



Position statement on withholding and withdrawing potentially life prolonging treatments in the adult in-patient unit.

(This position statement does NOT apply to Brian House Children's Hospice)

Ethical dilemmas create tension within professional teams and misperceptions amongst the public. As an organisation, Trinity Hospice and Palliative Care Services has, therefore, decided to make clear position statements on a number of common, challenging ethical dilemmas including withholding and withdrawing potentially life prolonging treatments in the adult in-patient unit. These are intended to work as a succinct guide on the issue for members of staff and users of our service.

This statement takes into account opinions expressed by staff, the current law as well as predictions of the impact of the statement on patient care across the family of services that make up Trinity Hospice and Palliative Care Services.

Statement

Trinity Hospice and Palliative Care Services will not commence any life-prolonging treatments such as ventilation, chemotherapy or artificial feeding in the adult in-patient unit. However if such life prolonging treatment has been started elsewhere the medical and nursing staff will liaise with the patient and medical colleagues about the appropriateness of continuing such interventions on a case by case basis.

The hospice will seek to stop any life-prolonging treatments which are deemed to be futile or excessively burdensome to the patient. Such decisions will be made after careful discussion with the patient and their representatives and will be made on a patient by patient basis.

Decisions about life prolonging treatments will always be discussed with the patient, when they wish to be involved in such discussions, and have capacity to participate. Any patient shown to have the ability to make such decisions will be supported if they decide to decline life- prolonging treatment.

Background

As an organisation, Trinity Hospice and Palliative Care Services accept that life has a natural end and that there comes a point, for some people, when any medical treatments will either not prolong life or causes more suffering than benefit. Decision making in such situations requires sensitive and effective communication skills backed up with a sound knowledge of the options and likely consequences. The organisation will ensure that staff have the appropriate knowledge and skill to undertake such discussion.

Professional staff working for Trinity Hospice and Palliative Care Services are under no legal obligation to start or continue life-prolonging treatment when they, after careful consideration, believe the patient will suffer more harm than good from it.

Stopping or starting potentially life prolonging treatment is **not** a form of assisted dying because the intention is not to end life but purely to avoid additional, unnecessary suffering. Under such circumstances, when a patient dies, it is from overwhelming disease, not from being denied futile or excessively burdensome treatments.

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