

POLICY

Advance Directives

Category: Organizational

Sub-Category: Rights & Responsibilities

Type: POLICY

Status: Active

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Regulatory Source(s): The Joint Commission

Other: CMS, WAC

Regulatory Citation Number(s): RI.01.05.01 ; §482.13(b)(3)

Citation title: RI.01.05.01 The hospital addresses patient decisions about care, treatment, and services received at the end of life. §482.13(b)(3) The patient has the right to formulate advance directives and to have hospital staff and practitioners who provide care in the hospital comply with these directives, in accordance with §489.100 Home Care RI.0105.01 The organization addresses patient decisions about care, treatment, or services received at the end of life. WAC 246-335-535 A home health agency at the time of admission must provide each patient, designated family member, or legal representative with a written bill of rights affirming each of patient's right to: (14) Be informed about advanced directives and POLST and agency's scope of responsibility

PURPOSE:

Yakima Valley Memorial recognizes and respects the rights of all patients to dictate instructions about preferences for future medical services and strives to support patients, substitutes, and staff through the process. Yakima Valley Memorial staff members support our patients' rights to document and share their preferences by:

- Informing and educating patients of their rights to create and revise an advance directive
- Identifying patients who have a valid advance directive
- Assisting patients who wish to execute their advance directives
- Provide definition clarity

SCOPE: Workforce

This policy is intended to provide enterprise-wide expectations and standards for all staff members caring for patients with advance directives. This includes staff members who care for patients in the hospital, ambulatory clinics, emergency department, surgery and/or any diagnostic testing departments.

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1. Inpatients, or outpatients in the emergency department, observation, or undergoing same-day surgery procedures with moderate, deep, or general anesthesia will be informed of their right to execute an advance directive; issuance of the written notice to the patient or the patient's representative, and whether or not the patient executed an advance directive must be documented in the patient's medical record. Patient preferences relative to advance directives will be available to all caregivers at Yakima Valley Memorial .
2. If an adult patient is incapacitated at the time of admission or at the start of care and is unable to receive information (due to the incapacitating conditions or a mental disorder), or articulate whether or not he or she has executed an advance directive, then Yakima Valley Memorial will

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give advance directive information to the individual's family or substitute, in accordance with State law.

3. Yakima Valley Memorial staff will follow standard processes to properly document and store a patient's advance directive in their electronic or paper health record.
4. Advance directives policy details apply to both inpatients and outpatients and comply with all relevant state and federal laws.
5. Yakima Valley Memorial staff will be educated and trained in their specific role on how to create, modify, store, and review an advance directive to guide future treatment and preferences.
6. Yakima Valley Memorial providers make every effort to respect a patient's choices by partnering with the patient's family or appointed representative, whenever possible, to interpret the documented preferences advance directives within the scope of their practice and state laws.
7. No patient is required to execute an advance directive as a condition of receiving care at Yakima Valley Memorial .

DEFINITIONS:

Advance directives: There are two parts. Refers to voluntarily written instructions in which patients indicate their preferences with regards to who may speak for them if they become incapacitated and cannot speak for themselves. It also indicates their preference for future medical treatment and procedures to both family and care providers in the event they are not capable of doing so themselves. Washington State law provides two mechanisms for doing so: 1) Health Care Directive (Living Will) and 2) Durable Power of Attorney for Health Care (DPOA-HC). These two kinds of directives can be signed on separate papers or sometimes are combined in a single document. An advance directive can be amended or revoked by the patient at any time.

Durable Power of Attorney for Health Care: (DPOA-HC): Available at YVM.

A document that allows an adult patient 18 and older, to give an authorized representative, referred to as a health care agent or durable power of attorney the right to make health care decisions in the event that the patient becomes incapacitated and unable to speak for themselves when making decisions about their health care. **This document may be notarized but may also be witnessed by two people meeting the rules for witnesses. These 2 people can be YVM employees.** The patient's provider cannot act as power of attorney for health care, unless they are also the patient's spouse, adult child or sibling.

Health Care Directive (Living Will): Meant to be filled out with the Provider prior to hospitalization. (see references)

A document that allows an adult patient 18 and older to instruct family, health care agent, and health care providers to limit or withdraw life sustaining treatments in the event of a terminal condition or permanent unconscious condition. "Life sustaining measures" refers to advanced high tech care that can

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keep a person alive past the time when death would normally come. **This document must be signed by the patient in the presence of two witnesses not related to the patient by blood or marriage and not entitled to or having a claim against any portion of the patient’s estate.** In addition, Yakima Valley Memorial workforce or the patient’s physician may **not** serve as a witness.

Life-Sustaining Treatment: Any medical or surgical intervention that uses mechanical or other artificial means, including artificially provided nutrition and hydration, to sustain, restore, or replace a vital function, which, when applied to a qualified patient, would serve only to prolong the process of dying. “Life-sustaining treatment” shall not include the administration of medication or the performance of any medical or surgical intervention deemed necessary solely to alleviate pain.” [RCW 70.122.020(5).]

Physician Order for Life-Sustaining Treatment (POLST): An actionable physician order that describes the patient’s wishes regarding issues of life support and end of life care on a portable document. This document serves in settings outside the hospital and communicates health care decisions to emergency responders and other medical professionals. POLST forms are recommended for patients with serious advanced illnesses and fragility. A POLST form can be used as an official order in the hospital if it is reviewed and signed by both the patient or their legal representative and the Provider within 24 hours of the admission.

REFERENCES: YVM Notary Public Services Policy. YVM Physician Orders for Life-Sustaining Treatment Policy. Advanced Care Planning – Overview - Honoring Choices Pacific Northwest. Honoringchoicespnw.org

Resources:
Honoring Choices Pacific Northwest, WSHA, WSMA Foundation Document

KEYWORD Indexes:
Living Will, DPOA, Durable Power of Attorney, Patient Rights, POLST, Life Sustaining Treatment

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