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28-409A-99 See HB 343

A bill to be entitled An act relating to end-of-life care; amending ss. 395.1041, 400.142, 400.4255, 400.487, 400.6095, and 400.621, F.S.; authorizing personnel of hospital emergency services, long-term care facilities, assisted living facilities, home health agencies, hospices, and adult family-care homes to withhold or withdraw cardiopulmonary resuscitation pursuant to an order not to resuscitate; providing for rules; providing certain protection from prosecution and liability; amending s. 401.23, F.S.; providing a definition; amending s. 401.245, F.S.; conforming a cross-reference; amending s. 401.45, F.S.; revising authority of emergency medical technicians and paramedics to withhold or withdraw resuscitation or life-prolonging techniques; providing for rules; directing the Department of Health to develop standardized do-not-resuscitate identification cards or devices; authorizing a fee; amending s. 732.912, F.S.; revising provisions relating to who may make anatomical gifts; amending s. 732.914, F.S.; providing for amendment and revocation of anatomical gifts; amending s. 765.101, F.S.; revising definitions; amending s. 765.102, F.S.; revising legislative intent relating to advance directives; amending s. 765.103, F.S.; providing for effect of existing advance directives; amending s. 765.104, F.S.; providing for amendment of an advance directive

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or designation of a surrogate; amending s. 765.110, F.S.; prohibiting certain actions by a 3 health care facility or provider with respect to a patient's advance directive; increasing a penalty; requiring that advance directives become part of patients' medical records; providing for rules; amending s. 765.113, F.S.; conforming a cross-reference; amending s. 765.204, F.S.; revising provisions relating to evaluation of a patient's capacity to make 11 health care decisions; amending s. 765.205, F.S.; revising responsibilities of the 12 surrogate; amending s. 765.301, F.S.; 13 conforming a cross-reference; amending s. 14 765.302, F.S.; revising procedure for making a living will; amending s. 765.303, F.S.; 16 17 revising suggested form of a living will; amending s. 765.304, F.S.; revising procedure 18 19 for implementing a living will; amending s. 20 765.305, F.S.; revising procedure in the absence of a living will; amending s. 765.306, 21 F.S.; revising provisions relating to 22 determination of the patient's condition; 23 24 renumbering and amending s. 765.308, F.S.; providing for transfer of a patient under 25 certain circumstances; providing penalties for 26 27 failure to comply with a patient's advance directive or the treatment decision of a 28 29 surrogate; renumbering and amending s. 765.310, F.S.; providing penalties for falsification, 30 31 forgery, or willful concealment, cancellation,

1 or destruction of an advance directive, or a 2 revocation or amendment thereof; amending s. 3 765.401, F.S.; revising provisions relating to 4 who may act as a proxy; creating s. 765.404, 5 F.S.; providing conditions for withholding or 6 withdrawing life-prolonging procedures for certain persons in a persistent vegetative state; directing the Department of Elderly 9 Affairs to convene a workgroup to develop model 10 advance directive forms; amending s. 395.1027, F.S.; conforming a cross-reference; repealing 11 s. 732.916, F.S., relating to amendment or 12 13 revocation of an anatomical gift; providing an effective date. 14

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Be It Enacted by the Legislature of the State of Florida:

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Section 1. Paragraph (1) is added to subsection (3) of section 395.1041, Florida Statutes, 1998 Supplement, to read: 395.1041 Access to emergency services and care.--

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(3) EMERGENCY SERVICES; DISCRIMINATION; LIABILITY OF FACILITY OR HEALTH CARE PERSONNEL. --

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(1) Hospital emergency services personnel may withhold or withdraw cardiopulmonary resuscitation if presented with an order not to resuscitate executed pursuant to s. 401.45. Facility staff shall not be subject to criminal prosecution or civil liability, nor be considered to have engaged in negligent or unprofessional conduct, for withholding or withdrawing cardiopulmonary resuscitation pursuant to such an order.

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Section 2. Section 400.142, Florida Statutes, is amended to read:

400.142 Emergency medication kits: orders not to resuscitate.--

- (1) Other provisions of this chapter or of chapter 465, chapter 499, or chapter 893 to the contrary notwithstanding, each nursing home operating pursuant to a license issued by the agency may maintain an emergency medication kit for the purpose of storing medicinal drugs to be administered under emergency conditions to residents residing in such facility.
- (2) The agency shall adopt such rules as it may deem appropriate to the effective implementation of this act, including, but not limited to, rules which:
 - (a) Define the term "emergency medication kit."
- (b) Describe the medicinal drugs eligible to be placed in emergency medication kits.
- (c) Establish requirements for the storing of medicinal drugs in emergency medication kits and the maintenance of records with respect thereto.
- $\,$ (d) Establish requirements for the administration of medicinal drugs to residents under emergency conditions from emergency medication kits.
- (3) Facility staff may withhold or withdraw cardiopulmonary resuscitation if presented with an order not to resuscitate executed pursuant to s. 401.45. The agency shall adopt rules providing for the implementation of such orders. Facility staff shall not be subject to criminal prosecution or civil liability, nor be considered to have engaged in negligent or unprofessional conduct, for

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 withholding or withdrawing cardiopulmonary resuscitation pursuant to such an order and rules adopted by the agency.

Section 3. Subsection (3) is added to section 400.4255, Florida Statutes, to read:

400.4255 Use of licensed personnel.--

cardiopulmonary resuscitation if presented with an order not to resuscitate executed pursuant to s. 401.45. The department shall adopt rules providing for the implementation of such orders. Facility staff shall not be subject to criminal prosecution or civil liability, nor be considered to have engaged in negligent or unprofessional conduct, for withholding or withdrawing cardiopulmonary resuscitation pursuant to such an order and rules adopted by the department.

Section 4. Section 400.487, Florida Statutes, is amended to read:

400.487 Patient assessment; establishment and review of plan of care; provision of services; orders not to resuscitate.--

- (1) The home health agency providing care and treatment must make an assessment of the patient's needs within 48 hours after the start of services.
- (2) The attending physician for a patient receiving care or treatment provided by a licensed nurse or by a physical, occupational, or speech therapist must establish a plan of care for the patient on behalf of the home health agency that provides services to the patient. The original plan of treatment must be signed by the physician and reviewed, at least every 62 days or more frequently if the patient's illness requires, by the physician in consultation

 with home health agency personnel that provide services to the patient.

- (3) Each patient has the right to be informed of and to participate in the planning of his or her care. Each patient must be provided, upon request, a copy of the plan of care established and maintained for that patient by the home health agency.
- (4) Home health services that are provided to a patient must be evaluated in the patient's home by a physician licensed under chapter 458, chapter 459, chapter 460, or chapter 461 or by a registered nurse licensed under chapter 464 as frequently as necessary to assure safe and adequate care, but not less frequently than once every 62 days.
- (5) A home health agency must provide at least one home health service to patients for whom it has agreed to provide care. Services provided by others under contractual arrangements to a home health agency's patients must be monitored and controlled by the home health agency.
- (6) The services provided by a home health agency, directly or under contract, must be supervised and coordinated in accordance with the plan of care.
- withdraw cardiopulmonary resuscitation if presented with an order not to resuscitate executed pursuant to s. 401.45. The agency shall adopt rules providing for the implementation of such orders. Home health personnel shall not be subject to criminal prosecution or civil liability, nor be considered to have engaged in negligent or unprofessional conduct, for withholding or withdrawing cardiopulmonary resuscitation pursuant to such an order and rules adopted by the agency.

1 Section 5. Present subsection (8) of section 400.6095, Florida Statutes, is renumbered as subsection (9), and a new 2 3 subsection (8) is added to that section, to read: 400.6095 Patient admission; assessment; plan of care; 4 5 discharge; death. --6 (8) The hospice care team may withhold or withdraw cardiopulmonary resuscitation if presented with an order not 7 8 to resuscitate executed pursuant to s. 401.45. The department 9 shall adopt rules providing for the implementation of such 10 orders. Hospice staff shall not be subject to criminal 11 prosecution or civil liability, nor be considered to have engaged in negligent or unprofessional conduct, for 12 withholding or withdrawing cardiopulmonary resuscitation 13 pursuant to such an order and rules adopted by the department. 14 Section 6. Present subsection (3) of section 400.621, 15 Florida Statutes, 1998 Supplement, is renumbered as subsection 16 17 (4), and a new subsection (3) is added to that section, to 18 read: 19 400.621 Rules and standards relating to adult 20 family-care homes.--21 The department shall adopt rules providing for the implementation of orders not to resuscitate. The provider may 22 withhold or withdraw cardiopulmonary resuscitation if 23 24 presented with an order not to resuscitate executed pursuant to s. 401.45. The provider shall not be subject to criminal 25 prosecution or civil liability, nor be considered to have 26 27 engaged in negligent or unprofessional conduct, for withholding or withdrawing cardiopulmonary resuscitation 28 29 pursuant to such an order and rules adopted by the department. 30 Section 7. Present subsections (9) through (22) of

31 section 401.23, Florida Statutes, are renumbered as

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30 31 subsections (10) through (23), respectively, and a new subsection (9) is added to that section, to read:

401.23 Definitions.--As used in this part, the term:

(9) "Cardiopulmonary resuscitation (CPR)" means cardiac compression, endotracheal intubation and other advanced airway management, artificial ventilation, defibrillation, administration of cardiac resuscitation

medications, and related emergency medical procedures.

Section 8. Paragraph (b) of subsection (2) of section 401.245, Florida Statutes, is amended to read:

401.245 Emergency Medical Services Advisory Council.-- (2)

(b) Representation on the Emergency Medical Services Advisory Council shall include: two licensed physicians who are "medical directors" as defined in s. $401.23(16)\frac{(15)}{(15)}$ or whose medical practice is closely related to emergency medical services; two emergency medical service administrators, one of whom is employed by a fire service; two certified paramedics, one of whom is employed by a fire service; two certified emergency medical technicians, one of whom is employed by a fire service; one emergency medical services educator; one emergency nurse; one hospital administrator; one representative of air ambulance services; one representative of a commercial ambulance operator; and two laypersons who are in no way connected with emergency medical services, one of whom is a representative of the elderly. Ex officio members of the advisory council from state agencies shall include, but shall not be limited to, representatives from the Department of Education, the Department of Management Services, the Department of Insurance, the Department of Highway Safety and

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Motor Vehicles, the Department of Transportation, and the Department of Community Affairs.

Section 9. Subsection (3) of section 401.45, Florida Statutes, is amended to read:

401.45 Denial of emergency treatment; civil liability.--

- (3)(a) <u>Cardiopulmonary</u> resuscitation or <u>life-prolonging techniques</u> may be withheld or withdrawn from a patient by an emergency medical technician or paramedic if evidence of an order not to resuscitate by the patient's physician is presented to the emergency medical technician or paramedic in a manner provided by rule of the department. <u>The department shall develop rules providing for the implementation of such orders.</u>
- (b) Any licensee, physician, medical director, or emergency medical technician or paramedic who acts under the direction of a medical director is not subject to criminal prosecution or civil liability, and has not engaged in negligent or unprofessional conduct, as a result of the withholding or withdrawal of <u>cardiopulmonary</u> resuscitation or <u>life-prolonging techniques</u> from a patient pursuant to this subsection and rules adopted by the department.
- (c) The department, in consultation with the

 Department of Elderly Affairs and the Agency for Health Care

 Administration, shall develop standardized do-not-resuscitate

 identification cards, forms, necklaces, bracelets, or other

 devices that signify, when carried or worn, that the possessor

 is a patient for whom a physician has issued an order not to

 administer cardiopulmonary resuscitation. The department may

 charge a reasonable fee to cover the cost of producing and

 distributing such identification devices.

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(4) Any licensee or emergency medical technician or paramedic who in good faith provides emergency medical care or treatment within the scope of their employment and pursuant to oral or written instructions of a medical director shall be deemed to be providing emergency medical care or treatment for the purposes of s. 768.13(2)(b).

Section 10. Section 732.912, Florida Statutes, 1998 Supplement, is amended to read:

732.912 Persons who may make an anatomical gift.--

- (1) Any person who may make a will may give all or part of his or her body for any purpose specified in s. 732.910, the gift to take effect upon death. An anatomical gift made by an adult donor and not revoked by the donor as provided in s. 732.916 is irrevocable and does not require the consent or concurrence of any person after the donor's death.
- (2) If the decedent has not executed an agreement concerning an anatomical gift, a member of one of the classes of persons listed below, in the order of priority stated and in the absence of actual notice of contrary indications by the decedent or actual notice of opposition by a member of the same or a prior class, may give all or any part of the decedent's body for any purpose specified in s. 732.910:
 - The spouse of the decedent; (a)
 - (b) An adult son or daughter of the decedent;
 - (c) Either parent of the decedent;
 - An adult brother or sister of the decedent; (d)
 - A grandparent of the decedent; (e)
- A quardian of the person of the decedent at the time of his or her death; or
- (g) A health care surrogate designated by the decedent 31 under part II of chapter 765; or

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(h)(g) A representative ad litem who shall be appointed by a court of competent jurisdiction forthwith upon a petition heard ex parte filed by any person, which representative ad litem shall ascertain that no person of higher priority exists who objects to the gift of all or any part of the decedent's body and that no evidence exists of the decedent's having made a communication expressing a desire that his or her body or body parts not be donated upon death;

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but no gift shall be made by the spouse if any adult son or daughter objects, and provided that those of higher priority, if they are reasonably available, have been contacted and made aware of the proposed gift, and further provided that a reasonable search is made to show that there would have been no objection on religious grounds by the decedent.

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(3) If the donee has actual notice of contrary indications by the decedent or, in the case of a spouse making the gift, an objection of an adult son or daughter or actual notice that a gift by a member of a class is opposed by a member of the same or a prior class, the donee shall not accept the gift.

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(4) The person authorized by subsection (2) may make the gift after the decedent's death or immediately before the decedent's death.

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(5) A gift of all or part of a body authorizes any examination necessary to assure medical acceptability of the gift for the purposes intended.

28 29 (6) Once the gift has been made, the rights of the donee are paramount to the rights of others, except as provided by s. 732.917.

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30 31 I give:

(a)

1 Section 11. Section 732.914, Florida Statutes, 1998 2 Supplement, is amended to read: 3 732.914 Manner of executing, amending, and revoking 4 anatomical gifts. --5 (1) A gift of all or part of the body under s. 6 732.912(1) may be made by will. The gift becomes effective 7 upon the death of the testator without waiting for probate. 8 If the will is not probated or if it is declared invalid for 9 testamentary purposes, the gift is nevertheless valid to the 10 extent that it has been acted upon in good faith. 11 (2)(a) A gift of all or part of the body under s. 732.912(1) may also be made by a document other than a will. 12 13 The gift becomes effective upon the death of the donor. 14 document must be signed by the donor in the presence of two witnesses who shall sign the document in the donor's presence. 15 If the donor cannot sign, the document may be signed for him 16 17 or her at the donor's direction and in his or her presence and 18 the presence of two witnesses who must sign the document in 19 the donor's presence. Delivery of the document of gift during 20 the donor's lifetime is not necessary to make the gift valid. (b) The following form of written instrument shall be 21 22 sufficient for any person to give all or part of his or her body for the purposes of this part: 23 24 25 UNIFORM DONOR CARD 26 27 The undersigned hereby makes this anatomical gift, if 28 medically acceptable, to take effect on death. The words and

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.... any needed organs or parts;

marks below indicate my desires:

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           (b) .... only the following organs or parts
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               ...[Specify the organ(s) or part(s)]...
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   for the purpose of transplantation, therapy, medical research,
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    or education;
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           (c) .... my body for anatomical study if needed.
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   Limitations or special wishes, if any:
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              ...(If applicable, list specific donee)...
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    Signed by the donor and the following witnesses in the
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   presence of each other:
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    ...(Signature of donor)... ...(Date of birth of donor)...
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    ...(Date signed)...
                                             ...(City and State)...
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    ...(Witness)...
                                                    ...(Witness)...
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    ...(Address)...
                                                    ...(Address)...
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               The gift may be made to a donee specified by name.
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    If the donee is not specified by name, the gift may be
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    accepted by the attending physician as donee upon or following
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    the donor's death. If the gift is made to a specified donee
   who is not available at the time and place of death, the
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    attending physician may accept the gift as donee upon or
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    following death in the absence of any expressed indication
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    that the donor desired otherwise. However, the Legislature
    declares that the public policy of this state prohibits
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   restrictions on the possible recipients of an anatomical gift
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    on the basis of race, color, religion, sex, national origin,
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    age, physical handicap, health status, marital status, or
   economic status, and such restrictions are hereby declared
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31 void and unenforceable. The physician who becomes a donee
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under this subsection shall not participate in the procedures for removing or transplanting a part.

- (4) Notwithstanding s. 732.917(2), the donor may designate in his or her will or other document of gift the surgeon or physician to carry out the appropriate procedures. In the absence of a designation or if the designee is not available, the donee or other person authorized to accept the gift may employ or authorize any surgeon or physician for the purpose.
- (5) Any gift by a member of a class designated in s. 732.912(2) must be made by a document signed by that person or made by that person's witnessed telephonic discussion, telegraphic message, or other recorded message.
- (6) A gift may be amended or revoked in the manner provided in s. 765.104. An amendment or revocation addressed to an attending physician must be communicated by that physician to the designated procurement organization.

Section 12. Section 765.101, Florida Statutes, is amended to read:

765.101 Definitions.--As used in this chapter:

- "Advance directive" means a witnessed written document or oral statement in which instructions are given by a principal or in which the principal's desires are expressed concerning any aspect of the principal's health care, and includes, but is not limited to, the designation of a health care surrogate, a living will, or an anatomical gift made pursuant to part X of chapter 732 orders not to resuscitate issued pursuant to s. 401.45.
- "Attending physician" means the primary physician who has responsibility for the treatment and care of the 31 patient.

- of age or older who has exhibited special care and concern for the patient, and who presents an affidavit to the health care facility or to the attending or treating physician stating that he or she is a friend of the patient; is willing and able to become involved in the patient's health care; and has maintained such regular contact with the patient so as to be familiar with the patient's activities, health, and religious or moral beliefs.
 - (4) "Health care decision" means:
- (a) Informed consent, refusal of consent, or withdrawal of consent to any and all health care, including life-prolonging procedures.
- (b) The decision to apply for private, public, government, or veterans' benefits to defray the cost of health care.
- (c) The right of access to all records of the principal reasonably necessary for a health care surrogate to make decisions involving health care and to apply for benefits.
- (d) The decision to make an anatomical gift pursuant to part X of chapter 732.
- (5) "Health care facility" means a hospital, nursing home, hospice, home health agency, or health maintenance organization licensed in this state, or any facility subject to part I of chapter 394.
- (6) "Health care provider" or "provider" means any person licensed, certified, or otherwise authorized by law to administer health care in the ordinary course of business or practice of a profession.

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- "Incapacity" or "incompetent" means the patient is physically or mentally unable to communicate a willful and knowing health care decision. For the purposes of making an anatomical gift, the term also includes a patient who is deceased.
- "Informed consent" means consent voluntarily given by a person after a sufficient explanation and disclosure of the subject matter involved to enable that person to have a general understanding of the treatment or procedure and the medically acceptable alternatives, including the substantial risks and hazards inherent in the proposed treatment or alternative procedures, and to make a knowing health care decision without coercion or undue influence.
- (9) "Life-prolonging procedure" means any medical procedure, treatment, or intervention, including artificially provided sustenance and hydration, which sustains, restores, or supplants a spontaneous vital function. which:
- (a) Utilizes mechanical or other artificial means to sustain, restore, or supplant a spontaneous vital function; and
- (b) When applied to a patient in a terminal condition, serves only to prolong the process of dying.
- The term"life-prolonging procedure"does not include the administration of medication or performance of medical procedure, when such medication or procedure is deemed necessary to provide comfort care or to alleviate pain.
 - (10) "Living will" or "declaration" means:
- (a) A witnessed document in writing, voluntarily executed by the principal in accordance with s. 765.302; or

which there is:

1 (b) A witnessed oral statement made by the principal 2 expressing the principal's instructions concerning 3 life-prolonging procedures. 4 (11) "Persistent vegetative state" means a permanent 5 and irreversible condition of unconsciousness in which there 6 is: 7 (a) The absence of voluntary action or cognitive 8 behavior of any kind. 9 (b) An inability to communicate or interact 10 purposefully with the environment. 11 (12)(11) "Physician" means a person licensed pursuant 12 to chapter 458 or chapter 459. 13 (13)(12) "Principal" means a competent adult executing an advance directive and on whose behalf health care decisions 14 15 are to be made. (14) (13) "Proxy" means a competent adult who has not 16 17 been expressly designated to make health care decisions for a particular incapacitated individual, but who, nevertheless, is 18 19 authorized pursuant to s. 765.401 to make health care decisions for such individual. 20 (15)(14) "Surrogate" means any competent adult 21 expressly designated by a principal to make health care 22 decisions on behalf of the principal upon the principal's 23 24 incapacity. 25 (15) "Terminal condition" means: (a) A condition caused by injury, disease, or illness 26 27 from which there is no reasonable probability of recovery and 28 which, without treatment, can be expected to cause death; or 29 (b) A persistent vegetative state characterized by a

permanent and irreversible condition of unconsciousness in

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1 1. The absence of voluntary action or cognitive
2 behavior of any kind; and

2. An inability to communicate or interact purposefully with the environment.

(16) "Treating physician" means the physician who has treated or is treating the patient for any condition directly related to the condition resulting in the patient's incapacity.

Section 13. Subsection (3) of section 765.102, Florida Statutes, is amended to read:

765.102 Legislative findings and intent.--

The Legislature recognizes further finds that for some the administration of life-prolonging medical procedures may result in the artificial prolongation of life for a person with a terminal condition may secure for him or her only a precarious and burdensome existence, while providing nothing medically necessary or beneficial to the patient. In order to ensure that the rights and intentions of a person with such a condition may be respected even after he or she is no longer able to participate actively in decisions concerning himself or herself, and to encourage communication among such patient, his or her family, and his or her physician, the Legislature declares that the laws of this state recognize the right of a competent adult to make an advance directive instructing his or her physician to provide, withhold, or withdraw life-prolonging procedures, or to designate another to make the treatment decision for him or her in the event that such person should become incapacitated and unable to personally direct his or her medical care be found to be incompetent and suffering from a terminal condition.

 Section 14. Section 765.103, Florida Statutes, is amended to read:

765.103 Existing advance directives.--Any advance directive made prior to October 1, 1999 April 10, 1992, shall be given effect as executed, as provided in this chapter provided such directive was legally effective when written.

Section 15. Section 765.104, Florida Statutes, is amended to read:

765.104 Amendment or revocation.--

- (1) An advance directive or designation of a surrogate may be <u>amended or</u> revoked at any time by a competent principal:
 - (a) By means of a signed, dated writing;
- (b) By means of the physical cancellation or destruction of the advance directive by the principal or by another in the principal's presence and at the principal's direction;
- (c) By means of an oral expression of intent to $\underline{\mathsf{amend}}$ or revoke; or
- (d) By means of a subsequently executed advance directive that is materially different from a previously executed advance directive.
- (2) Unless otherwise provided in the advance directive or in an order of dissolution or annulment of marriage, the dissolution or annulment of marriage of the principal revokes the designation of the principal's former spouse as a surrogate.
- (3) Any such <u>amendment or</u> revocation will be effective when it is communicated to the surrogate, health care provider, or health care facility. No civil or criminal liability shall be imposed upon any person for a failure to

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act upon an amendment or a revocation unless that person has actual knowledge of such amendment or revocation.

Section 16. Section 765.110, Florida Statutes, is amended to read:

765.110 Health care facilities and providers; discipline . --

- (1) A health care facility, pursuant to Pub. L. No. 101-508, ss. 4206 and 4751, shall provide to each patient written information concerning the individual's rights concerning advance directives and the health care facility's policies respecting the implementation of such rights, and shall document in the patient's medical records whether or not the individual has executed an advance directive.
- (2) A health care provider or health care facility may not require a patient to execute an advance directive or to execute a new advance directive using the facility's or provider's forms. The patient's advance directives shall travel with the patient as part of the patient's medical record.
- (3) A health care provider or health care facility shall be subject to professional discipline and revocation of license or certification, and a fine of not more than \$1,000 23 \$500 per incident, or both, if the health care provider or health care facility, as a condition of treatment or admission, requires an individual to execute or waive an advance directive.
- (4) The Department of Elderly Affairs for hospices and, in consultation with the Department of Elderly Affairs, the Department of Health for health care providers, and Rehabilitative Services and the Agency for Health Care 31 Administration for hospitals, nursing homes, home health

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 agencies, and health maintenance organizations, and the Department of Children and Family Services for facilities subject to part I of chapter 394 shall adopt rules to implement the provisions of the section.

Section 17. Subsection (2) of section 765.113, Florida Statutes, is amended to read:

765.113 Restrictions on providing consent.--Unless the principal expressly delegates such authority to the surrogate in writing, or a surrogate or proxy has sought and received court approval pursuant to rule 5.900 of the Florida Probate Rules, a surrogate or proxy may not provide consent for:

(2) Withholding or withdrawing life-prolonging procedures from a pregnant patient prior to viability as defined in s. $390.0111 \pm ... 390.001(5)$.

Section 18. Subsection (2) of section 765.204, Florida Statutes, is amended to read:

765.204 Capacity of principal; procedure.--

decisions for herself or himself or provide informed consent is in question, the attending physician shall evaluate the principal's capacity and, if the physician concludes that the principal lacks capacity, enter that evaluation in the principal's medical record. If the attending physician has a question as to whether concludes that the principal lacks such capacity, another physician shall also evaluate the principal's capacity. If the second physician agrees that the principal lacks the capacity to make health care decisions or provide informed consent, the health care facility shall enter both physician's evaluations in the principal's clinical record and, if the principal has designated a health care

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 surrogate, shall notify such surrogate in writing that her or his authority under the instrument has commenced.

Section 19. Subsection (2) of section 765.205, Florida Statutes, is amended to read:

765.205 Responsibility of the surrogate.--

(2) The surrogate may authorize the release of information and clinical records to appropriate persons to ensure the continuity of the principal's health care and may authorize the transfer and admission, discharge, or transfer of the principal to or from a health care facility or other facility or program licensed under chapter 400.

Section 20. Section 765.301, Florida Statutes, is amended to read:

765.301 Short title.--Sections $\underline{765.302-765.309}$ $\underline{765.302-765.310}$ may be cited as the "Life-Prolonging Procedure Act of Florida."

Section 21. Subsection (1) of section 765.302, Florida Statutes, is amended to read:

765.302 Procedure for making a living will; notice to physician.--

(1) Any competent adult may, at any time, make a living will or written declaration directing the providing, withholding, or withdrawal of life-prolonging procedures in the event such person suffers from a terminal condition. A living will must be signed by the principal in the presence of two subscribing witnesses, one of whom is neither a spouse nor a blood relative of the principal. If the principal is physically unable to sign the living will, one of the witnesses must subscribe the principal's signature in the principal's presence and at the principal's direction.

 Section 22. Subsection (1) of section 765.303, Florida Statutes, is amended to read:

765.303 Suggested form of a living will.--

(1) A living will may, but need not, be in the following form:

Living Will

Declaration made this day of, 19 I,, willfully and voluntarily make known my desire that my dying not be artificially prolonged under the circumstances set forth below, and I do hereby declare:

incapacitated have a terminal condition and if my attending or treating physician and another consulting physician have determined that there is no reasonable medical probability of my recovery from such condition, I direct that life-prolonging procedures be withheld or withdrawn when the application of such procedures would serve only to prolong artificially the process of dying, and that I be permitted to die naturally with only the administration of medication or the performance of any medical procedure deemed necessary to provide me with comfort care or to alleviate pain.

It is my intention that this declaration be honored by my family and physician as the final expression of my legal right to refuse medical or surgical treatment and to accept the consequences for such refusal.

In the event that I have been determined to be unable to provide express and informed consent regarding the withholding, withdrawal, or continuation of life-prolonging procedures, I wish to designate, as my surrogate to carry out the provisions of this declaration:

1	Name:
2	Address:
3	Zip Code:
4	Phone:
5	I understand the full import of this declaration, and I
6	am emotionally and mentally competent to make this
7	declaration.
8	Additional Instructions (optional):
9	• • • • • • • • • • • • • • • • • • • •
10	
11	
12	(Signed)
13	Witness
14	Address
15	Phone
16	Witness
17	Address
18	Phone
19	
20	Section 23. Subsection (2) of section 765.304, Florida
21	Statutes, is amended to read:
22	765.304 Procedure for living will
23	(2) Before proceeding in accordance with the
24	principal's living will, it must be determined that:
25	(a) The principal does not have a reasonable
26	probability of recovering <u>capacity</u> competency so that the
27	right could be exercised directly by the principal.
28	(b) The principal's physical condition is terminal.
29	$\underline{\text{(b)}}$ (c) Any limitations or conditions expressed orally
30	or in a written declaration have been carefully considered and
31	satisfied.

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Section 24. Section 765.305, Florida Statutes, is amended to read:

765.305 Procedure in absence of a living will.--

- (1) In the absence of a living will executed pursuant to s. 765.303, the decision to withhold or withdraw life-prolonging procedures from a patient may be made by a health care surrogate designated by the patient pursuant to part II unless the designation limits the surrogate's authority to consent to the withholding or withdrawal of life-prolonging procedures.
- (2) Before exercising the incompetent patient's right to forego treatment, the surrogate must be satisfied that +
- (a) the patient does not have a reasonable probability of recovering capacity competency so that the right could be exercised by the patient.
 - (b) The patient's physical condition is terminal.

Section 25. Section 765.306, Florida Statutes, is amended to read:

765.306 Determination of patient condition.--In determining whether the patient has a terminal condition or may recover capacity, or whether a medical condition or limitation referred to in an advance directive exists, the patient's attending or treating physician and at least one other consulting physician must separately examine the patient. The findings of each such examination must be documented in the patient's medical record and signed by each examining physician before life-prolonging procedures may be withheld or withdrawn.

Section 26. Section 765.308, Florida Statutes, is transferred, renumbered as section 765.1105, Florida Statutes, 31 and amended to read:

765.1105 765.308 Transfer of a patient; penalties.--

(1) A health care provider or facility that refuses to comply with a patient's advance directive the declaration of a patient, or the treatment decision of his or her surrogate, shall make reasonable efforts to transfer the patient to another health care provider or facility that will comply with the directive declaration or treatment decision. This chapter does not require a health care provider or facility to commit any act which is contrary to the provider's or facility's moral or ethical beliefs concerning life-prolonging procedures, if the patient:

- (a) Is not in an emergency condition; and
- (b) Has received written information upon admission informing the patient of the policies of the health care provider or facility regarding such moral or ethical beliefs.
- (2) A health care provider or facility that is unwilling to carry out the wishes of the patient or the treatment decision of his or her surrogate because of moral or ethical beliefs must within 7 days either:
- (a) Transfer the patient to another health care provider or facility. The health care provider or facility shall pay the costs for transporting the patient to another health care provider or facility; or
- (b) If the patient has not been transferred, carry out the wishes of the patient or the patient's surrogate, unless the provisions of s. 765.105 apply.
- (3) Except as provided under this section, a health care provider or facility who fails to comply with the advance directive of a patient, or the treatment decision of his or her surrogate, has no right to compensation for medical services provided to the patient after being informed of the

 existence of the advance directive or the treatment decision of the surrogate. The patient, the patient's heirs, or the patient's estate may bring a cause of action for the willful failure to comply with the patient's advance directive or the treatment decision of the patient's surrogate.

Section 27. Section 765.310, Florida Statutes, is transferred, renumbered as section 765.1115, Florida Statutes, and amended to read:

765.1115 765.310 Falsification, forgery, or willful concealment, cancellation, or destruction of <u>directive</u> declaration or revocation or amendment; penalties.--

- (1) Any person who willfully conceals, cancels, defaces, obliterates, or damages an advance directive a living will without the principal's consent or who falsifies or forges the revocation or amendment of an advance directive a revocation of a living will of another, and who thereby causes life-prolonging procedures to be utilized in contravention of the previously expressed intent of the principal, commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.
- directive living will of another or who willfully conceals or withholds personal knowledge of the revocation of an advance directive a declaration, with the intent to cause a withholding or withdrawal of life-prolonging procedures contrary to the wishes of the principal, and who thereby because of such act directly causes life-prolonging procedures to be withheld or withdrawn and death to be hastened, commits a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

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1 Section 28. Subsections (1) and (3) of section 765.401, Florida Statutes, are amended to read: 3 765.401 The proxy.--

- (1) If the patient has not executed an advance directive, or designated a surrogate to execute an advance directive, or the designated or alternate surrogate is no longer available to make health care decisions, health care decisions may be made for the patient by any of the following individuals, in the following order of priority, if no individual in a prior class is reasonably available, willing, or competent to act:
- (a) The judicially appointed guardian of the patient, who has been authorized to consent to medical treatment, if such guardian has previously been appointed; however, this paragraph shall not be construed to require such appointment before a treatment decision can be made under this subsection;
 - (b) The patient's spouse;
- (c) An adult child of the patient, or if the patient has more than one adult child, a majority of the adult children who are reasonably available for consultation;
 - (d) A parent of the patient;
- An The adult sibling of the patient; or, if the patient has more than one sibling, a majority of the adult siblings who are reasonably available for consultation.
- (f) An adult relative of the patient who has exhibited special care and concern for the patient and who has maintained regular contact with the patient and who is familiar with the patient's activities, health, and religious or moral beliefs; or
 - (g) A close friend of the patient.

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(3) Before exercising the incapacitated patient's rights to select or decline health care, the proxy must comply with the pertinent provisions applicable to surrogates under this chapter, except that a proxy's decision to withhold or withdraw life-prolonging procedures, if challenged, must be supported by clear and convincing evidence that the decision would have been the one the patient would have chosen had the patient been competent.

Section 29. Section 765.404, Florida Statutes, is created to read:

765.404 Persistent vegetative state.--For persons in a persistent vegetative state who have no advance directive and for whom there is no evidence indicating what the person would have wanted under such conditions, and who have no family or friends available or willing to serve as a proxy to make health care decisions for them, life-prolonging procedures may be withheld or withdrawn under the following conditions:

- (1) The person has a judicially appointed guardian representing his or her best interest with authority to consent to medical treatment.
- (2) The guardian, in consultation with the person's attending physician and the medical ethics committee of the hospital where the patient is located, or if there is no medical ethics committee, a permanent committee established by the Board of Medicine to review such cases, concludes that the condition is permanent and that there is no reasonable hope for recovery.

Section 30. The Department of Elderly Affairs shall convene a workgroup composed of health care professionals, health facilities, attorneys, consumers, clergy, academic institutions, and other interested parties to develop model

1 advance directive forms. The department shall make the forms available to the public. The department may reconvene the 2 3 workgroup as necessary to modify and update such forms. Subsection (4) of section 395.1027, 4 Section 31. 5 Florida Statutes, 1998 Supplement, is amended to read: 6 395.1027 Regional poison control centers.--7 (4) By October 1, 1999, each regional poison control 8 center shall develop a prehospital emergency dispatch protocol with each licensee defined by s. $401.23(14) \cdot \frac{13}{5.401.23}$ in 9 10 the geographic area covered by the regional poison control 11 center. The prehospital emergency dispatch protocol shall be developed by each licensee's medical director in conjunction 12 13 with the designated regional poison control center responsible for the geographic area in which the licensee operates. The 14 protocol shall define toxic substances and describe the 15 procedure by which the designated regional poison control 16 17 center may be consulted by the licensee. If a call is transferred to the designated regional poison control center 18 19 in accordance with the protocol established under this section 20 and s. 401.268, the designated regional poison control center shall assume responsibility and liability for the call. 21 22 Section 32. Section 732.916, Florida Statutes, is 23 repealed. 24 Section 33. This act shall take effect October 1, 1999. 25 26 27 28 29 30 31

LEGISLATIVE SUMMARY

Authorizes emergency medical technicians, paramedics, and personnel of hospital emergency services, long-term care facilities, assisted living facilities, home health agencies, hospices, and adult family-care homes to withhold or withdraw cardiopulmonary resuscitation pursuant to an order not to resuscitate. Provides protection from criminal prosecution, civil liability, and charges of negligent or unprofessional conduct for such action. Directs the Department of Health to develop standardized do-not-resuscitate identification cards or devices, and authorizes a fee therefor. Revises provisions relating to execution and implementation of advance directives, designation and responsibilities of health care surrogates and proxies, and procedures for executing, revising, and implementing living wills. Increases a penalty for health care facilities or providers that require patients to execute advance directives. Requires advance directives to become part of patients' medical records. Provides that willful failure to comply with a patient's advance directive or the treatment decision of a surrogate creates a cause of action by the patient or the patient's heirs or estate. Provides penalties for cancellation or destruction of an advance directive, rather than a living will. Provides conditions for withholding or withdrawing life-prolonging procedures for persons in a persistent vegetative state when there is no advance directive or health care proxy. Directs the Department of Elderly Affairs to convene a workgroup to develop model advance directive forms.