Commission on Peace Officer Standards and Training
860 Stillwater Road, Suite 100
West Sacramento, CA 95605-1630
www.post.ca.gov

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Subject: **End of Life Option Act – Overview of Law Enforcement Response**

On October 5, 2015, Governor Brown signed the End of Life Option Act (ABX2-15 [Eggman]-Penal Code sections 443; 443.1-443.21) which took effect June 9, 2016. It authorizes an adult who meets certain qualifications and who has been determined by his or her attending physician to be suffering from a terminal disease, to make a request for a drug prescribed for the purpose of alleviating suffering and ending his or her life. The Act also provides certain immunity from civil or criminal liability for physicians, medical providers, and for persons present when the patient self-administers the drug, or if a person assists the patient by preparing the aid-in-dying drug, so long as the person did not assist with the ingestion of the drug. The intent of the law is to allow people to help a terminally ill person as long as the terminally ill patient takes an "affirmative, conscious, and physical act" to ingest the medication into their body. The Act does not authorize ending a patient's life by lethal injection, mercy killing, or active euthanasia. Action taken in accordance with the Act does not constitute suicide or homicide.

The following information is provided as a summary of the new law and is not to be considered a comprehensive review.

In order to request and obtain the medication, the patient must:

- Be 18 years of age or older;
- Be a resident of California and be able to establish residency (e.g., California driver's license, able to vote in California, owns or leases property in California, recent tax return, etc.);
- Have the physical and mental ability to self-administer the medication;
- Be suffering from a terminal disease that will, within reasonable medical judgment, result in death within six months;
- Submit to their physician, two oral requests at least 15 days apart, and submit a written request that is witnessed by two other individuals; and
- Within 48 hours prior to taking the drug, the patient must sign a "final attestation" before ingesting the drug.

Important considerations:

- Patients must be capable of and must self-administer the drug(s). The intent of the law is to allow persons present to help by holding a cup or pouring medication into a feeding tube so long as the patient takes an "affirmative, conscious, and physical act" to take the medication into their body;
- This law does not require that patient self-administering the medication have any documentation present;
- If at the scene of an in-progress or just occurred ingestion of aid-in-dying medication, when determining if life-saving measures are necessary, first responders must use their best judgment to determine the circumstances, while considering and respecting what could be a very spiritual or emotional scene;

- End of Life Option Act investigations shall not be classified as suicide cases or homicide cases absent specific circumstances to support doing so;
- Death investigations involving a patient who has self-administered End of Life Option Act medications shall be treated as would any other death investigation including Medical Examiner notification when appropriate;
- There may be a Do Not Resuscitate (DNR) order or a Physician Order for Life Sustaining Treatment (POLST) present; however, there is no requirement that the patient needs a DNR or POLST or that either needs to be presented to first responders on the scene. The totality of the circumstances and agency policies, both law enforcement and EMS, must be taken into consideration;
- There is no mandate for one particular drug to be provided and physicians may vary in what drugs they prescribe. Leftover drugs, that are part of a death investigation, shall be collected and placed into evidence for destruction; and
- Law enforcement should collaborate with and seek appropriate guidance from local and regional medical practitioners as well as legal counsel and/or counsel from their respective District Attorney's Office to carefully balance the dignity and comfort of End of Life Option Act patients, while also ensuring proper compliance with statutory requirements, and proper death investigations.

New laws created by this Bill:

- Felony to knowingly alter or forge a request for drugs to end an individual's life without his or her authorization;
- Felony to conceal or destroy a withdrawal or rescission of a request for the drug if done with the intent to cause or effect the individual's death;
- Felony to knowingly coerce or exert undue influence on an individual to request a drug for the purpose of ending his or her life; and
- Felony to administer an aid-in-dying drug to an individual without their knowledge or consent.

POST, in collaboration with subject matter experts, will be releasing a training video on the End of Life Option Act in December 2016 to all law enforcement agencies in the POST Program. The video is segmented for easy use during briefings or in a stand-alone training module. Two hours of Continuous Professional Training (CPT) is awarded for the completion of the training.

The End of Life Option Act information has also been incorporated in the POST Institute of Criminal Investigation (ICI) Homicide Course and the POST-certified Coroner's Death Investigations Course.

Questions regarding the revision of death investigation training for law enforcement with respect to the End of Life Option Act may be directed to Senior Consultant Larry Ellsworth, Learning Technology Resources Bureau, at (916) 227-4895 or Larry.Ellsworth@post.ca.gov.

STEPHANIE C. SCOFIELD
Interim Executive Director