



Palliative Care & Hospice Education and Training Act

S. 2243

Background

Palliative care improves quality of life, enhances patient and family satisfaction with care, and controls costs for the rapidly expanding population of individuals with serious illness or multiple chronic conditions. In 2001, just 7% of U.S. hospitals with 50+ beds had a palliative care program, compared with 72% in 2019. Yet, not all these programs have in place the interdisciplinary team necessary to provide comprehensive, high-quality palliative care. At the same time, palliative care is increasingly being provided in community settings. This growth comes in response to the growing number and needs of Americans living with serious or complex chronic illnesses and the realities of the care responsibilities faced by their families. More must be done to ensure patients and providers understand the benefits of palliative care and to build a healthcare workforce aligned with the nation's evolving healthcare needs. PCHETA will help ensure an adequate, appropriately trained workforce is available to provide the pain and symptom management, intensive communication and level of care coordination that addresses the episodic and long-term nature of serious and complex chronic illness.

Bill Summary

EDUCATION – Establishes Palliative Care and Hospice Education Programs to support the training of interdisciplinary health professionals, including physicians, nurses, social workers, physician assistants, chaplains, and others in palliative care; support the training and retraining of faculty; provide students with clinical training in appropriate sites of care; and provide training to integrate palliative and hospice care into primary and specialty care practices.

- **PHYSICIAN TRAINING** – Authorizes grants or contracts to schools of medicine, teaching hospitals and graduate medical education programs to train physicians who plan to teach or practice 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** – Promotes the career development of physicians, nurses, social workers, physician assistants, chaplains, or other disciplines identified by the Secretary. Eligible individuals must be board certified or board eligible in Hospice and Palliative Medicine or have completed specialty training in palliative and hospice care and have a junior (nontenured) 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** – Supports palliative care workforce development through fellowship programs providing short-term intensive courses focused on palliative care. Supporting the team approach to palliative care, the fellowships will provide supplemental training for faculty members in medical schools, nursing schools, or education programs in psychology, pharmacy, social work, physician assistant, chaplaincy, or other health disciplines approved by the Secretary. Such fellowships can upgrade their knowledge and skills for the care of individuals with serious or life-threatening illnesses as well as enhance their interdisciplinary teaching skills.
- **CAREER INCENTIVE AWARDS** – Authorizes institutions to provide awards to physicians, advanced practice nurses, social workers, physician assistants, psychologists, chaplains, pharmacists, and other health professionals approved by the Secretary who agree to teach or practice in the field of palliative care for at least 5 years.
- **NURSE TRAINING** – Creates special preferences in existing nurse education law for hospice and palliative nursing, in education, practice and quality grants, workforce development, and nurse retention projects.

AWARENESS – Provides for the establishment of a national campaign to inform patients, families, and health professionals about the benefits of palliative care and the services that are available to support patients with serious or life-threatening illnesses. Directs the dissemination of information, resources and materials about palliative care services to health professionals and the public in a variety of formats, in consultation with professional and patient stakeholders.

RESEARCH – Directs the National Institutes of Health to use existing authorities and funds to expand palliative care research to advance clinical practice and improve care delivery for patients with a serious or life-threatening illness.