

# Hospital Policy and Procedure Manual

Subject: End of Life Care Team

Policy Number: 4.15	Page 1 of 2
Review Date:	Revision Date:

## PURPOSE:

The purpose of the End of Life Care Team is to initiate discussion and open communication regarding end-of-life issues with the patient, family, physician(s) and care providers. The End of Life Care Team assesses the needs of the patient and family and provides support as needed.

## REFERRAL INITIATORS:

A patient in the following situation(s) is considered appropriate for referral:

- (Triggers / Indicators)
- ICU/CCU length of stay (without improvement in condition; waiting a decision regarding appropriate placement).
  - Terminal prognosis
  - Advanced disease process
  - Multi-system failure / involvement
  - Hospice appropriate case
  - Family request (express concern regarding patient's recovery)
  - Futile care

## TEAM COMPOSTION:

- Pastoral Care (Facilitator)
- Biomedical Ethics Committee member
- Vice President, Medical Affairs or  
Vice President, Surgical Services or  
Medical Director, Cardiology Services

## REFERRAL PROCEDURE:

### Referral from Physician:

For those patients in ICU, the Attending or Consulting Physician should check the box for referral to the End of Life Care Team on the ICU Standing Orders. For patients on other Nursing units, the Physician should contact the Pastoral Care staff (ext. 8140 or 8141) or inform the nursing staff to make the referral.

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Subject: <sup>H</sup>End of Life Care Team

Policy Number: 4.15	Page 2 of 2
Review Date:	Revision Date:

**Referral from Nursing Staff:**

Contact the Pastoral Care staff with a referral.

**Referral from Family:**

In those cases where the family of a patient presents concerns regarding end of life issues, the nursing staff or case manager should contact the Pastoral Care staff and relay the family's concerns and request a referral for the End of Life Care Team.

**TEAM PROCESS:**

When a referral has been received, the Pastoral Care staff member will contact the 2 other Members of the Team. The Team will assess the situation and determine the need to involve those health care providers involved in the care of the patient or any additional health care resources that may be needed. The Team Facilitator will document in the Progress Notes.

The Facilitator will maintain an Intervention Log to be kept in the Pastoral Care Department.

Reports will be made to the Biomedical Ethics Committee on a quarterly basis.

**Cross Reference:**

Policy 4.3      Biomedical Ethics Committee Access

APPROVED BY: Biomedical Ethics Committee      DATE: 10/21/03

APPROVED BY: Medical Executive Committee      DATE: 10/27/03

APPROVED BY: Mission Effectiveness Committee of the Board of Trustees      DATE: 11/21/03

IMPLEMENTATION DATE: December 1, 2003