

PURPOSE: To describe the position of Providence Health & Services (“Providence”) regarding physician assisted suicide under the Washington Death with Dignity Act (the “Act”) in Providence facilities, programs and services in the state of Washington and to provide guidance in caring for patients who express interest ending their life under the Act.

APPLIES TO: Providence specializes in end-of-life and palliative care services to ease patient and family suffering. This policy is limited to assisted suicide, physician assisted suicide, or self-administered life-ending medication and does not cover the many end-of-life care services Providence provides. This policy applies to Providence ministries, employees and volunteers, including all employed and contracted physicians and other professional health care providers while carrying out work-related duties for Providence either within or outside its facilities.

END OF LIFE CARE:

Providence provides end-of-life care that takes care of the physical, emotional, social, and spiritual needs of the patient and his or her family. The end-of-life care Providence provides is grounded in the values of respecting the sacredness of life, providing compassionate care to dying and vulnerable persons, and respecting the integrity of health care providers. Providence believes that compassionate, end-of-life care should neither prolong nor hasten the natural dying process. Providence will not abandon dying patients or their families and is committed to provide appropriate support for dying persons and their families through the final stages of life by supporting patient self-determination through the use of advance directives, offering hospice, palliative and other supportive care, and providing effective pain and symptom management and other social, spiritual, and pastoral care support and services.

POLICY:

1. Patients, families, nurses, physicians, and other providers are encouraged to explore fully and discuss care and treatment options for terminally ill patients.
 - a. As part of that discussion, requests for physician assisted suicide or self-administered life-ending medication may occur.
 - b. We respect the rights of patients and their care team to discuss and explore all treatment options, but Providence, its facilities, programs, and caregivers do not participate in any way in assisted suicide.
 - c. Any member of a patient care team may respond to questions from a patient and family, but any request for planning of physician assisted suicide must be referred to an “attending” physician, as defined in the Act.
2. Providence physicians, employees, and volunteers may not knowingly participate in or facilitate physician assisted suicide and may not provide, deliver, administer, or assist with the administration of any medication intended for physician assisted suicide, or be present when a patient ingests medications with the intent of completing physician assisted suicide.
3. When a patient expresses intent to pursue physician assisted suicide, the patient will be informed that Providence will not participate or assist in that act and its physicians, employees, and volunteers will not provide, deliver, administer, or assist the patient with the lethal prescription. Providence caregivers will still provide all other requested end-of-life and palliative care and other services to patients and families.

4. Consistent with this policy, Providence will continue to provide care to patients who qualify for and request services, regardless of their stated interest in seeking physician assisted suicide.

Key Words: Physician Assisted Suicide, End-of-Life Care, Palliative Care

References: Per WAC 246-320-141 this policy must be publicly posted on PSPH internet site, any updates must be reported to the state and updated on the internet site within 30 days of update

Owner: Spiritual Care Director

Contributing Department: WA Council

Administrative Approval:

Medrice Coluccio
Chief Executive