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Owner Nate Wadsworth:
Chief Nursing
Officer
Policy Area Administration

End of Life Care Policy

Purpose

This policy states the processes WHMC have in place to deal with a terminal patient situation as it relates to Washington State Death with Dignity Act.

Policy

1. Washington law recognizes certain rights and responsibilities of qualified patients and health care providers under the Death with Dignity Act ("Act"). Under Washington law, a health care provider, including Whitman Hospital and Medical Clinics (WHMC) is not required to assist a qualified patient in ending that patient's life.
2. WHMC has chosen to not participate under the Act. This means that in the performance of their duties, WHMC physicians, employees, independent contractors and volunteers shall not assist a patient in ending the patient's life under the Act. In addition, no provider may participate on the premises of the hospital or in property owned by the hospital.
3. No patient will be denied other medical care or treatment because of the patient's participation under the Act. The patient will be treated in the same manner as all other WHMC patients. The appropriate standard of care will be followed.
4. Any patient wishing to receive life-ending medication while a patient at WHMC will be assisted in transfer to another facility of the patient's choice. The transfer will assure continuity of care.
5. All providers at WHMC are expected to respond to any patient's query about life-ending medication with openness and compassion. WHMC believes our providers have an obligation to openly discuss the patient's concerns, unmet needs, feelings and desires about the dying process. Providers should seek to learn the meaning behind the patient's questions and help the patient understand the range of available options, including but not limited to, comfort

palliative care, hospice care and pain control. Ultimately, WHMC's goal is to help patients make informed decisions about end-of-life care.

Procedure

1. All patients will be provided with educational materials about end-of-life options. These materials will include a statement that WHMC does not participate in the Act.
2. If, as a result of learning of WHMC's decision not to participate in the Act, the patient wishes to have care transferred to another hospital of the patient's choice, WHMC staff will assist in making arrangements for the transfer. If the patient wishes to remain at WHMC, staff will discuss what end-of-life care will be provided consistent with hospital policy.
3. If a patient requests a referral to a physician who will fully participate under the Act or expresses the desire to take medication that will result in the patient's death, the provider may choose to provide the patient with a referral or may instruct the patient that he or she must find a participating provider on his or her own. The relevant medical records will be transferred to the physician taking over the patient's care. The patient's primary clinical caregiver (nurse or social worker) will be responsible for the following:
 - a. Informing the patient's attending physician as soon as possible and no longer than one working day, that the patient wishes to take life-ending medications.
 - b. Ensuring that the medical record is complete and all required documentation is included. A copy of the Resuscitation Status (DNR) order, copies of advance directives and POLST forms are to be included.
 - c. Communicating with other clinicians involved with the patient to ensure continuity of care.
 - d. Documenting all communication in the patient's medical record.
4. Nothing in this policy prevents a physician or provider from making an initial determination that the patient has a terminal disease and informing the patient of the medical prognosis.
5. Nothing in this policy prevents a physician or provider from providing information about the Act to a patient when the patient requests information.
6. Nothing in this policy prohibits a physician who is employed by or who is an independent contract of WHMC from participating under the Act when not functioning within the scope of his or her capacity as an employee or independent contractor of WHMC.

SANCTION

If a provider participates in the Act beyond what is allowed in the policy, WHMC may impose sanctions on that provider. WHMC shall follow due process procedures provided for in the medical staff bylaws.

- a. Loss of medical staff privileges;
- b. Loss of membership;
- c. Restriction from provider panel;
- d. Termination of lease or other property contract;
- e. Termination of contracts

PUBLIC NOTICE

WHMC will provide public notice of this policy in the following ways: posting the policy or information about the hospital's stance on the Act on the hospital's web page; informing local media; including information in the hospital's community newsletters; including information in hospital materials regarding advance directives; and including information in patient's rights handbooks.

Any patient, employee, independent contractor, volunteer or physician may contact the Ethics Committee, Chaplaincy, Social Services or Patient Advocate for assistance.

Approval

3-19-14 Board of Commissioners approved this policy.

References

Laws/Regulations:

Initiative 1000/Washington Death with Dignity Act

Washington State Department of Health Regulations Chapter 246-978 WAC (Currently at CR-102 stage)

The Oregon Death with Dignity Act: A Guidebook for Health Care Professionals

Approval Signatures

Step Description	Approver	Date
	Hank Hanigan: Chief Executive Officer	7/19/2024, 11:38AM EDT
	Bill Bryant: Chief Nursing Officer	7/17/2024, 6:56PM EDT