated. Dr. Karen Spencer then began to facilitate the discussion reviewing the action items each subcommittee had prepared for the meeting.

The following summary reviews the Council’s agreed upon steps to be taken over the next few months.

**I. ACTION ITEMS FOR “CARE OF DISADVANTAGED AND VULNERABLE PATIENTS”  
SUBCOMMITTEE**

• ***Pediatric Palliative Care Services***

**Action Item:** The action item was changed to read: To gather data sources that already exist on the adequacy of pediatric palliative care services in Maryland.

**Who:** Ms. Ruth Eger, Dr. Cynda Rushton

**Time Frame:** 1½ months

**Notes:** Ms. Eger will provide the Council with data she has collected from a variety of sources. Gaps in the data will be identified and, if necessary, additional data will be collected.

• *Utilization of Hospice Services Among Vulnerable Populations*

**Action Item:** To gather demographic data on the residents who obtain hospice services in nursing homes, reasons for use and non-use of hospice services, and the perceptions of the nurses and physicians providing care to nursing home residents on the adequacy and accessibility of hospice services.

**Who:** Staff

**Time Frame:** By end of 2003

**Notes:** The Council decided it should gather these data, to the extent possible, from current sources like the Maryland Health Care Commission. Alternatively, it can work with the Office of Health Care Quality in Maryland to develop a survey instrument to be sent out to nursing homes. A recent study by Maryland Law Professor Diane Hoffmann and Dr. Anita Tarzian may be helpful. Also, the objective of this action item should include the reasons of use and non-use of hospice.

• *Advance Care Planning and Minority Communities*

**Action Item:** To assemble advance care planning materials from around the nation and assess whether they are culturally sensitive and adequately reflect the values of their targeted communities

**Who:** Ms. Melinda Evans, Ms. Deborah Pyles, Staff

**Time Frame:** Not determined

**Notes:** Ms. Evans offered to look at materials available for Native American populations. Ms. Pyles agreed to look at the availability of materials for Latinos and Asians in California. Other suggestions made were to contact: (1) Dr. Kennita Carter at the University of Maryland; (2) the Community State Partnership to Improve End-of-Life Care, a grant program of the National Program Office of the Robert Wood Johnson Foundation; and (3) community leaders from around the state.

- *Nursing Homes and Medicaid Reimbursement Mechanisms for Hospice*

**Action Item:** To collect data from nursing homes regarding limitations on its provision of hospice care due to the Medicaid reimbursement rate of 95%

**Who:** Mr. Larry Kimball, Staff

**Time Frame:** Not determined

**Notes:** Professor Hoffmann and Dr. Tarzian's survey may be useful

- *Adequacy of End-of-Life Care Policies for Foster Children*

**Action Item:** To compile end-of-life approaches for terminally ill foster children from other states and determine whether these strategies can be used in Maryland

**Who:** Staff

**Time Frame:** By early 2004

**Notes:** Mr. Jack Schwartz stated an initial step should be to find out what is occurring in Maryland. He will contact the Maryland Department of Human Resources and the REM program to get statistics.

## II. ACTION ITEMS FOR “CARE PLANNING FOR PATIENTS WITH A LIFE-THREATENING CONDITION” SUBCOMMITTEE

- *Maryland POLST*

**Action Item:** To develop a Maryland version of the Physician’s Orders for End-of-Life Care, a standard, easily recognized form to identify key elements of a plan of care, and recommend an implementation plan.

**Who:** Staff

**Time Frame:** Draft completed; Consultation to be completed by early 2004.

**Notes:** Mr. Schwartz developed a draft form that was distributed at the meeting. This form will be reviewed by Council members. The Council has made no decision on whether to recommend any legislation, that might be needed to implement the POLST concept. A subcommittee comprised of Dr. Tim Keay, Ms. Fran Stoner, Ms. Murt Foos, Dr. Steve Levenson, Mr. Schwartz, and Mr. Das will convene to discuss the form and to incorporate changes the entire Council may have.

- *Systems for Health Care Facilities*

**Action Item:** To develop a model policy or set of procedures for health care organizations to achieve systematic improvement in end-of-life care.

**Who:** Dr. Steve Levenson

**Time Frame:** By end of 2003

**Notes:** Dr. Levenson will devise a document that sets forth categories of processes that would be beneficial across health care settings.

- *Legal Barriers to Integrating Palliative Care into Ongoing Clinical Care*

**Action Item:** To identify state and federal laws and regulations which limit access to palliative care.

**Who:** Entire Council

**Time Frame:** Not determined

**Notes:** The Council agreed to contact Mr. Schwartz as an initial step to discuss problems in existing laws and regulations.

### **III. OTHER ACTION ITEMS**

- Action items on the following topics will be discussed at future Council meetings: *Advance Directive Forms, Public Education Campaign on Life-Threatening Diseases, Dissemination of 5 Wishes, Workplace Initiatives, Brochures for Clergy, and Annual Event to Educate Clergy.*
- The staff will contact Council members about conference calls and next steps.
- The next meeting of the full Council will be from 1:00 to 3:00 on Friday, March 12th at the Department of Aging Conference Room on the 10th Floor.