	Policy Name: End of Life Options
Modification Dates: Created 4/24	Effective Date: 5/1/2024
Number of Pages: 3	Approved By: Policy and Procedure Committee

PURPOSE:

The purpose of this policy is to clearly state Pathways’ commitment to excellent palliative care as well as opposition to End-of-Life Option Act; and to ensure that the right not to participate in physician aid in dying under the California End of Life Option Act, including the use of self-administered life ending medication, is fully utilized and communicated to patients, their families, Pathways Home Health and Hospice medical staff, independent licensed practitioners, employees and others.

POLICY:

Pathways respect the dignity of persons at every stage of life’s journey. In the context of a mutually respectful and healing relationship with the physician and the clinical team, patients have the right to make medical decisions, including accepting or rejecting treatment, and must give free and informed consent before any intervention. They also have a right to make an advance directive and to name a surrogate decision maker, and they or their surrogates must have access to medical and other information regarding their care.


There is no obligation to begin or continue treatment, even life-sustaining treatment, if from the patient’s perspective it is an excessive burden or offers no reasonable hope of benefit. Death is a sacred part of life’s journey; Pathways will intentionally neither hasten nor delay it. For this reason, physician aid in dying (i.e., physician-assisted suicide) is not part of Pathways’ mission.

The mission, values, and philosophy of care of Pathways compel us to reject participation in physician aid in dying. Pathways reaffirms its commitment to provide compassionate and effective care for dying persons and their families in a manner consistent with its values and tradition.

DEFINITIONS:

Physician Aid in Dying (PAD) is also referred to as physician-assisted suicide. It is a term used to describe the practice authorized under the California End of Life Option Act in which a physician provides a competent, terminally ill patient with a prescription for a lethal dose of medication, upon the patient's request, which the patient intends to use to end his or her own life. The medication must be self administered.

California Health and Safety Code Part 1.85, commencing with Section 443 (Assembly Bill (AB) 15), known as the End of Life Option Act (the “Act”), authorizes an adult who meets certain qualifications, and who has been determined by his or her attending physician to be suffering from a terminal disease (as defined in the Act), to make a request for a drug prescribed for the purpose of ending his or her life. The Act defines the parameters and establishes the procedures for making these requests.

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Palliative Care is specialized medical care for people with serious or chronic illness. This type of care is focused on providing patients with relief from the symptoms, pain, and stress of a serious illness- whatever the diagnosis. The goal is to improve quality of life for both the patient and the family.


Palliative Sedation is the use of medications to induce decreased or absent awareness in order to relieve otherwise intractable suffering at the end of life.

GUIDELINES:

- A. Pathways stands committed to providing full and appropriate support for dying persons and their families through the final stages of life, including:
 - 1. Providing and supporting patient self-determination, including but not limited to, the use of advance directives.
 - 2. Offering hospice and other supportive care to patients and their families.
 - 3. Providing effective pain and symptom management in all of its forms, including when indicated, palliative sedation.
 - 4. Offering a full range of social, spiritual, and pastoral care support services.

- B. It is the policy of Pathways that its facilities, programs, staff, and related operations shall not be involved in physician aid in dying, including:
 - 1. Providing or securing an “informed decision” as defined by the Act.
 - 2. Providing or completing the written and oral request as provided by the Act.
 - 3. Providing any medication with the specific purpose of ending a human life as contemplated by the Act.
 - 4. Being present at the time of administration of the medication by the patient.

- C. Patients, families, nurses, physicians, and other providers are encouraged to fully explore and discuss care and treatment options for the terminally ill patients. As part of that discussion, Pathways recognizes that requests for physician aid in dying will occur within the context of the physician-patient relationship. Pathways respects the rights of patients and physicians to discuss and explore all such treatment options, but fully expect that patients and physicians will respect and adhere to the Pathways’ position as set forth in this policy while undergoing and providing treatment in Pathways facilities, programs, and services. Pathways’ position and policy are based on its fundamental values of respect for the sacredness of life, compassionate care of dying and vulnerable persons, and respect for nursing and allied health professions.

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REFERENCES:

- Health and Safety Code Part 1.85, commencing with Section 443 (California Assembly Bill (AB) 15), the End of Life Option Act
- Pathways Home Health and Hospice Statement of Common Values
- Ethical and Religious Directives for Catholic Healthcare, Fifth Edition, United States Catholic Conference of Bishops
- Center to Advance Palliative Care 2011
- National Institutes of Health (NIH)

APPROVAL: 4/16/2024