

Here is a brief overview of objections to Simon's Law, which passed the Senate 3/16/2017 with a bi-partisan 29-7-2 vote.

Objection #1, "Simon's Law is unnecessary."

FACTS:

- A version of Simon's Law was originally introduced in Missouri, but the current bill was forged when KFL worked with national and local disability rights advocates, neonatal/pediatric specialists, and advisors from Via Christi/Ascension Hospitals.
- Too many families have been victimized by secret DNR orders placed on their medically-fragile children, as catalogued in an award-winning short film, "Labeled."
- Medical groups endorsing Simon's Law verify the existence of a "quality of life" bias, which puts medically-fragile children at risk for denied or rationed care.

Objection #2, "Kansans Do Not Support Simon's Law"

FACTS:

- Simon's dad, Scott Crosier, grew up in Kansas (K-State grad) and parents, siblings, cousins, etc. live in Kansas. Kansans strongly support parental rights protection.
- A Topeka family testified their infant son nearly died from a unilateral DNR order. They continue to face similar medical bias against their two special-needs children.

Objection #3, "Simon's Law needs amending to ensure Hospital Ethics Panels can resolve parental disputes."

FACTS:

- Simon's Law does not affect internal hospital policies about dispute resolution. No new statutory powers should be given to internal advisory panels, which are constituted differently among institutions. Physicians already have court access for professional concerns over treatment plans.
- Parents must not be limited in accessing all pertinent spiritual, medical, and legal advice when facing an emotionally taxing health crisis for their child. Hospital dispute recommendations must remain recommendations, not demands.

**Objection #4, “Medical bias and
DNRs without parental consent are not problems.”**

FACTS:

- Last year’s survey by the American Society of Pediatrics found that, depending on the scenario posed, up to 77% of responding members were comfortable ordering unilateral DNRs. These are the physicians most directly treating NICU babies.
- Medical ethics journals increasingly urge physicians to stop labeling infants and children with certain life-limiting challenges as "incompatible with life" with the resultant refusal to treat. They reference the evolution of societal and medical attitudes towards individuals with Down Syndrome.
- If, as some claim, unilateral DNR placements are not a problem in Kansas, then implementing Simon’s Law should not be a major issue.

Objection #5, “Simon’s Law makes parents sign a death warrant.”

FACTS:

- The original Simon’s Law wording for written parental DNR consent was removed.
- The revised Simon’s Law requires (1) that no DNR order can be placed in a child’s medical file before parents receive written and oral notification, with the details of that action entered in the file. (2) The DNR order may then proceed, unless parents object (orally or in writing). (3) During conflict resolution, DNR cannot go into effect.

Objection #6, “Simon’s Law is still opposed by a key hospital.”

FACTS:

- In the House Fed-State Committee, two pediatrician opponents (one from Missouri) testified in their personal capacities, not on behalf of their employers.
- From *The Sentinel*: “Dr. Laura Miller-Smith, chair of the Ethics Committee at Children’s Mercy in Kansas City, said her organization is neutral ... very supportive of a bill that supports shared and informed decision-making. [Children’s Mercy] does not have a futility policy. We do have a policy that requires mediation between physicians and families when they cannot agree upon an end-of-life care plan. This policy does not allow physicians to unilaterally withdraw life support.”
- Simon’s Law is the result of years of evidence, discussion and compromise; no more “fixes” are necessary.