

Public Health Committee JOINT FAVORABLE REPORT

Bill No.: HB-5159

AN ACT CONCERNING THE RECOMMENDATIONS OF THE DEPARTMENT OF DEVELOPMENTAL SERVICES REGARDING OVERSIGHT OF

Title: EMERGENCY MEDICAL CARE AND END-OF-LIFE PLANNING.

Vote Date: 3/23/2018

Vote Action: Joint Favorable Substitute

PH Date: 3/20/2018

File No.: 231

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SPONSORS OF BILL:

Public Health Committee
Department of Developmental Services

REASONS FOR BILL:

HB-5159 allows an Advanced Practice Registered Nurse (APRN) to order or provide a second opinion on, a properly executed medical order to withhold cardiopulmonary resuscitation for an individual with intellectual disability under the Department of Developmental Services supervision. Current law requires two physicians, such as the attending physician and a physician providing a second opinion, to sign a Do Not Resuscitate (DNR) order to be issued for an individual with intellectual disability. The bill does not apply to individuals with intellectual disability who have a legally valid advanced directive.

RESPONSE FROM ADMINISTRATION/AGENCY:

Department of Developmental Services:

The Department of Developmental Services (DDS) supports HB-5159. Currently the law requires two physicians to issue a DNR for an individual with intellectual disability. DDS respectfully requests that language stating *“if the order to withhold cardiopulmonary resuscitation is written by an advanced practice registered nurse, the second opinion shall be obtained from a physician”* be removed from the bill, as it was inadvertently placed there. DDS requests that APRN’s be given authorization to substitute for either one or both physicians on a DNR for an individual with intellectual disability. APRN’s should be able to order and provide a second opinion, provided one of them is in the appropriate specialty that confirms a patient’s terminal condition. Often an APRN is the professional who cares for the

individual, communicates with the family, documents and signs the note supporting any change in a DNR status. However, currently, the APRN must have two physicians concur with the DNR change because DDS does not recognize the signature of the APRN as having this authority. This bill, with the suggested revision, will address this problem.

HB-5159 also clarifies that if a person had a living will prior to becoming incapacitated the living will shall be honored, and the fact that an individual has a guardian or conservator does not mean that this legal representative is allowed to overturn the individual's living will. This will ensure that civil rights of individuals with intellectual disabilities are upheld, specifically for those who do not have a guardian or conservator.

NATURE AND SOURCES OF SUPPORT:

Lynn Rapsilber, DNP, ANP-BC, APRN, FAANP, Chair, Connecticut Coalition of Advanced Practice Nurses:

Ms. Rapsilber, in her capacity as Chair of the Coalition of Advanced Practice Nurses, believes the language in HB-5159 which states "*if the order to withhold cardiopulmonary resuscitation is written by an advanced practice registered nurse, the second opinion shall be obtained from a physician*" does not reflect the practice authority of an APRN. An APRN has practice authority to order a DNR, and participate in Medical Orders for Life Sustaining Treatment (MOLST). If this language remains in the bill, the coalition requests that APRN's be added as a second opinion when an order for withholding CPR is written.

NATURE AND SOURCES OF OPPOSITION:

None provided.

Reported by: Valentina Mehmeti

Date: 4/4/2018