

## Supporting best practices for the care of patients considering or completing aid in dying

These eight key points are intended to guide hospices in delivering coordinated care for patients considering or completing aid in dying, ensuring a safe and peaceful process for them and their loved ones. The main focus is on the *care of patients* rather than the prescription; none of these elements require hospices to opt in or permit their providers to act as attending prescribers. However, they do necessitate and foster well-integrated care.

- The agency's website facilitates patient informed consent by providing easily accessible information that outlines the basic legal and practical requirements for medical aid in dying in their State and details about aid-in-dying care their providers and clinical bedside staff are permitted to offer and not permitted to offer, such as:
  - Are the agency's providers permitted to serve as attending/prescribers or consulting/confirming providers for medical aid in dying?
  - Can bedside clinical staff attend during the aid-in-dying procedure? Remain at the bedside during ingestion?
  - Are nurses permitted to prepare the medications?
  - Can the agency staff manage non-oral routes of self-administration?
- The agency maintains resources to provide prompt referrals for any of the above aid-in-dying care services not offered by the agency and general information regarding potential costs to patients for this care.
- Bedside clinical staff are trained and supported to openly explore, discuss, and provide information about medical aid in dying with their patients.
- Agency policies regarding aid-in-dying care are proactive and provide actionable guidance, equipping staff to provide information, care, and coordination without hesitation or delay.
- The agency has implemented opt-out procedures that allow staff to transfer cases early on to willing colleagues without facing repercussions or stigmatizing patients' decisions.
- Bedside clinical staff are trained and supported to monitor and prepare patients and their families for the aidin-dying procedure; they maintain regular communication with the attending prescriber and backup providers to coordinate a safe and peaceful process.
- Staff have access to a knowledgeable provider before and during the aid-in-dying procedure in case if any issues arise.
- The staff receives ongoing education and support to deliver coordinated care to patients and families, along with annual updates.