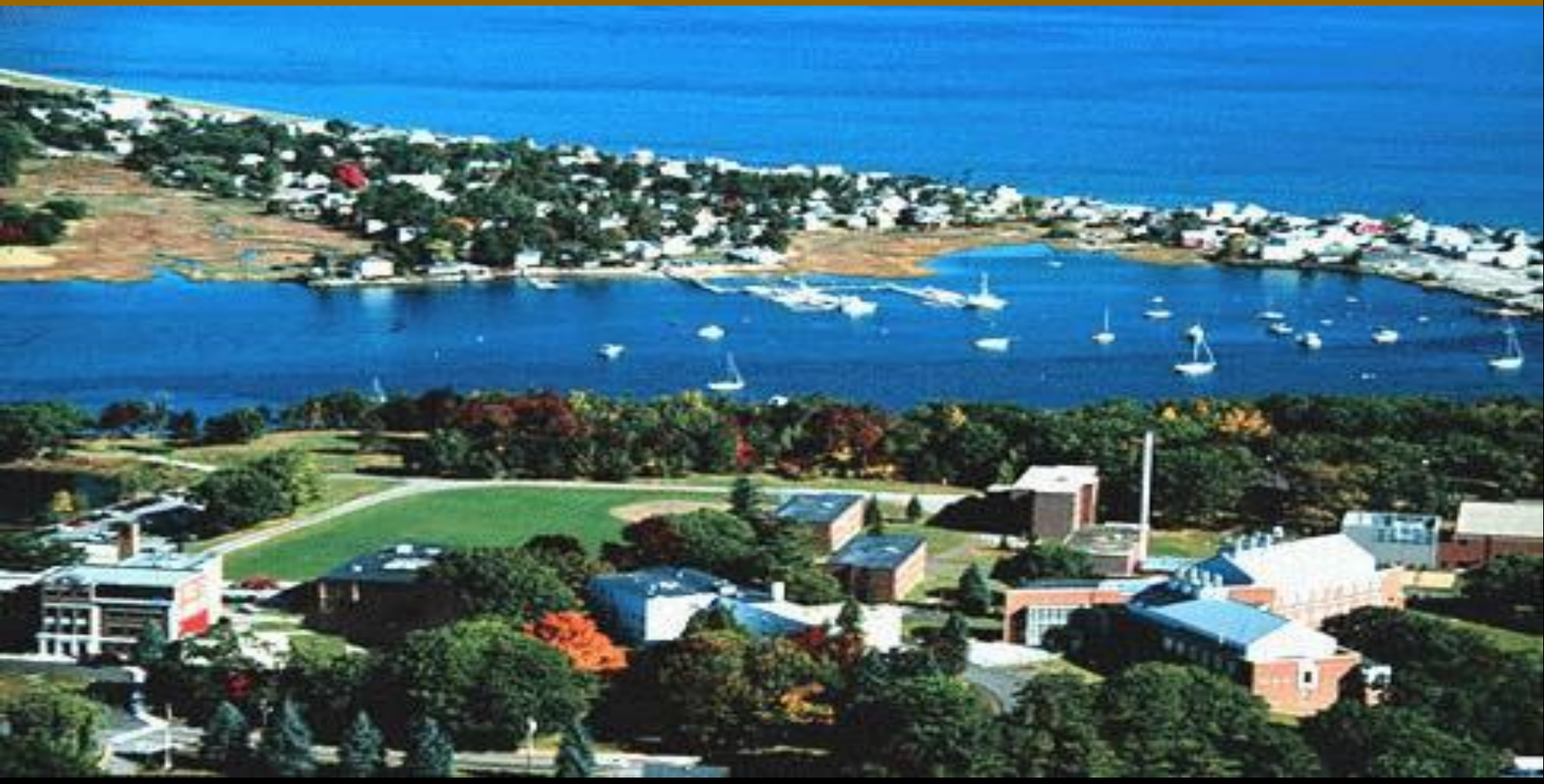
University of New England College of Osteopathic Medicine



“Asking the difficult question”

ADVANCE CARE PLANNING – END OF LIFE CARE

Preparing for the Future: Alzheimer’s Disease and Related Dementias
March 13, 2013
2pm-3pm

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OBJECTIVES

- To understand the value of an Advance Directive & its impact on transitional care.
- To identify which life transitions should precipitate the completion of an Advance Directive.
- To distinguish b/t Health Care Proxy & DPOA.
- To distinguish b/t DNR, DNI, DNH, & CMO.
- To understand the physician's role in advance care planning.
- To b/c familiar with resources for advance care planning.

ADVANCE CARE DIRECTIVES:

- a legal document, consistent with state law, that helps to ensure that one's health care wishes will be carried out;
- May be an oral communication, verbally expressed to family members or to a health care agent.

Two main types of Advance Directives:

- Medical POA/Health Care Proxy
- Living Will/Treatment Directive

MEDICAL POA:

- A written document in which a person (Agent) is named to act as health care proxy in the event one is no longer able to speak for him/herself.
- Cognitive/physical decline resulting in ‘lack of capacity’ as determined by the physician.

LIVING WILL:

- Documents personal directives for EOL care in the event that decision-making or communication abilities are lost.

- Includes directives for: IVF hydration, parenteral/enteral nutrition, CPR, mechanical ventilation, hemodialysis, stopping life-prolonging treatment.

Qualifications for a Health Care Proxy/Agent:

- Meets legal criteria of the state
- Willing to speak on the patient's behalf
- Able to act on the Principal's wishes
- Readily available
- Understands what is important to the Principal
- Trustworthy
- Able to discuss sensitive issues

Qualifications (con't):

- Able to handle conflicting opinions b/t family members/friends/health care providers
- Can be a strong advocate in the face of an unresponsive physician or institution
- Will be available as long as the Principal is alive

State rules disqualifying for health care proxy:

- Less than 18 years of age
- Person is Principal's health care provider or an employee of the health care provider
- Person is the owner of the health care facility where the Principal resides

Surrogate decision making:

- In Maine, a surrogate may make health care decisions for an adult who doesn't have a designated Proxy/Agent or Guardian
- Order of choice:
  - Spouse
  - Adult child
  - Sibling
  - Grandchild
  - Other

When to create or change an Advance Directive:

- Any major change in status
- Five “D’s”:
  - Decade
  - Death
  - Divorce
  - Diagnosis
  - Decline

Obtain an Advance Directive form:

- Local hospital's social service, patient education, admissions, or chaplaincy departments
- National Hospice & Palliative Care Organization (see "Resources" page)
- Download a legal form for any state from:
  - www.caringinfo.org
- Five Wishes (see "Resources" page)
- American Bar Association (see "Resources" page)

What to do with the Advance Directive:

- Original is kept with the individual (or Proxy) & stored where it can be easily found
- Copies to Proxy, health care provider, hospital, others
- Carry an Advance Directive wallet card
- Notarized version if traveling out of state

Physician Orders for Life-Sustaining Treatment (POLST)

- DNR
- DNI
- DNH
- CMO
- Hospice Care

Role of Advance Directives & Transitional Care:

- Case scenario
- Provides clear direction for health care personnel regarding EOL care
- Keeps care consistent with patient's wishes
- POLST provides clear and mandatory documentation
- Needs to accompany the patient during transitions when the Proxy/family are unavailable

In conclusion:

- "Modern medicine may have made dying harder, but it has also given us the gift of time- the time to prepare, the time to heal family wounds, the time to bring psychological and spiritual closure. If we can take advantage of it, it has given us something unique in history: the time to tie up loose ends and orchestrate a death that is good."

Marilyn Webb, *The Good Death*

RESOURCES

Five Wishes: Aging with Dignity
PO Box 1661
Tallahassee, FL 32032-1661
Phone: 1-888-594-7437
Email: fivewishes@agingwithdignity.org
Web: www.agingwithdignity.org

Caring Connections (National Hospice and Palliative Care Organization-NHPCO)
1700 Diagonal Road
Suite 625
Alexandria, VA 22314
Phone: 1-800-658-8898/703-837-1500
Fax: 703-837-1233
Email: caringinfo@nhpco.org
Web: www.caringinfo.org

American Bar Association: Consumers Toolkit for Health Care Advance Planning
Web: www.abanet.org/aging/toolkit

Article: S. E. Hickman, C. P. Sabatino, A. H. Moss, J. Wehrle Nester, "The POLST Paradigm to Improve End-of-Life-Care: Potential State Legal Barriers to Implementation". *Journal of Law, Medicine & Ethics*, (Spring 2008): 119-140.

RESOURCES Con't

In Maine:

Legal services for the Elderly

Phone: 207-396-6502

Web: www.mainelse.org or www.maineelderlaw.com

Maine Hospital Association

Web: www.themha.org/issues/advdirectivesform.pdf

Maine POLST (PDF File Format)

Web: www.mehca.org/qualityregs/maine%20POLST%204-15-09%20final.pdf

Maine POLST (Microsoft Word Doc)

Web: www.meha.org/.../MHCA%20E-News