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Owner Janine Siegel:
Bioethicist
Area Ethics, Rights
and
Responsibilities
Applicability All Hospitals +
Yakima +
Ambulatory
References DOH

Death with Dignity (AID in Dying) (I-1000)

Scope:

This is a system policy applicable to all MultiCare Health System (MHS) hospitals and facilities. It includes Allenmore Hospital, Auburn Medical Center, Capital Medical Center, Covington Medical Center, Deaconess Medical Center, Good Samaritan Hospital, Mary Bridge Children’s Hospital, Tacoma General, Valley Hospital, Yakima Memorial Hospital, all ambulatory areas, and MultiCare Home Health & Hospice.

Note: For Mary Bridge Children’s Hospital the patient must be 18 years and older.

Definitions:

Act means Washington’s Death with Dignity Act, codified at RCW 70.245.010 et seq.

Attending Qualified Medical Provider means the qualified medical provider who has primary responsibility for the care of the patient and treatment of the patient’s terminal disease.

Consulting Qualified Medical Provider means a qualified medical provider who is qualified by specialty or experience to make a professional diagnosis and prognosis regarding the patient’s disease.

Life Ending Medications means medications prescribed to a Qualified Patient under the Act for self-administration by the Qualified Patient for the purpose of ending his or her life in accordance with the Act.

Qualified Medical Provider includes physician, physician assistant, and advanced registered nurse practitioner.

Qualified Patient means a patient who meets all of the criteria under the Act and who has performed all of the requisite steps required under the Act in order to obtain a prescription for Life Ending Medications pursuant to the Act.

Social Work/Case Manager means the assigned social worker, care manager, hospice team member or other department providing substantially similar service or support to the patient.

Policy Statement:

MHS acknowledges the rights and responsibilities under the Washington Death with Dignity Act (“Act”) also known as Initiative 1000. This policy outlines MHS participation under the Act.

- A. MHS Qualified Medical Providers and other Clinical Staff are expected to respond to questions about Death with Dignity with respect and compassion. No Patient will be denied other medical care or treatment because of the Patient’s participation under the Act.
- B. Qualified Patients, as defined in the Act, may not ingest Life Ending Medications at any MHS hospital, medical center, or facility.
- C. MHS pharmacies will not fill prescriptions for Life Ending Medications prescribed under the Act.
- D. Members of the Medical Staffs of any MHS hospital and other Qualified Medical Providers employed by MHS may counsel their Patients about the Act.
- E. Members of the Medical Staffs of any MHS hospital or hospice, and any other Qualified Medical Provider employed by MHS, may serve in the role of Attending or Consulting Qualified Medical provider as defined by and in accordance with the Act, provided they do not facilitate delivery or ingestion of Life Ending Medications within any MHS hospital or facility.
- F. MHS Employees and Qualified Medical Providers are allowed to make their own individual decisions regarding their level of participation in working directly with Qualified Patients who choose to participate in the Act. Those that choose to participate should know and understand the requirements of the Act.
- G. All Qualified Medical Providers employed by MHS who choose to participate in activities under the Act should be familiar with the reporting and documentation obligations under the Act. Forms for Patients and Providers are located here: <https://doh.wa.gov/data-and-statistical-reports/health-statistics/death-dignity-act/forms-patients-and-providers>

Home Health & Hospice Provisions

- A. Home Health & Hospice personnel will provide all ordinary care routinely delivered to patients at home regardless of their participation in the Act.
- B. Home Health & Hospice personnel may discuss Death with Dignity/Medical Aid in Dying as a treatment option for terminally ill Patients and provide resources about dispensing pharmacies and participating physicians.

- C. Home Health & Hospice personnel may, at their option, serve as witnesses for Qualified Patients who elect Death with Dignity/Medical Aid in Dying.
- D. Home Health & Hospice personnel **may not**:
 - 1. Facilitate the physical delivery of Life Ending Medications to a Qualified Patient's residence, or
 - 2. Assist Qualified Patients in managing their Initiative 1000 prescriptions, or
 - 3. Assist Qualified Patients in ingesting Life Ending Medications.

Rights and Responsibilities:

- A. Patients who have questions about the Act or their rights under the Act should be directed to Social Work or the patient's Qualified Medical Provider.
- B. Social Work, in coordination with Care Management and other members of the care team, will provide Patients who request information about the Act with resource materials appropriate to their inquiry.
- C. Qualified Patients who desire to ingest Life Ending Medications at any MHS hospital will be informed that they cannot do so while admitted to the hospital and that staff will not aid or assist any Patients in undertaking acts to end their life in the acute care setting.
 - 1. If they wish to proceed prior to their planned discharge from the hospital, they will be advised of the need for discharge and transfer or transport to another suitable location.
 - 2. Reasonable steps will be taken to accommodate the Qualified Patient's desire for early discharge and transfer or transport, subject to approval by their Attending Qualified Medical Provider (unless the Patient insists upon leaving against medical advice) and after the Patient has consented to such transfer or transport.
- D. The appropriate House Supervisor or Manager on Duty will be notified in the event of any attempt on the part of a Qualified Medical Provider, Patient, Family Member or Surrogate to allow or enable a Qualified Patient to take Life Ending Medications prescribed under the Act while admitted to the hospital.

References:

Compassion & Choices of WA accessed 7.24.2023 from <https://www.compassionandchoices.org/in-your-state/washington/for-patients>

The WA Death With Dignity Act, RCW 70.245 accessed 7.24.2023 from <https://apps.leg.wa.gov/rcw/default.aspx?cite=70.245&full=true>

WA Administrative Code Death with Dignity Act Requirements Title 246 accessed 7.24.2023 from: <https://app.leg.wa.gov/wac/default.aspx?cite=246-978>

WA State DOH Forms for Patients and Providers Death with Dignity Act accessed 7.24.2023 from <https://doh.wa.gov/data-and-statistical-reports/health-statistics/death-dignity-act/forms-patients-and-providers>

Notes:

7/17 Added Covington Medical Center to the scope

2/20 Added Home Health and Hospice to the scope

Approved by MHS QSSC March 2022 to apply to Capital Medical Center

Paper copies of this document may not be current and should not be relied on for official purposes. The current version is on the organization intranet.

Attachments

[1: Initiative 1000 – Death with Dignity Summary of I-1000 Documentation Requirements for Providers Who Elect to Participate](#)

Approval Signatures

Step Description	Approver	Date
Council / Committee Approvals	Michelle Bowers: QM System Project Analyst Sr	07/2023
Policy Coordinator	Michelle Bowers: QM System Project Analyst Sr	07/2023
	Janine Siegel: Bioethicist	07/2023

Standards

No standards are associated with this document