

## GENERAL SESSION

January 25, 2017

### ***Program Topics: HB76 End-of-Life Legislation, SB48 Nursing Compact***

**Presented by:** HEALTH AND HUMAN SERVICES COMMITTEE  
Heather Williamson & Peg Alderman

#### **Speakers:**

**Representative Rebecca Chavez-Houck (D) District 24**  
**Laura Bunker, President, United Families International**

**Senator Evan Vickers (R) District 28**



Rep. Chavez-Houck spoke about her bill, [HB76](#), that specifies conditions under which a physician may prescribe life-ending drugs for a terminally ill patient who requests them. The bill provides immunity to those who participate in the process lawfully. There is a

growing number of states that have explicitly legalized "Death With Dignity", and she would like Utah to join that group. She explained that Utah law does not address the issue explicitly; her bill fills that need. Moreover, polling indicates 58% of Utahns support this legislation.

She said that personal stories would be the best way to influence Utah's legislators to support the bill. Indeed, more than one WSLC member in attendance had such a story to tell.

Oregon has had a DWD option for 20 years, and in that time about 1250 people have chosen to end their lives under that provision.

Utah's proposed law includes several restrictions and safeguards that are meant to address potential patient coercion or collusion between medical professionals. Patients would be counseled about all options available to them.

Rep. Chavez-Houck noted that physicians may be more willing to discuss end of life when patients come to them with such a request. The topic is often difficult to broach, but when DWD is available, physicians are able to be more candid in their patient discussions. A least one study found that the patients who choose DWD are likely to be informed and determined.

In response to questions, Rep. Chavez-Hauck said that she was not sure how Utah's current laws would apply to DWD. Montana's state Supreme Court upheld the practice even though the state law had not explicitly permitted it. In contrast, New Mexico's court ruled against the legality DWD.

Another question concerned Oregon's experience with the practice, and the questioner wanted to know how many requests had been denied. The representative said she did not know. Subsequent research indicated that during the first few years, at least, 21% of requests were denied. The use of the option has increased steadily over the years, reaching 132 deaths in the most recent years of reporting.

In opposition, Laura Bunker of [United Families International](#) spoke about the potential for abuse of the law and loss of time with loved ones who might choose to leave too early.

She refuted the term "Death With Dignity" because she views the practice as a form of assisted suicide. The measure protects the prescribing physician from prosecution, a protection that she feels is unwarranted. She noted that unassisted suicide is "a right", but DWD has too many situations where a health provider or family member might provide direct assistance to the patient.

Bunker commented on countries in Europe, particularly Belgium and The Netherlands, which have steadily liberalized the conditions under which DWD is allowed. She decried the increasing use of the measures and the increases in the overall suicide rates there and also in Oregon.

In her view, the trust between a patient and a health professional is eroded when the patient is rendered vulnerable by an illness and a physician discusses any form of suicide.

There were several questions from the audience about Oregon's suicide rate and the potential causes and whether or not DWD is causally linked to the totality of suicides. One questioner noted that Utah's suicide rate is already one of the highest in the nation, but Utah does not have DWD.

Another questioner asked why DWD would be viewed differently from "advance directives" about treatment. Bunker replied that those directives have the respect of the medical community.

Bunker emphasized her passion with the statement: "Great meaning and love is found in the midst of suffering. Our dying loved ones need us to help them be strong; they easily feel they are a burden and can lose the will to live. Our best medical care is needed, not a prescription for death."

A WSLC member spoke about her relative's current medical condition and the value that DWD would bring to the prospect of end of life.

WSLC President Shauna Scott-Bellacomo told members that the next meeting would probably have one or more resolutions for the group to vote on with respect to HB76.



Sen. Vickers spoke about [SB48](#), a bill that updates the 26 state "nursing compact" that allows a nursing license to be accepted in those states. The member states of the compact all agree to the same set of laws governing administration of the multi-state licensing process. The compact requires, among

other things, reporting of license revocations and suspensions. Utah is a member of the compact, and it, along with the other members, need to update their licensure laws to remain in the compact.

The Senator said that the update was simple and had no opposition. Nonetheless, it had taken a great deal of work to bring it to fruition.

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Most of the WSLC members were unfamiliar with the compact and most of their questions centered on understanding the compact. Little time was left for discussing what the updates were and what benefits they might bring.

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