CHAMBER ACTION

The Health Care Regulation Committee recommends the following:

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Council/Committee Substitute

Remove the entire bill and insert:

A bill to be entitled

An act relating to the withholding or withdrawal of nutrition or hydration from incompetent persons; creating part VI of ch. 765, F.S.; providing a part title; providing quaranteed protections and presumptions; providing definitions; declaring that an incompetent person is presumed to have directed health care providers to provide the necessary nutrition and hydration to sustain life; prohibiting a court, proxy, or surrogate from withholding or withdrawing nutrition or hydration except under specified circumstances; providing that the presumption to provide nutrition and hydration is inapplicable under certain circumstances; amending ss. 765.106, 765.107, 765.204, 765.305, 765.401, and 765.404, F.S.; conforming provisions to changes made by the act; prohibiting an inference of incapacity due to a person's developmental disability; requiring a guardian to have spent a specified amount of time with a patient or ward before seeking to have nutrition or hydration withheld Page 1 of 18

from the patient or ward; creating s. 765.405, F.S.; providing for limitations on authority to apply the provisions of ch. 765, F.S.; providing for the act to apply to pending litigation and to apply retroactively; providing an effective date.

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WHEREAS, every individual is endowed by his or her Creator with an unalienable right to life, and

WHEREAS, the state has a high duty and responsibility to protect human life, without which no liberty or other interest can be enjoyed, and

WHEREAS, a competent individual has a fundamental liberty interest in directing his or her own medical treatment, including the refusal of life-prolonging treatment, and

WHEREAS, an incompetent individual retains his or her liberty interest in directing his or her own medical treatment, including the refusal of life-prolonging treatment, and

WHEREAS, the state has a strong interest in the prevention of homicide, euthanasia, and suicide, and

WHEREAS, the state has a strong interest in maintaining the ethical integrity of the medical profession and of the judiciary, and

WHEREAS, the state has a strong interest in maintaining the neutrality of the medical profession and the judiciary with respect to the values of medical patients and incompetents, and

WHEREAS, the state has a strong interest in ensuring that guardians, health care surrogates, and health care proxies exercise their duties and responsibilities exclusively in the

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interests of any incapacitated patient for whom they are charged by law to act, and

WHEREAS, the state has a strong interest in ensuring that medical treatment decisions do not cause preventable deaths, and

WHEREAS, the liberty interest of the individual in directing his or her own medical treatment, including the refusal of life-prolonging treatment, can overcome the state's interest in ensuring that medical treatment decisions do not cause preventable deaths, but such refusal also constitutes a waiver of the individual's right to life, and

WHEREAS, the waiver of the right to life constitutes a most fundamental exercise of human autonomy of obvious and overwhelming finality, and

WHEREAS, in light of a natural duty of each person to protect and sustain human life, preventable starvation and dehydration are not natural results of an inability to swallow voluntarily when the body is reasonably capable of receiving and processing nutrition and hydration introduced through minimally sophisticated, nonintravenous means, and

WHEREAS, the Legislature has determined that the withholding of food and water, even from animals, constitutes inhumane treatment, and

WHEREAS, the decision to discontinue hydration and nutrition of a patient constitutes a decision to terminate life and is comparable to other decisions to terminate important rights, and

WHEREAS, a waiver of such a fundamental right ought to be knowing, express, and informed, and

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WHEREAS, the state may repose judgment on these matters exclusively on the patient, and

WHEREAS, the state has an interest to maintain social order through enforcement of law and to protect the lives of those who wish to live no matter what their circumstances from the actions or decisions of others to terminate life, and

WHEREAS, the state has a strong interest in protecting against mistake or fraud and otherwise guarding against potential abuses in determining the desires of an incompetent patient when a refusal of life-prolonging treatment is asserted, and

WHEREAS, a withholding or withdrawal of nutrition or hydration, intended to cause death by starvation or dehydration, once fully completed, seriously implicates the state's interest in preventing suicide, homicide, and euthanasia, and

WHEREAS, the point at which life becomes "worthless," and the point at which the means necessary to preserve it become "extraordinary" or "inappropriate," are set forth in neither the Constitution of the United States nor the Constitution of the State of Florida, and

WHEREAS, the state can protect the right to life of incapacitated persons and prevent homicide, suicide, and euthanasia by ensuring that any exercise of an incapacitated person's right to refuse nutrition and hydration is not reasonably questionable, and

WHEREAS, the present governing law has allowed circumstances in which decisions to starve or dehydrate a person to death have been and are reasonably being questioned, and Page 4 of 18

WHEREAS, the Legislature is the branch of government most capable of receiving public input and vested with the responsibility to resolve broad public policy questions, and

WHEREAS, the Legislature has received uncountable e-mails, letters, telephone calls, and other public input over the past 16 months during which a great public interest has prevailed regarding the quality of present law governing starvation and dehydration of incompetent persons, and

WHEREAS, the Legislature concludes that it is better to err on the side of life even though no general rule can work faultlessly and though regulations intended to protect from fraud or mistake may in some cases frustrate the effectuation of possible, but not fully expressed, desires of an incompetent individual, and

WHEREAS, Floridians with severe physical and mental disabilities, who are particularly vulnerable to being devalued as burdens on society, should not be devalued and deemed worthless, and

WHEREAS, it is the intent of the Legislature to safeguard the personal element of the right to refuse nutrition and hydration and to ensure that any action of a guardian, surrogate, or proxy conforms as best it may to the wishes expressed by the person while competent by imposing heightened evidentiary requirements, establishing procedural safeguards that will reduce the opportunity for error, and limiting consideration of evidence to the prior expressed wishes of the person including a clearly expressed desire that the decision to

terminate life-sustaining treatment be made by a designated surrogate, and

WHEREAS, it is further the intent of the Legislature that the risk of an erroneous decision respecting the starvation or dehydration of an incapacitated person be on those seeking to terminate life-sustaining treatment, and

WHEREAS, it is the further intent of the Legislature to decline to make judgments about the "quality" of life that a particular individual may enjoy and to hereby assert an unqualified interest in the preservation of human life from decisions intended to cause starvation and dehydration except when a person has clearly expressed an informed consent to or appointed a surrogate authorized to consent to the withholding or withdrawal of nutrition and hydration necessary to sustain life, NOW, THEREFORE,

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

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Section 1. Part VI of chapter 765, Florida Statutes, consisting of sections 765.601, 765.6011, 765.602, 765.603, and 765.604, is created to read:

765.601 Part title.—This part may be cited as the
"Starvation and Dehydration of Incompetent Persons Prevention
Act."

765.6011 Scope.--Every living person is guaranteed the protections and presumptions provided by this part.

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

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voluntarily given with sufficient knowledge of the subject matter involved to enable the person giving consent to make a knowing and understanding decision without any element of force, fraud, deceit, duress, or other form of constraint or coercion.

Sufficient knowledge of the subject matter involved includes a general understanding of:

- (a) The proposed treatment or procedure for which consent is sought.
- (b) The medical condition of the person for whom consent for the proposed treatment or procedure is sought.
- (c) Any medically acceptable alternative treatment or procedure.
- (d) The substantial risks and hazards inherent if the proposed treatment or procedure is carried out and if the proposed treatment or procedure is not carried out.
- (2) "Nutrition" means sustenance administered by way of the gastrointestinal tract.
- (3) "Reasonable medical judgment" means a medical judgment that would be made by a reasonably prudent physician who is knowledgeable about the case and the treatment possibilities with respect to the medical conditions involved.
- 765.603 Presumption of nutrition and hydration sufficient to sustain life.--
- (1) Each incompetent person shall be presumed to have directed his or her health care providers to supply him or her with the nutrition and hydration necessary to sustain life.

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189	(2) A proxy, surrogate, or court may not decide on behalf
190	of an incompetent person to withhold or withdraw hydration or
191	nutrition from that person except in the circumstances and under
192	the conditions specifically provided in s. 765.604.
193	765.604 Presumption of nutrition and hydration; when
194	inapplicable The presumption in s. 765.603 does not apply if:
195	(1) In reasonable medical judgment:
196	(a) The provision of nutrition or hydration is not
197	medically possible;
198	(b) The provision of nutrition or hydration would hasten
199	death;
200	(c) The medical condition of the incompetent person is
201	such that provision of nutrition or hydration:
202	1. Would itself cause severe, intractable, or significant
203	long-lasting pain to the incompetent person;
204	2. Would itself cause significant medical harm to the
205	incompetent person; or
206	3. Would not contribute to sustaining the incompetent
207	person's life or provide comfort to the incompetent person; or
208	(d) In the reasonable medical judgment of the incompetent
209	person's attending physician and a second consulting physician:
210	1. Death is imminent;
211	2. Even with the use of medical treatment, the incompetent
212	person will die within a reasonably short period of time of a
213	terminal illness or injury; and
214	3. It is not the purpose of withdrawing or withholding
215	nutrition or hydration to cause death by starvation or
216	dehydration.

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217	(2) The incompetent person has executed a written advance
218	directive executed in another state in accordance with s.
219	765.112, executed a designation of a health care surrogate
220	prepared in accordance with s. 765.202, or executed a written
221	living will prepared in accordance with s. 765.302, any of which
222	authorizes the withholding or withdrawal of nutrition or
223	hydration, to the extent that the authorization applies; or
224	(3) There is clear and convincing evidence that the
225	incompetent person, when competent, expressly authorized
226	withdrawing or withholding nutrition or hydration in applicable
227	circumstances.
228	Section 2. Section 765.106, Florida Statutes, is amended
229	to read:
230	765.106 Preservation of existing rightsThe provisions
231	of this chapter are cumulative to the existing law regarding an
232	individual's right to consent, or refuse to consent, to medical
233	treatment and do not impair any existing rights or
234	responsibilities which a health care provider, a patient,
235	including a minor, competent or incompetent person, or a
236	patient's family may have under the common law, Federal
237	Constitution, State Constitution, or statutes of this state:
238	however, this section may not be construed to authorize a
239	violation of part VI.
240	Section 3. Subsection (1) of section 765.107, Florida
241	Statutes, is amended to read:
242	765.107 Construction
243	(1) This chapter shall not be construed to repeal by
244	implication any provision of s. 766.103, the Florida Medical Page 9 of 18 $$

Consent Law. For all purposes, the Florida Medical Consent Law shall be considered an alternative to provisions of this section; however, this section may not be construed to authorize a violation of part VI.

Section 4. Section 765.204, Florida Statutes, is amended to read:

765.204 Capacity of principal; procedure. --

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- (1) A principal is presumed to be capable of making health care decisions for herself or himself unless she or he is determined to be incapacitated. Incapacity may not be inferred from the person's voluntary or involuntary hospitalization for mental illness or from her or his mental retardation or developmental disability.
- If a principal's capacity to make health care 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 the principal lacks capacity, another physician shall also evaluate the principal's capacity, and 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 medical record. If the principal has designated a health care surrogate or has delegated authority to make health care decisions to an attorney in fact under a durable power of attorney, the facility shall notify Page 10 of 18

such surrogate or attorney in fact in writing that her or his authority under the instrument has commenced, as provided in chapter 709 or s. 765.203.

- (3) The surrogate's authority shall commence upon a determination under subsection (2) that the principal lacks capacity, and the such authority shall remain in effect until a determination that the principal has regained such capacity. Upon commencement of the surrogate's authority, a surrogate who is not the principal's spouse shall notify the principal's spouse or adult children of the principal's designation of the surrogate. If In the event the attending physician determines that the principal has regained capacity, the authority of the surrogate shall cease, but shall recommence if the principal subsequently loses capacity as determined under pursuant to this section.
- (4) A determination made <u>under</u> <u>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.
- (5) In the event the surrogate is required to consent to withholding or withdrawing life-prolonging procedures, the provisions of parts part III and VI shall apply.
- Section 5. Subsection (1) of 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, the decision to withhold or withdraw life-prolonging procedures from a patient may be made by a health care surrogate designated by the patient Page 11 of 18

<u>under</u> <u>pursuant to</u> part II unless the designation limits the surrogate's authority to consent to the withholding or withdrawal of life-prolonging procedures <u>or unless the</u> surrogate's authority is limited by part VI.

Section 6. Section 765.401, Florida Statutes, is amended to read:

765.401 The proxy.--

- (1) If an incapacitated or developmentally disabled 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 or the guardian advocate of the person having a developmental disability as defined in s. 393.063, 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;

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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;

- 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
 - A close friend of the patient; or-

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- A clinical social worker licensed pursuant to chapter 491, or who is a graduate of a court-approved guardianship program. Such a proxy must be selected by the provider's bioethics committee and must not be employed by the provider. If the provider does not have a bioethics committee, then the such a proxy may be chosen through an arrangement with the bioethics committee of another provider. The proxy will be notified that, upon request, the provider shall make available a second physician, not involved in the patient's care to assist the proxy in evaluating treatment. Decisions to withhold or withdraw life-prolonging procedures shall will be reviewed by the facility's bioethics committee involved in the proxy's selection. Documentation of efforts to locate proxies from prior classes shall must be recorded in the patient record.
- Any health care decision made under this part must be based on the proxy's informed consent and on the decision the proxy reasonably believes the patient would have made under the circumstances. If there is no indication of what the patient would have chosen, the proxy may consider the patient's best interest in deciding that proposed treatments are to be withheld

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or that treatments currently in effect are to be withdrawn. Any decision concerning the withholding or withdrawal of nutrition or hydration must comply with part VI.

- (3) Before exercising the incapacitated patient's rights to select or decline health care, the proxy must comply with the provisions of ss. 765.205 and 765.305, except that a proxy's decision to withhold or withdraw life-prolonging procedures 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 or, if there is no indication of what the patient would have chosen, that the decision is in the patient's best interest. Any decision concerning the withholding or withdrawal of nutrition or hydration must comply with part VI.
- (4) Nothing in this section shall be construed to preempt the designation of persons who may consent to the medical care or treatment of minors established <u>under pursuant to</u> s. 743.0645.
- (5) No incompetent person living in this state on the date of enactment of this act shall have nutrition or hydration withheld from him or her pursuant to this section by a guardian pursuant to chapter 744 or other proxy until the guardian or proxy has been present with the ward or patient for a minimum of 2 hours per week over a 12-week period or for an average of 10 hours each month over a 3-month period either:
- (a) Before a decision is made under this section for removal of nutrition and hydration; or
- 382 (b) Before nutrition and hydration is actually removed 383 from the patient or ward.

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Section 7. Section 765.404, Florida Statutes, is amended to read:

765.404 Persistent vegetative state. --For persons in a persistent vegetative state, as determined by the attending physician in accordance with currently accepted medical standards, who have no advance directive and for whom there is no evidence indicating what the person would have wanted under such conditions, and for whom, after a reasonably diligent inquiry, no family or friends are 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. \div and
- (2) The guardian and the person's attending physician, in consultation with the medical ethics committee of the facility where the patient is located, conclude that the condition is permanent and that there is no reasonable medical probability for recovery and that withholding or withdrawing life-prolonging procedures is in the best interest of the patient. If there is no medical ethics committee at the facility, the facility must have an arrangement with the medical ethics committee of another facility or with a community-based ethics committee approved by the Florida Bioethics Bio-ethics Network. The ethics committee shall review the case with the guardian, in consultation with the person's attending physician, to determine whether the condition is permanent and there is no reasonable medical Page 15 of 18

probability for recovery. The individual committee members and the facility associated with an ethics committee shall not be held liable in any civil action related to the performance of any duties required in this subsection.

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- Any decision concerning the withholding or withdrawal of nutrition or hydration must comply with part VI.
- Section 8. Section 765.405, Florida Statutes, is created to read:
 - 765.405 Limitation on authority to withhold or withdraw nutrition or hydration.--
 - (1) This section shall control over any inconsistent provision of law. A decision to withhold or withdraw nutrition or hydration from a person who is in a persistent vegetative state shall not be made by a guardian who has engaged in conduct prohibited under s. 744.446 or by a proxy or surrogate who is the person's spouse and who has engaged in conduct prohibited for guardians under s. 744.446.
 - (2) Guardians, surrogates, and proxies may not avoid their legal responsibility to make health care decisions by petitioning a court to make such decisions. No judge acting in a judicial capacity may make any decision to withhold or withdraw nutrition or hydration from a person who is in a persistent vegetative state. Any such petition is contrary to the public policy of this state set forth in s. 744.309(1)(b). It is the intent of the Legislature that judges serve as unbiased judges to hear petitions of proper parties questioning decisions of guardians, surrogates, or proxies under various statutory

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actions authorized in the applicable statutes but that any decision to withhold or withdraw nutrition or hydration from a patient in a persistent vegetative state not be made by any court or state officer acting in an official capacity, but only by a private guardian, surrogate, or proxy acting under the authority of the Florida Statutes subject to jurisdiction of the guardianship court as provided for the case by the Florida Statutes.

- (3) It is further the intent of the Legislature that the Florida Statutes provide the exclusive legal basis for end-of-life health care decisions in this state and that this chapter shall constitute and occupy the entire body of law regulating such decisions. It is the intent of the Legislature that in every case in which withholding or withdrawal of nutrition and hydration is not specifically authorized by statute, the public policy and law of this state prohibit such withholding or withdrawal if death by dehydration or starvation likely will result.
- (4) Nothing in this section shall be construed to create a cause of action against any proxy, surrogate, guardian, or health care provider for making any decision prior the effective date of this act pursuant to the Florida Statutes or to any court order.
- Section 9. The provisions of this act are remedial and are applicable to every living person on the effective date of this act, shall be applicable in any proceeding relating to withdrawal or withholding of hydration or nutrition from an incompetent patient pending on the effective date of this act,

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and shall, upon the petition of any interested party, regulate withdrawal or withholding of hydration or nutrition from any person living on the effective date of this act. In order to ensure that no person is starved or dehydrated in a manner that violates the protections afforded by this act, the provisions of this act shall apply retroactively to any health care decision made but not executed prior to the effective date of this act with respect to any person living on the effective date of this act. Section 10. This act shall take effect upon becoming a

law.