Implementing A ‘No CPR’ Policy

Editor’s note: This is the first of an occasional series of articles on assisted living risk management issues.

By Andrea S. DeLand, BA, JD, an associate principal of The Kitch Firm based in Detroit. The firm is legal counsel for HealthCap.

In early March, national headlines — claiming that an employee of an independent living provider refused to perform cardiopulmonary resuscitation (CPR) on a resident in distress, who subsequently died — raised concerns within the long term care community across the country. In response, care providers at every level are beginning to carefully review state laws and corresponding facility policies.

Much like other issues in long term care, knowledge is the key. Not only must providers know the law in their jurisdictions, it is imperative that they clearly understand its requirements and its practical implications, including unintended consequences.

In the skilled setting, the performance of CPR is not specifically required by federal rules or regulations. However, skilled facilities are required to abide by the standard of care. It would be difficult to assert that the standard of care in a skilled facility does not require the initiation of CPR, especially when licensed nurses, respiratory therapists, and physicians are routinely providing care in this setting.

Within the assisted and independent living settings, whether there exists a duty to initiate CPR becomes more of a question. As always, facilities should first refer to state-specific licensure rules and other relevant laws. Should the law permit a facility to implement a “No CPR” policy, regardless of a person’s advance directives, it is imperative that all staff members, family, and residents are made aware of and clearly understand the policy.

A concise stand-alone document that makes the facility’s CPR policy unambiguous should be presented upon admission. The policy should then be explained by the facility representative to all interested persons upon admission. Residents and/or legally responsible parties should sign the stand-alone document acknowledging that they understand the CPR policy and its effect. It may be worthwhile for the facility to audit each resident’s admission materials to ensure that all appropriate parties have signed. It is also a prudent practice to review this issue with the resident and family annually.

Again, if state law permits facilities to have a “No CPR” policy and the facility adopts such a policy, then the facility should make sure that all residents, family members, and staff are regularly educated on the policy. It is also important to include in the policy that although a non-skilled facility may choose (when permitted by state law) to implement a policy wherein CPR is not performed, staff should always call 911 in the event of an emergency.

As a final risk management step, policies and procedures related to emergency services should be reviewed for compliance with all relevant laws by legal counsel. Legal review will help to increase the chance that your facility policies and practices will withstand scrutiny if challenged. Take the time to put a legally sound policy and practice in place, and it will pay off even when challenged.

These materials have been prepared by Kitch Drutchas Wagner Valitutti & Sherbrook PC for informational purposes only and are not legal advice. This information is not intended to create, and receipt of it does not constitute, an attorney-client relationship. Readers should not act upon this information without seeking professional counsel.