



DIVISION OF DEVELOPMENTAL DISABILITIES
Olympia, Washington

TITLE: HOSPICE CARE POLICY 9.04

Authority: RCW 7.70.065, 70.122
DDD Policy 7.03, *Informed Consent*
In re Grant, 109 WN.2d 545, 747(1987)

BACKGROUND

Hospice care for people with terminal illnesses is a service which promotes home care for clients that is less expensive than hospitalization and provides continuity of care with minimal disruption to the lifestyles of the individuals and their families.

PURPOSE

This policy establishes procedures to provide individuals who are terminally ill the opportunity to remain with friends and familiar caregivers, to receive comprehensive care that recognizes their spiritual needs, and to assist them to live as fully and completely as possible with meaning and dignity.

SCOPE

This policy applies to all Residential Habilitation Centers (RHC) operated by the Division of Developmental Disabilities (DDD).

POLICY

Individuals who live in the RHCs and who have been diagnosed with a terminal illness may be offered hospice care upon request of the individuals, their families, and/or guardians. Individuals shall receive comprehensive medical care and habilitative services appropriate to their needs and which is consistent with the expressed preferences of the individuals, their families, and/or guardians.

PROCEDURES

Determination of hospice care for an individual requires the following:

- A. A written certification of a terminal condition or illness, prepared by three (3) physicians, one of whom is not an employee of the facility;
- B. A written request for hospice care provided by the client, family, or guardian;
- C. An informed consent provided for the client's inclusion in the hospice care program; (All members of consent hierarchy must agree – See Grant case).
- D. The RHC Superintendent's review and endorsement of the request for hospice care;
- E. A written individualized plan of care developed before hospice care begins;
- F. An assessment of the client's and family's needs for services;
- G. Identification of scope and frequency of services to meet the needs of the client and family;
- H. A determination of palliative and supportive services to be provided and a listing of extraordinary life-sustaining services that are not to be provided;
- I. A counseling plan for client, family, friends, and care providers;
- J. Documentation of consultation with outside resources, when appropriate;
- K. An Interdisciplinary Team (IDT) review and plan to implement the hospice care; and
- L. Provision of training on bereavement and death and dying for staff.

DEFINITIONS

Hospice Care means a comprehensive program of services provided to a terminally ill individual that emphasizes the management of pain and other physical symptoms, as well as management of the psychosocial needs of the dying individual and the family members.

Hospice Care Plan means a written plan of care developed by the Interdisciplinary Team that describes the care to be provided, including a notice of those life-sustaining procedures that are not to be used.

Hospice Client means an individual living at an RHC who has been diagnosed as having a terminal illness or condition by three (3) physicians. One of the physicians shall not be an employee of the facility.

Interdisciplinary Team means all disciplines involved in providing care to the ill client, including, but not limited to, a physician, nurse, social worker, spiritual counselor and direct care provider.

Life-Sustaining Procedures means any medical or surgical procedure or intervention which utilizes mechanical or other artificial means to sustain, restore or supplant a vital function which, when applied to a terminally ill individual, would serve only to artificially prolong the moment of death, and where in the judgment of the attending physician, death is imminent whether or not such procedures are utilized. Life sustaining procedures shall not include the administration of medication or the performance of any medical procedures deemed necessary to alleviate pain.

Terminal Condition means an incurable condition caused by injury, disease or illness which, regardless of the application of life-sustaining procedures, would, within reasonable medical judgment, produce death.

EXCEPTIONS

None.

SUPERSESSION

DDD Policy 9.04
Issued October 29, 1993

Hospice Care Policy 310.11
Issued April, 1990

Approved: /s/ Linda Rolfe
Director, Division of Developmental Disabilities

Date: 11/30/2004