

Yakima Valley Memorial Hospital
and the
Initiative 1000: The Washington State Death with Dignity Act

Questions & Answers

Q. What is Memorial's policy on the Death with Dignity Act?

A. Memorial's Board of Trustees recognizes and accepts the decision of the citizens of the state of Washington with the passage of the Death with Dignity Act. However, the Board believes that it is inconsistent with the core values of Memorial and our Family of Services, as healthcare providers, to either unduly prolong or hasten the natural process of life.

Life-ending medication will not be allowed to be dispensed or administered at Yakima Valley Memorial Hospital, its Family of Services, or any facility owned, leased or controlled by Memorial.

Q: Then why is Memorial allowing its physicians to participate in I-1000?

A: As healthcare providers, we recognize the important and personal relationship between the physician and patient and thus will allow physicians to perform consultation and prescribe life-ending medication, for use outside Memorial's facilities, as long as patients meet the conditions as set by the state of Washington.

Q: If a patient meets all of the requirements set in Initiative 1000, is a physician required to prescribe life-ending medications to the patient?

A: No. It is important to note that the prescription of life-ending medication is voluntary and neither physicians nor Memorial staff shall be required to participate in the offering of the services provided under the act.

Q: Can you clarify this statement: "These prohibitions against the dispensing of life-ending medications and the self-administration of such medications by patients shall not apply at facilities owned, but not controlled, by Memorial."

A: That statement refers to leased facilities. If a physician practice operates independently in a Memorial owned or leased facility, the physician has the option to participate in the dispensing and administration of life-ending medication within their business premises.

Q: How can we prohibit these services at the hospital and other facilities if this is the law?

A: Initiative 1000 has a specific provision that only "willing health care providers" should participate in the prescription and administration of life-ending medication and hospitals are defined as health care providers.

Q: If Memorial is opting out, how can we still allow physicians to prescribe these medications?

A: Under the law, you can give your physicians the option to prescribe life-ending medications, without allowing them to be used in your facilities.

Q: If a doctor prescribes end-of life medication, will it be available at Memorial's pharmacy?

A: No. The prescription will have to be filled at another pharmacy.

Q: What do you mean by "consult and prescribe?" Isn't consultation part of the prescription process?

A: We mean that physicians will discuss this option among other end of life care options with the patient. It is possible that this option is discussed without any prescription being written.

Q: If a physician prescribes this medication to a patient, do they have to inform anyone?

A: Yes, they need to report this to the Department of Health. Policies regarding notification within the Hospital are in development.

Q: What are some of the options that physicians will discuss with patients, as the law requires that the patient be informed of all other options?

A: Alternatives will depend on the patient and his or her condition and include hospice, palliative care, comfort care and pain management.

Q. Should a patient self-administer end of life medication within the Hospital or Family of Services facilities, against Memorial's policy, or within a non-Memorial location where a Memorial service is being provided (such as hospice or home care) what should the employee caregiver do?

A. The employee should notify his/her supervisor and the patient's physician. The caregiver should provide compassionate care to the patient and family through the dying process. If they are unable to do so, they are obligated to find another staff member who can assume the caregiving.

Q: If a patient hands me a prescription, can I pick it up for them at an off-site pharmacy?

A: No. This scenario is included under the statement of "dispensing life-ending medication." This rule includes Memorial employees and volunteers. For example, if a hospice volunteer is asked to get these medications for their patients, they are prohibited from doing so.

Q: What is the difference between removing life support, which Memorial staff will do on Hospital grounds, and Initiative 1000?

A: Removing life support is removing life-sustaining technology after a review process with the family and medical staff associated with the case. Initiative 1000 gives a conscious patient the option to end their own life. We support the patient's right to choose to take part in Initiative 1000, and allow doctors to write prescriptions to qualified patients. However removing life support and Initiative 1000 are distinctly different.

Q: What happens if an employee violates our policy?

A: Action will be taken, which can include, but will not be limited to, loss of privileges and termination.