COUNCIL OF THE DISTRICT OF COLUMBIA

NOTICE

D.C. LAW 7-210

"D.C. General Hospital Hospice Program Establishment Act of 1988".

Pursuant to Section 412 of the District of Columbia Self-Government and Governmental Reorganization Act, P. L. 93-198, "the Act", the Council of the District of Columbia adopted Bill No. 7-147 on first and second readings November 29, 1988, and December 13, 1988, respectively. Following the signature of the Mayor on January 6, 1989, this legislation was assigned Act No. 7-281 published in the January 20, 1989, edition of the <u>D.C. Register</u>, (Vol. 36 page 478) and transmitted to Congress on January 23, 1989 for a 30-day review, in accordance with Section 602(c)(1) of the Act.

The Council of the District of Columbia hereby gives notice that the 30-day Congressional Review Period has expired, and therefore, cites this enactment as D.C. Law 7-210, effective March 16, 1989.

DAVID A. CLARKE Chairman to the Council

Dates Counted During the 30-day Congressional Review Period:

January 24,25,26,27,30,31

February 1,2,3,6,7,8,9,21,22,23,24,27,28

March 1,2,3,6,7,8,9,10,13,14,15

Enrolled Original

MAR 1 6 1988

Codification, New Chapter 11 of title 3, District of Columbia Code (1989 Supp.)

AN ACT

D.C. ACT 7 - 281

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

JAN 0 6 1989

To establish a hospice program to be administered by D.C. General Hospital.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the "D.C. General Hospital Hospice Program Establishment Act of 1988".

Sec. 2. For the purposes of this act, the term:

(1) "Terminal condition" means an incurable condition caused by injury, disease, or illness, which, regardless of the application of life-sustaining procedures, would, within reasonable medical judgment, produce death within 6 months or less.

New, Section 3-1101

Sec. 3. D.C. General Hospital Hospice Program established.

New, Section 3-1102

- (a) There is established a hospice program to be administered by the D.C. General Hospital. The purpose of this program shall be to:
- Provide care and support for the patients who have a terminal condition;
- (2) Educate consumers and providers regarding the benefits of hospice programs; and

(3) Encourage volunteerism to assist the

- terminally iil.

 (b) The program shall be designed to enable the patient to live as fully as possible during the final period of his or her life.
- (c) The program shall be administered by the Hospice Program Coordinator ("Coordinator"), who shall be appointed by the Executive Director of D.C. General Hospital ("Executive Director"), with the consent of the D.C. General Hospital Commission ("Hospital Commission"), within 120 days after the effective date of this act. The Coordinator position shall be full-time.

(d) The duties of the Coordinator shall include, but not be limited to:

(1) Assisting and counseling the family of the

patient before and after the death of the patient;

(2) Educating the D.C. General Hospital health-care staff and the community about the hospice concept and the program's activities;

(3) Establishing a hospice volunteer program

utilizing existing systems and community resources;

(4) Selecting, with the consent of the Executive Director and the Hospital Commission, a location to carry out the functions of the program; and

(5) Establishing an inpatient component of the program pursuant to the Certificate of Need Act, effective September 16, 1980 (D.C. Law 3-99; D.C. Code, sec. 32-301 et

seq.). (e) There shall be a hospice care team that shall carry out the purposes of this act and provide for the physical, emotional, and spiritual needs of the terminally ill patient.

(f) The program shall offer the following types of

services:

Inpatient management;

(2) Home care;

(3) Clinic treatment;

Bereavement counseling; and

(5) Consultation with attending physicians.

Sec. 4. Appropriations. There is authorized to be appropriated funds necessary to carry out the purposes of this act.

Sec. 5. Rules. Within 120 days of the effective date of this act, the D.C. General Hospital Commission shall, pursuant to section 210 of the D.C. General Hospital Commission Act, effective May 31, 1977 (D.C. Law 1-134; D.C. Code, sec. 32-220), issue proposed rules to implement the provisions of this act. The proposed rules shall be submitted to the Council for a 45-day period of review, excluding Saturdays, Sundays, legal holidays, and days of Council recess. If the Council does not approve or disapprove the proposed rules, in whole or in part, by resolution within this 45-day review period, the proposed rules shall be deemed approved.

Sec. 6. The D.C. General Hospital Commission shall report, on an annual basis beginning December 31, 1989, to the Council of the District of Columbia regarding the development of the program and the number of patients served.

New, Section 3-1105

New,

New,

Section

3-1103

Section

3-1104

Sec. 7. This act shall take effect after a 30-day period of Congressional review following approval by the Mayor (or in the event of veto by the Mayor, action by the Council of the District of Columbia to override the veto) as provided in section 602(c)(1) of the District of Columbia Self-Government and Governmental Reorganization Act, approved December 24, 1973 (87 Stat. 813; D.C. Code, sec. 1-233(c)(1)).

Chairman

Council of the District of Columbia

Mayor

District of Columbia

APPROVED: January 6, 1989



COUNCIL OF THE DISTRICT OF COLUMBIA

Council Period Seven

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Secretary to the Council