

# **PALLIATIVE CARE & HOSPICE EDUCATION AND TRAINING ACT**

**BACKGROUND** Palliative care improves quality, controls cost and enhances patient/family satisfaction for the rapidly expanding population of patients with serious or life-threatening illness. In practice, this involves detailed and skilled communication with patients and families to create goals and determine preferences, as well as expert assessment and management of physical, physiological and other sources of suffering across multiple settings. In the last five years alone the number of palliative care programs has more than doubled in response to the increasing numbers and needs of Americans living with serious, complex and chronic illnesses and the realities of the care responsibilities faced by their families. Palliative care is a relatively new medical specialty and more must be done to ensure an adequate palliative care workforce is available to provide comprehensive symptom management, intensive communication and a level of coordination of care that addresses the episodic and long-term nature of serious, chronic illness.

## **BILL SUMMARY**

### **PALLIATIVE CARE AND HOSPICE EDUCATION CENTERS**

Establishes Palliative Care and Hospice Education Centers to improve the training of interdisciplinary health professionals in palliative care; develop and disseminate curricula relating to palliative care; support the training and retraining of faculty; support continuing education; provide students with clinical training in appropriate sites of care; and provide traineeships for advanced practice nurses.

### **PHYSICIAN TRAINING**

Authorizes grants or contracts to schools of medicine, teaching hospitals and GME programs to train physicians (including residents, trainees, and fellows) who plan to teach palliative medicine. Such programs will provide training in palliative medicine through a variety of service rotations, such as consultation services, acute care services, extended care facilities, ambulatory care and comprehensive evaluation units, hospice, home health, and community care programs. Programs will be required to develop specific performance-based measures to evaluate the competency of trainees.

### **ACADEMIC CAREER AWARDS**

Establishes a program to promote the career development of physicians who are board certified or board eligible in Hospice and Palliative Medicine and have a junior (non-tenured) faculty appointment at an accredited school of medicine. Eligible individuals must provide assurance of a full-time faculty appointment in a health professions institution and commit to spend a majority of their funded time teaching and developing skills in interdisciplinary education in palliative care.

### **WORKFORCE DEVELOPMENT**

Authorizes funding for up to 24 Palliative Care and Hospice Education Centers to establish fellowship programs that provide short-term intensive courses focused on palliative care. The fellowships will provide supplemental training for faculty members in medical schools and other health professions schools, targeted to current faculty, and appropriately credentialed volunteer faculty and practitioners, who do not have formal training in palliative care, to upgrade their knowledge and clinical skills for the care of individuals with serious or life-threatening illness and to enhance their interdisciplinary teaching skills. The fellowship programs will support the team approach of palliative care and allow formal re-training of mid-career physicians in palliative medicine.

### **CAREER INCENTIVE AWARDS**

Provides grants or contracts for eligible health professionals who agree to teach or practice in the field of palliative care for at least 5 years. Eligible individuals include: advanced practice nurses, clinical social workers, pharmacists, students of psychology who are pursuing a doctorate or other advanced degrees in palliative care or related fields in an accredited health professions school.