

# ***VERMONT*2009**

## *Palliative Care and Pain Management Report*

Report to the Legislature Pursuant to **Act 25, Section 19**  
January 15, 2010



**DEPARTMENT OF HEALTH**  
**Agency of Human Services**

Board of Medical Practice  
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## ***Introduction***

Section 19 of Act 25 (2009-2010) provides that, by January 15, 2010, the Board of Medical Practice and the Board of Nursing must report to the House Committee on Human Services and the Senate Committee on Health and Welfare regarding their “recommendations for improving the knowledge and practice of health care professionals in Vermont with respect to palliative care and pain management.”

This is the Board of Medical Practice’s Report.

In formulating the recommendations that follow, the Board of Medical Practice consulted with many organizations and individuals, including the Vermont Ethics Network, the Palliative Care and Pain Management Task Force, the Vermont Medical Society, the Board of Nursing, and the Vermont Association of Hospital and Health Systems. Seven medical students and numerous faculty members from the University of Vermont College of Medicine also provided enormous assistance to the Board by, for example, designing and carrying out an invaluable survey of Vermont-licensed physicians.

## ***Recommendation 1: Establish a Palliative Care Hotline for Physicians and Other Health Care Professionals***

The Board recommends that a Palliative Care Hotline be established and overseen 24 hours a day, 365 days a year, by physicians who are certified by the American Board of Medical Specialties (ABMS) in hospice and palliative medicine, if possible. Physicians and other health care professionals calling a toll-free number could speak to a staff member at an emergency medical service. The staff member would page the palliative-care physician on call who would then contact the initial caller with advice on alleviating suffering and with information about available resources.

Fletcher Allen Health Care (FAHC) has set up such a hotline as part of its comprehensive Palliative Care Program. In addition to the hotline, FAHC provides telemedicine palliative care consultation, a mentorship program for rural health care providers, and site visits to community hospitals to provide updates on palliative care issues and education. The Board encourages support of the FAHC hotline.

Approximately half of Vermont-licensed physicians surveyed by University of Vermont College of Medicine students stated that they would be likely to utilize such a provider network for access to information relating to pain management and palliative care. A majority of physicians also indicated that access to appropriate pain management services is a barrier to achieving effective patient care in regard to pain management.

## ***Recommendation 2: Provide Legislative Authority for the Board of Medical Practice to Require Continuing Medical Education Credits Before Physician License Renewal***

The Board recommends that Section 1400 (a) of Title 26, Vermont Statutes Annotated, be amended to provide explicit authority for the Board to require Continuing Medical Education (CME) credits in order for a physician to renew his or her license to practice medicine in Vermont.

The Board is still exploring how much and what kind of CME should be required of physicians. The Board does, however, recognize the value of the American Board of Medical Specialties (ABMS) certification process, and believes that maintaining ABMS certification in a specialty or subspecialty should meet any CME requirements established. In order to assist consumers in finding out whether a particular Vermont-licensed physician is ABMS certified and to help consumers learn which Vermont-licensed physicians are ABMS certified physicians, the Board has placed information about ABMS on the Board website:

[http://healthvermont.gov/hc/med\\_board/PhysiciansCertifiedbyAMBS.aspx](http://healthvermont.gov/hc/med_board/PhysiciansCertifiedbyAMBS.aspx)

A substantial majority of Vermont-licensed physicians surveyed by University of Vermont College of Medicine students view mandatory CME on palliative care and pain management to be unnecessary. Physicians surveyed most prefer CME education through online modules.

## ***Recommendation 3: Hold a Conference to Further Explore Palliative Care and Pain Management Issues in Vermont***

In January, 2005, the State of Pennsylvania established a statewide Task Force for Quality at the End of Life. The Task Force's charge was to recommend improvements in the state's capacity to maintain the quality of life of the growing elderly population and of those with serious illness. Comprised of representatives from academia; government; medical institutions; consumers; providers; and disability, faith-based, and minority communities, the Task Force made 160 detailed recommendations reaching to such areas as provision of care, financing of care, and professional education. The Task Force's comprehensive 2006 Report may be accessed here:

<http://www.aging.state.pa.us/aging/lib/aging/DOA-102forweb.pdf>

Section 18 of Act 25 created a similar Palliative Care and Pain Management Task Force in Vermont coordinated by the Vermont Ethics Network (VEN). Based on information collected from health care providers, nursing homes, residential care facilities, assisted living facilities, insurance companies, VEN will hold a statewide meeting on March 22, 2010 at Gifford Hospital in Randolph. This meeting will bring together professionals and other stakeholders who have an interest in shaping systemic improvements to palliative care and pain management services across the state. The goals of the meeting will be to briefly review the current understanding of how these services are being accessed and delivered; to prioritize common themes that emerge relative to gaps and recommendations; and finally to map out a statewide plan for improving palliative care and pain management services for all Vermonters. The Board supports VEN's conference initiative.