End of Life Issues

POLICY:

Skyline Hospital shall assist those patients who are facing end of life conditions to proceed through the death process with comfort, dignity and respect. As death is viewed as the final act of living, generated from within the person, all efforts will be set forth by the organization to identify, address and positively respond to the patient's needs, related to all primary and secondary diagnosis and symptoms, and those of their families as they relate to psychological, social, emotional and spiritual issues.

PROCEDURE:

• Every effort is made by the members of the healthcare team to identify and respond to the patient's belief and value systems, including those that are cultural and spiritual. This effort is made for all patients throughout the facility to assure one level of care.

• For those patients who require specialized interaction due to belief and value systems, the direct patient care provider will contact the Social Services and/or the Pastoral Care for direction and participation in the patient's care.

• For those patients who are facing end of life issues, an emphasis on therapeutic communication will be in place to allow for identification of end of life issues as they relate to belief and value systems, psychosocial, emotional and spiritual issues. Identification of these issues will be made with the assistance of the Social Services and the Pastoral Care.
  ◦ Social Service and Pastoral Care will be notified by the direct patient care provider via the EMR task or phone call of those patients admitted with a terminal illness.
  ◦ Social Service and Pastoral Care will be notified by the direct patient care provider via the EMR task or by phone call of those patients for whom a diagnosis of terminal illness, either short term or long term has been identified and documented as a definitive primary or secondary diagnosis.

• Direct patient care providers will defer to Social Service and/or Pastoral Care in their psychosocial interventions based on those departmental members specialized interactions with the patient and family. Direction will be taken from Social Service and/or Pastoral Care as to management of the patient/family end of life issues as they relate to belief and value systems, cultural, spiritual, emotional and psychosocial issues.

• Patient care staff will be educated and trained on the unique needs of the patient facing end of life issues. Staff will be educated on how best to assist the patient and their family members through the end of life process, while maintaining the patient's comfort, dignity and respect.
  ◦ Patient care staff members will be provided with this information as an in-service as needed or as
• Advance directives shall be honored in accordance with law and regulation, and hospital capabilities.
• Patient wishes concerning organ donation shall be honored according to law and regulation, and in accordance with hospital capabilities.

Attachments:

No Attachments

Approval Signatures

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<tr>
<th>Approver</th>
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<tbody>
<tr>
<td>Diane Matthews: CNO</td>
<td>04/2019</td>
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<tr>
<td>Dolores Predek: discharge planning/utilization review</td>
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