

# Three Rivers Hospital

<b>DEPARTMENT:</b> Facility Wide	<i>Page 1 of 2</i>	<u>Effective Date:</u>	<b>REVIEWED</b>	
		<u>Approval Date:</u>	<b>Date</b>	<b>Initials</b>
<b>SUBJECT:</b>  Death With Dignity Act / Initiative 1000 – Hospital and its Providers Will Not Participate	Medical Director	Date		
	Director of Patient Care	Date		
	Chief Executive Officer	Date		

## POLICY

- I. 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 Three Rivers Hospital, is not required to assist a qualified patient in ending that patient’s life.
- II. Three Rivers Hospital (TRH) has chosen to not participate under the Death with Dignity Act. This means that in the performance of their duties, TRH 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.
- III. 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 TRH patients. The appropriate standard of care will be followed.
- IV. Any patient wishing to receive life-ending medication while a patient at this hospital will be assisted in transfer to another facility of the patient’s choice. The transfer will assure continuity of care.
- V. All providers at TRH are expected to respond to any patient’s query about life-ending medication with openness and compassion. TRH 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 care, hospice care, and pain control. Ultimately, TRH’s goal is to help patients make informed decisions about end-of-life care.

## PROCEDURE

- I. All patients will be provided with educational materials about end-of-life options. These materials will include a statement that TRH does not participate in the Act.

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<b>SUBJECT:</b>  End of Life Care	Medical Director	Date		
	Director of Patient Care	Date		
	Chief Executive Officer	Date		

## POLICY

- I. Upon admission to Three Rivers Hospital, each patient will receive the Patients' Rights and Responsibilities to assist with making decisions concerning medical care including: the right to accept or refuse medical or surgical treatment, and the right to formulate advanced directives.
  
- II. Each patient admitted to Three Rivers Hospital will be asked, by the admissions clerk, as to whether they have an advanced directive or not. Every patient admitted as Same Day Surgery, Swingbed, Observation, Obstetrics or Acute Care will be asked, by the nurse, if they have an advanced directive or a living will. This will be documented in the patients chart.
  
- III. Hospitals must comply with the following elements:
  - A. have policies, in accordance with law and regulations, that address advance directives and the framework for forgoing or withdrawing life-sustaining treatment and withholding resuscitative services and consistently implement them;
  - B. provide adult patients with written information about their rights to accept or refuse treatment and hospital policies addressing these rights;
  - C. document the existence or absence of a patient's signed advance directive;
  - D. document and honor, within the limits of the law or hospital capacity, a patients' wishes concerning organ donation;
  - E. upon request, help or refer patients for assistance in formulating advance directives, including reviewing and revising existing directives; and
  - F. have a mechanism for health care professionals and designated representatives to honor advance directives within limits of the law or hospital capabilities.
  - G. the patient will be informed that complaints concerning the advanced directive requirements may be filed with the state survey and certification agency.
  - H. the staff will be educated on the facility's policy and procedure concerning advanced directives.
  - I. provide community education.
  
- IV. In outpatient hospital settings, the hospital must:
  - A. develop and implement policies addressing advance directives, specifying whether the hospital will honor the directives;
  - B. inform patients and families of these policies upon request or as appropriate for care, treatment, and services provided; and

- C. help patients formulate advance directives or refer them to other entities for assistance.
- V. Patients have the right to pain management. Hospitals must plan, support, and coordinate activities and resources to:
  - A. assess for pain;
  - B. educate all relevant providers about assessing and managing pain; and
  - C. educate patients and families about their roles in managing pain, including the potential limitations and side effects of pain treatments.
- VI. Development of a plan for care, treatment, and services is individualized and appropriate to the patient's needs, strengths, limitations, and goals.
- VII. Comfort and dignity are optimized during end-of-life care.
  - A. Hospital educate staff about the unique needs of dying patients and their families and caregivers.
- VIII. Surrogate Decision-Making:
  - A. Patients are involved in decisions about care, treatment, and services provided.
  - B. Patients have the right to refuse care, treatment, and services in accordance with law and regulations.