Patient End of Life Choice

**Philosophy**

The Gift of Hospice, an Interim Company, reaffirms a basic element of the hospice philosophy that states that because dying is a natural process, hospice neither seeks to hasten nor postpone death. The Gift of Hospice also reaffirms the philosophy that hospice does not abandon dying patients and their families. The Gift of Hospice acknowledges that there may be hospice patients who will wish to avail themselves of their legal right to pursue end of life prescriptions and The Gift of Hospice will not abandon these patients or their families.

**Policy**

Patients who inquire about the option of securing end of life prescriptions will be asked to contact their attending physician. A Gift of Hospice will continue to provide standard hospice services to patients regardless of their stated interest or intent in pursuing their legal right.

Neither staff nor patient care volunteers will assist with or participate in the act of the patient taking their end of life medication. A Gift of Hospice will not provide, deliver, administer, or assist with medication intended for end of life.

Staff and volunteers who are morally or ethically opposed to the end of life choice will have the option of transferring care responsibilities to other staff if their patient states an intent to pursue end of life prescriptions.

**Procedure**

1. As is customary, A Gift of Hospice staff will explore and evaluate patients’ statements related to suicide if they arise during routine visits.
2. If patients or family members make an inquiry about seeking end of life prescriptions, A Gift of Hospice will respond to inquiries or requests for information and refer them to their attending physician.
3. Staff or volunteers who are aware that a patient is considering procuring end of life prescriptions will notify the Registered Nurse Case Manager and the Director of Hospice Care Services.
4. Patients who verbalize this intent will be told that this information will be shared with the hospice team.
5. Staff and volunteers working with a patient/family who has verbalized an interest in the end of life choice will document all discussions and interventions with patient, family, other team members, and any other person who may be involved with the patient. This documentation will become part of the patient’s permanent medical record.
6. During Case Conference, or as needed, the interdisciplinary group will examine the patient’s reasons for considering end of life prescriptions and discuss how to address these issues.
7. Staff having contact with such patients will consult with and be supported by the Leadership Team on an ongoing basis.
Patient End of Life Choice - continued

8. If the patient chooses to pursue the end of life choice, A Gift of Hospice staff will work with the patient/family to address or attempt to resolve any problems or issues that may be contributing to this intent. The patient/family will be informed of the role of A Gift of Hospice regarding participation in the law; that is, A Gift of Hospice will continue to serve the patient and family; we will offer our customary hospice services, seeking to meet not only the physical needs of the patient/family, but the emotional, social, and spiritual needs as well. A Gift of Hospice will not be involved actively in the administering of the end of life prescriptions.

9. If a patient asks his/her physician for a prescription for medication to end his/her life, the patient and family will receive ongoing support. There will be continued exploration and evaluation of the problems and issues that led to the request for the end of life medication with the goal that the patient’s quality of life can be maintained or improved.

10. As is customary, bereavement support will be available to all families.

11. The Gift of Hospice Ethics Committee will meet as needed to review cases involving the end of life choice and to review our Patient End of Life policies and procedures. The Committee will also meet at the request of staff to discuss concerns about the end of life choice, to review an individual case, or to review any and/or all of our EOL Choice policies.
Staff Roles in the California End of Life Option Act

Philosophy

The Gift of Hospice, an Interim Company, is committed to providing full, appropriate, and skilled quality care to persons with life-threatening illness and their families and loved ones who care for them. This commitment is rooted in respect for human life, compassionate care of dying and vulnerable persons, and respect for the integrity of the health professions. We hold that there is a moral obligation to protect the dignity of human life from its beginning to end. We also believe we shall not abandon patients in their time of need. Therefore, The Gift of Hospice will not discharge patients who choose to pursue aid in obtaining end of life prescriptions, and will provide loving care, psychological and spiritual support, and appropriate remedies for pain and other symptoms so that they can live with dignity without actively participating in the hastening of death.

Policy

The California End of Life Option Act is a law that allows terminally ill adults seeking to end their life to request end of life medications from medical and osteopathic physicians. These terminally ill patients must be competent adults who are a resident of the state and who have six months or less to live. Physicians, pharmacists, and health care provider/facility staff may voluntarily refrain from participating in the Act.

A Gift of Hospice is ready to discuss and support end of life decisions while being sensitive to individual values and/or belief systems. Our staff is experienced and able to assist patients and families in making informed decisions about end of life care, including advance directives and hospice or palliative approaches to managing symptoms.

It is the mission of A Gift of Hospice to meet the needs of patients and families in a way that honors how people want to live their final months or days. We are able to support patients and families in varied settings. A Gift of Hospice also supports patients, families, and loved ones after death by assisting them with decision-making and providing bereavement tools and support.

Our goal is to address quality of life goals – however they may be defined – until a person’s very last breath. A Gift of Hospice does not actively participate in the California End of Life Option Act, but A Gift of Hospice will not discharge patients who choose to pursue aid in dying, and will provide loving care, psychological and spiritual support, and appropriate remedies for pain and other symptoms so that they can live with dignity. However, some staff may respectfully decline requests to be present when the end of life prescriptions are taken.

Procedure

1. It is the responsibility of A Gift of Hospice staff to educate and inform patients and families regarding advance directives throughout the course of their care.

2. At time of admission, A Gift of Hospice staff will inform patients about their rights under the California End of Life Option Act, as well as our decision not to actively participate. This information will be contained in a Patient Information sheet regarding the Act which will be included in all Admission packets.
Staff Roles in the California End of Life Option Act - continued

3. If a patient persists in their goal to participate in the California End of Life Option Act, the interdisciplinary team, including the person’s physician, should work to identify the factors contributing to the person’s desire for end of life prescriptions and to address them as part of the Care Plan. A Gift of Hospice staff can respectfully decline all requests to be present when a patient is taking or attempting to take end of life medications.

4. If upon arriving at a patient’s home you discover that a patient is in the process of taking the end of life prescriptions, you may leave the premises. If the end of life prescription has been taken (in accordance with the California End of Life Option Act) then you may provide your professional services appropriate to the situation and your professional background. If you arrive at a patient’s home and find that the person has taken the end of life medication and has died, you are to provide your professional services as in any other case and initiate the usual bereavement follow-up with the family/significant other(s).
## Patient Discussions Related to the California End of Life Option Act

### Policy

These standards include The Gift of Hospice, an Interim Company, staff involvement in patient initiated discussions around requesting end of life medication under the California End of Life Option Act; hospice support for patients who choose to pursue the Act; staff presence when patients ingest medication; hospice responsibilities following death; documentation standards around discussions and patient requests for end of life medication; staff conscientious objections.

The Gift of Hospice will honor California state law and our patients’ wishes regarding end of life. We will continue to provide quality end of life care, symptom management, and services to patients and families until the end of life with the goal of providing excellent patient care, safe and comfortable dying, and positive life closure.

While recognizing that the request for end of life medication is a discussion between patient and their attending physician, hospice staff will provide information and support to patients who are exploring this option.

### Procedure

Patients may want to discuss the option of the California End of Life Option Act with staff. A Gift of Hospice staff will respond to patient questions or statements regarding the end of life choice with respectful inquiry around the patient’s concerns, fears, symptoms, etc. to encourage deeper exploration, to identify the patient’s experience and goals, and to improve patient care.

Patients who are requesting further information or who are seriously considering making a request for end of life medications should be advised of the need to begin the process by speaking to their physician. Staff will:

1. Notify the Registered Nurse Case Manager and Director of Hospice Care Services of the patient’s inquiry, along with patient name, medical ID, and a brief summary of the contact.
2. Notify other involved members of the interdisciplinary team on a need to know basis; all staff will be respectful of patient’s privacy.
3. Obtain patient permission prior to any communication with a patient’s family members or other. While it is recommended that patients inform their families of their wishes around obtaining end of life medication, patients are not legally required to inform their families or caregivers of their wishes.
Care of Patients Who Pursue Obtaining End of Life Medications

Policy
The Gift of Hospice, an Interim Company, staff will respect the patient’s decision; continue to provide care as indicated by the patient’s physical, emotional, and spiritual needs; communicate and coordinate as needed with the Registered Nurse Case Manager and Director of Hospice Care Services.

Procedure
Prior to the patient ingesting end of life medication and while continuing to provide any usual hospice care, staff will assist with the following routine hospice care standards including:

1. Ensuring the patient’s POLST form is complete and in the home
2. Making funeral arrangements, including discussion of disposition of remains if needed
3. Encouraging the patient to complete any other end of life arrangements
4. Instructing caregivers around time of death and contacting hospice at time of death
5. Identifying next of kin who are to be notified of death if they will not be in attendance
6. Providing patient and family members or other caregivers with information around safe disposal of medications
7. Complete any additional documentation needed in patient’s chart, i.e. non-clinical notes, end of life notes, etc.
8. If patient dies without aid of end of life medication and these medications are in the home, staff will assess for safety and provide information around safe disposal of medications
Staff Presence at Time of Patient Deaths

Policy
The Gift of Hospice, an Interim Company, staff may be present at the time of death to provide emotional support for the patient, family, and others in attendance only under the following circumstances: the patient specifically requests staff presence; no staff member shall assist the patient in preparation or administration of end of life medications (this is not intended to prohibit provision of appropriate comfort measures, however - even if such measures such as symptom management for pain or nausea have the consequence of hastening death); staff member discusses patient request for presence at time of death with the Registered Nurse Case Manager and Direct of Hospice Care Services in a timely fashion and receives approval prior to agreeing to attend patient’s death (this discussion should include planning for staff to inform the family that they may not remain in the home until patient dies if the dying process is prolonged); staff presence is to meet the needs of the patient and family; RNCM will consult with the DHSC prior to approving staff presence (staff may be required to have another clinician accompany them); the patient will be ingesting the medication in a private home, property, or residence, i.e. not a public place; patient is planning to ingest medication during the staff member’s normal work time; patient will also have another adult present; the visit is treated like any other end of life visit in which symptom management and comfort are the focus (staff member is not expected to remain in the home until the patient’s death, as there will be considerable time variations between the time that a patient ingests medication until the time of death).

On-call and time of death instructions visit standards
Time of death visits will be handled according to normal procedures with on-call staff making a determination according to the individual family needs and specific circumstances.

Hospice staff will inform on-call if they are aware that the patient is planning to ingest end of life medication during on-call hours.

Time of death voicemail announcement to staff will not list information related to the California End of Life Option Act.

Time of death calls to coroners, which are rarely required, will list patient’s underlying illness as cause for death.

Specific medical record issues related to patients making requests for end of life medications
Staff will document discussions with patients requesting information about the California End of Life Option Act or who are pursuing end of life medications including:

1. Case communication note indicating notification to RNCM and DHCS
2. Medications dispensed under the California End of Life Option Act
3. Documentation in discipline notes that end of life medications have been dispensed and are in the patient’s home
4. Staff presence at time of death will be documented in routine visit and/or death notes as with any hospice death. Documentation at time of death visit should include:
   a) staff presence
   b) time of death
   c) bereavement concerns
Reporting a California End of Life Option Act Death

Policy
The Gift of Hospice, an Interim Company, per the law, will report a patient's cause of death after ingesting end of life medications as the patient's underlying hospice diagnosis. We do not report the California End of Life Option Act as cause of death.

Procedure
1. The underlying terminal disease must be listed as the cause of death.
2. The manner of death must be marked as "Natural."
3. The cause of death section may not contain any language that indicates that the California End of Life Option Act was used, such as:
   a) Suicide
   b) Assisted suicide
   c) Physician-assisted suicide
   d) Death with Dignity
   e) Mercy killing
   f) Euthanasia
   g) Secobarbital or Seconal
   h) Pentobarbital or Nembutal
Conscientious Objections and Personal Responsibility Related to Patients Requesting End of Life Medications

Policy

The Gift of Hospice, an Interim Company, management team and staff recognize that each staff member will need to thoughtfully consider whether it is within their own ability, values, and beliefs to provide care for patients who are requesting end of life medications.

It is not the intent of the management team to assume staff involvement. It is the staff member’s responsibility to inform their Administrator or Director of Hospice Care Services of concerns or reluctance around caring for patients who are requesting end of life prescriptions, including discussions and requests for information.

The DHCS and Registered Nurse Case Managers will be responsible for assessing and, if needed, re-assigning staff to ensure excellent patient care.

Procedure

1. Caregivers should think about and discuss this issue in order to clarify their personal and professional understanding of the ramifications of the California End of Life Option Act.

2. A Gift of Hospice staff may never coerce or exert undue influence on a patient with respect to these issues.

3. If at any time you do not desire to continue to provide care to a person because their decision to participate in the Act conflicts with your personal values, please inform the patient’s Registered Nurse Case Manager and Director of Hospice Services and they will identify a staff member who can provide the necessary care.