

Advance Directive Process for Patient Access Services

Purpose:

To allow patients the ability to provide Advance Directive information (Living Will and Power of Attorney) to their healthcare provider as well as allow hospital staff access to the most up-to-date Advance Directive information on each admission.

Policy:

Advance Directive process for Patient Access Services:

A. Registrars and Yakima Valley Memorial Hospital Patient Access Services will ask EVERY adult at the time of EVERY admission and at EACH visit when the patient may go to a bed if the patient has an Advance Directive. The registrar will ask the patient if the document is available through the Living Will Registry. If so, the representative will search for the document at <http://doh.wa.gov/livingwill> using either the registration number from the patient's wallet card or the patient's last name and date of birth.

B. Patient Access Services will electronically enter the Advance Directive information in our electronic system documenting:

- Patient does not have a Living Will and/or Healthcare Proxy;
- Patient has a Living Will and/or Healthcare Proxy;
- Patient refused to answer question regard Living Will and/or Healthcare Proxy;
- Not known if patient has a Living Will and/or Healthcare Proxy.

The registrar will provide the required written information to the patient/surrogate and electronically document when:

- The patient/surrogate requested Living Will and/or Healthcare Proxy information;
- Living Will and/or Healthcare Proxy information was provided to the patient/surrogate
- Patient/surrogate refused Living Will and/or Healthcare Proxy Information.

If the patient is preregistered, he/she will be asked to bring a copy of the Advance Directive to the medical center at the time of admission.

C. The patient/surrogate will be given Memorial's Guide to Patient Services and Information booklet which includes an explanation of YVMH's policies and procedures concerning informed consent and Advance Directive required written material "Choices... For You and Your Family" Directives to Physicians and Durable Power of Attorney for Health Care in Washington State, the Washington State Living Will Registry information and information regarding Washington State Natural Death Act law as it relates to Advance Directives.

D. If, for any reason, the patient is unable to receive the above information or give answers concerning Advance Directives; the representative for the patient will be questioned and given Memorial's Guide to Patient Services and Information booklet which includes the required written material "Choices... For You and Your Family" Directives to Physicians and Durable Power of Attorney for Health Care in Washington State, the Washington State Living Will Registry information and information regarding Washington State Natural Death Act law as it relates to Advance Directives.

E. If a patient, in the course of his/her hospitalization regains the ability to receive or understand information about Advance Directives, the patient will be provided the required written information at the time the registrar obtains signatures during our follow-up admission process done by Patient Access Services.

Complaints concerning the Advance Directive requirements may be filed by individuals (patients, families, others) with the state survey and certification agency.



*Yakima Valley
Memorial Hospital*

Death with Dignity Act Policy

Policy:

Memorial will not participate in the Death with Dignity Act. The act of dispensing and administering drugs for the purpose of a patient voluntarily being allowed to take his/her life will not occur in any facilities that are operated by Memorial or its subsidiaries, although physicians may be allowed to counsel patients for such a purpose.

In addition, it is understood that Memorial does not intend to impose these restrictions upon non-Memorial entities who lease space in Memorial-owned facilities.



Yakima Valley
Memorial Hospital

Provision for Advance Directive Community Education

Purpose:

Yakima Valley Memorial Hospital Family of Services is committed to proactively providing patients/families with information to increase their knowledge around end-of-life issues to help them be better prepared and have the appropriate processes/documents in place to guide future care decisions. Memorial/FOS is also committed to providing end-of-life information to staff and providers so they have the necessary information to support/guide patients and families through the end of life.

Policy:

Memorial/FOS provides education for staff, providers and the public on a regular basis around end-of-life issues, such as Advance Directives, Five Wishes, Coping with Grief and Loss, end-of-life care, ethics, difficult conversations, funeral planning, palliative care, available community programs/services, staff roles/responsibilities in key services. Community education includes information about the public's right to make decisions about their medical care, formulating Advance Directives and receiving information about Memorial policies around end-of-life care, including Advance Directives.



*Yakima Valley
Memorial Hospital*

Physician Order for Life-Sustaining Treatment (POLST)

Purpose:

Identification of patient's end-of-life directives and medical interventions.

Policy:

The POLST form is a 'portable' physician order form that describes the patient's wishes for resuscitation. The POLST form is intended to accompany the patient from one care setting to another. It translates an Advance Directive into physician orders. In order to be valid the POLST must be signed by the patient/legal surrogate and the physician, his/her ARNP or PA.

Withholding and Withdrawing Life-Sustaining Treatments

Policy:

Yakima Valley Memorial Hospital Family of Services is dedicated to the provision of healing, restorative and palliative care to people who are sick and to the care of those who are suffering or dying. Both human and technological resources are offered. To restore health and support life are among the organization's principal goals. This means that every appropriate effort is made to cure the sick and rehabilitate the injured. For persons with a terminal illness, we will provide for their comfort, symptom control and emotional, social and spiritual support rather than life-sustaining treatments.

Definitions:

- A. **Life-sustaining treatment** is any medical intervention that uses mechanical or other artificial means, including artificially provided nutrition or 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 may include but is not limited to the following: cardiopulmonary resuscitation (CPR), transfer to the Intensive Care Unit, artificially administered nutrition and hydration.
- B. **Withdrawing life-sustaining treatment** is termination of treatment already in progress.
- C. **Withholding life-sustaining treatment** means not initiating life-sustaining treatment. It is consistent with the written "Do Not Resuscitate" order.
- D. **Terminal condition** means an incurable and irreversible condition caused by disease, injury or illness that within reasonable medical judgment will cause death within a reasonable period of time in accordance with accepted medical standards, and where the application of life-sustaining treatment serves only to prolong the process of dying.
- E. **Do Not Resuscitate** means basic and advanced life support is withheld; automatic initiation of cardiopulmonary resuscitation is suspended.