



Columbia County Health System	
Administration & Medical Staff	Ref. No.: 1216
Effective Date: 10/26/2015	Subject
Approval: Jim Kime (), Kyle Terry (MD, Chief of Staff), Shane McGuire (COO), Stephanie Carpenter (RN, CNO)	<i>Death with Dignity Act</i>
	<input checked="" type="checkbox"/> Policy <input checked="" type="checkbox"/> Procedure <input type="checkbox"/> Protocol

PURPOSE:

To provide policy and procedure regarding the Death with Dignity Act/Initiative 1000.

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's law, a health care provider, including Columbia County Health System (CCHS) is not required to assist a qualified patient in ending that patient's life.
2. CCHS has chosen to not participate under the Death with Dignity Act. This means that in the performance of their duties, CCHS physicians, employees, independent contractors and volunteers shall not assist a patient in pharmacologically 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.
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 CCHS patients. The appropriate standard of care will be followed.
4. Any patient wishing to receive life-ending medication while a patient at this hospital may be assisted in transfer to another facility of the patient's choice. The transfer should assure continuity of care.
5. All providers at CCHS are expected to respond to any patient's query about life-ending medication with openness and compassion. CCHS 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, CCHS's goal is to help patients make informed decisions about end-of-life care.

PROCEDURE:

1. All patients, if requested, will be provided with educational materials about end-of-life options. These materials will include a statement that CCHS does not participate in the Act.
2. If, as a result of learning of CCHS's decision not to participate in the Act, the patient wishes to have care transferred to another hospital of the patient's choice, CCHS staff will assist in making arrangements for the transfer. If the patient wishes to remain at CCHS, 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 participation provider on his or her own. The relevant medical records will be transferred to the physician taking over the patient's care. A nurse receiving such a request will be responsible for:
 - a. Informing the patient's attending physician within one working day 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, if such documents are in the medical record, 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 request information.

6. Nothing in this policy prohibits a physician who is employed by or who is an independent contractor of CCHS from participating under the Act when not functioning with the scope of his or her capacity as an employee or independent contractor of CCHS.

SANCTIONS:

If a provider participates in the Act beyond what is allowed in the policy, CCHS may impose sanctions on that provider. CCHS shall follow due process procedures provided for in the medical staff by-laws.

A provider who desires to participate in the Act is encouraged to bring their request to the Board of Commissioners.

PUBLIC NOTICE:

CCHS will provide public notice of this policy in the following ways: 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 right handbooks.

RESOURCES:

Any patient, employee, independent contractor, volunteer or physician may contact Social Services or Patient Advocate for assistance.