



East Adams Rural
Healthcare

Effective 06/2009

Approved 02/2025

Last Revised 11/2012

Expiration 02/2026

Owner **Lurisa Sackman:**
CNO

Department **Nursing/ER**

Death with Dignity Act, Non-Participation

POLICY:

1. 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 Adams County Public Hospital District #2, is not required to assist a qualified patient in ending that patient's life.
2. The District has chosen to **not** participate under the Death with Dignity Act. This means that in the performance of their duties, Hospital 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 District or in property owned by the hospital.
3. 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 Hospital patients. The appropriate standard of care will be followed.
4. The hospital will assist a patient wishing to receive life-ending medication by coordinating care with a participating healthcare provider in a manner that will assure the patient's continuity of care.

PROCEDURE:

1. All patients will be provided with educational materials about end-of-life options. These materials will include a statement that Hospital does not participate in the Act.
2. If, as a result of learning of the District's decision not to participate in the Act, the patient wishes to have care transferred to another hospital of the patient's choice, District physicians and staff will assist in making arrangements for the transfer. If the patient wishes to remain at the District, staff will discuss what end of life care will be provided consistent with hospital policy.
3. If a patient requests a referral to a physician who will fully participate under the Act or expresses the desire to take medication that will result in the patient's death, the provider may choose to provide the patient with a referral, or may instruct the patient that he or she must

find a participating provider on his or her own. The relevant medical records will be transferred to the physician taking over the patient's care. The patient's primary clinical care giver will be responsible for:

- a. Informing the patient's attending physician as soon as possible that the patient wishes to take life-ending medications.
 - b. Ensuring that the medical record is complete and all required documentation is included. A copy of the Resuscitation Status (DNR) order, copies of advance directives, and POLST form are to be included.
 - c. Communicating with other clinicians involved with the patient to ensure continuity of care.
 - d. Documenting all communication in the patient's medical record.
4. Nothing in this policy prevents a physician or provider from making an initial determination that the patient has a terminal disease and informing the patient of the medical prognosis.
 5. Nothing in this policy prevents a physician or provider from providing information about the "Washington State Death with Dignity Act" to a patient when the patient requests information.
 6. This policy does not prohibit a physician who is employed by or who is an independent contractor of the District from participating under the Act when not functioning within the scope of his or her capacity as an employee or independent contractor of the District.

SANCTIONS:

If a provider participates in the Act beyond what is allowed in the policy, Hospital may impose sanctions on that provider. Hospital shall follow due process procedures provided for in the medical staff bylaws. Sanctions may include:

PUBLIC NOTICE:

Hospital will provide public notice of this policy by posting the policy or information about the hospital's stance on the Death with Dignity Act on the hospital's web page; informing local media; including information in hospital materials regarding advance directives; and including information in patient's rights handbooks.

REFERENCES

Initiative 1000/Washington Death with Dignity Act
Washington State Department of Health Regulations Chapter 246-978 WAC

All Revision Dates

11/2012

Approval Signatures

Step Description	Approver	Date
	Lurisa Sackman: CNO	02/2025
	Lexie Zuver: Provider	02/2025
	Deborah Deboard: Nurse Manager	02/2025

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East Adams Rural
Healthcare

Effective 03/2014
Approved 02/2025
Last Revised 11/2015
Expiration 02/2026

Owner Lurisa Sackman:
CNO
Department Nursing/ER

Palliative Care

DISTRIBUTION:

Hospital, Swing bed

PURPOSE:

To allow a patient death with dignity. To be comfortable, with family and friends at the bedside

POLICY:

Patient's wishes as documented on the POLST or Advanced Directives will be honored. Routine care will be provided with comfort in mind. A care cart is available to the family to provide refreshments. Family members may stay as long as they like and may participate in care if they desire. Pastoral services are available by family request

All Revision Dates

11/2015

Approval Signatures

Step Description	Approver	Date
	Lurisa Sackman: CNO	02/2025
	Lexie Zuver: Provider	02/2025

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