

2020 Kansas Statutes

65-1,260. Palliative care and quality of life interdisciplinary advisory council; creation; membership; duties. (a) There is hereby created the palliative care and quality of life interdisciplinary advisory council within the department of health and environment. The purpose of this council is to develop recommendations and advise the department of health and environment on matters related to the establishment, maintenance, operation, outcomes evaluation of palliative care initiatives in the state, and effectiveness of the palliative care consumer and professional information and education program.

(b) (1) The palliative care and quality of life interdisciplinary advisory council shall consist of 13 members appointed on or before October 1, 2018. The members shall be appointed as follows: (A) Two members appointed by the governor; (B) two members appointed by the speaker of the house of representatives; (C) one member appointed by the minority leader of the house of representatives; (D) two members appointed by the president of the senate; (E) one member appointed by the minority leader of the senate; (F) one member appointed by the secretary of health and environment who shall represent the department of health and environment; (G) one member appointed by the secretary for aging and disability services who shall represent the department for aging and disability services; (H) one member of the house committee on health and human services appointed by the chair of the house committee on health and human services; (I) one member appointed by the majority leader of the house of representatives; and (J) one member of the senate committee on public health and welfare appointed by the chair of the senate committee on public health and welfare.

(2) Members of the palliative care and quality of life interdisciplinary advisory council shall be individuals with experience and expertise in interdisciplinary palliative care medical, nursing, social work, pharmacy and spiritual guidance. Membership shall specifically include health care professionals having palliative care work experience or expertise in palliative care delivery models in a variety of inpatient, outpatient and community settings and with a variety of populations including pediatric, youth and adults. At least two members of the palliative care and quality of life interdisciplinary advisory council shall be board-certified hospice and palliative medicine physicians or nurses, and at least one member shall be a patient or a caregiver.

(3) Members of the palliative care and quality of life interdisciplinary advisory council shall serve for a period of three years and shall serve at the pleasure of their respective appointing authorities. The members shall elect a chair and vice chair whose duties shall be established by the council. The department of health and environment shall fix a time and place for regular meetings of the council, which shall meet at least twice annually.

(4) Members of the palliative care and quality of life interdisciplinary advisory council shall serve without compensation, but shall be reimbursed for their actual and necessary expenses incurred in the performance of their duties.

(c) "Palliative care" means an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual. Palliative care:

- (1) Provides relief from pain and other distressing symptoms;
- (2) affirms life and regards dying as a normal process;
- (3) intends neither to hasten or postpone death;
- (4) integrates the psychological and spiritual aspects of patient care;
- (5) offers a support system to help patients live as actively as possible until death;
- (6) offers a support system to help the family cope during the patient's illness and in their own bereavement;
- (7) uses a team approach to address the needs of patients and their families, including bereavement counseling, if indicated;
- (8) will enhance quality of life, and may also positively influence the course of illness; and

(9) is applicable early in the course of illness, in conjunction with other therapies that are intended to prolong life, such as chemotherapy or radiation therapy, and includes those investigations needed to better understand and manage distressing clinical complications.

History: L. 2018, ch. 66, § 3; July 1.