Conversations
&
Honoring Choices

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Honoring Choices®
IDAHO
Partnering to Promote Advance Care Planning
by Jannus

Today's Objectives

- ✓ Introduce Honoring Choices® Idaho

  --Framework, successes, goals--

- ✓ Discuss opportunities for collaboration

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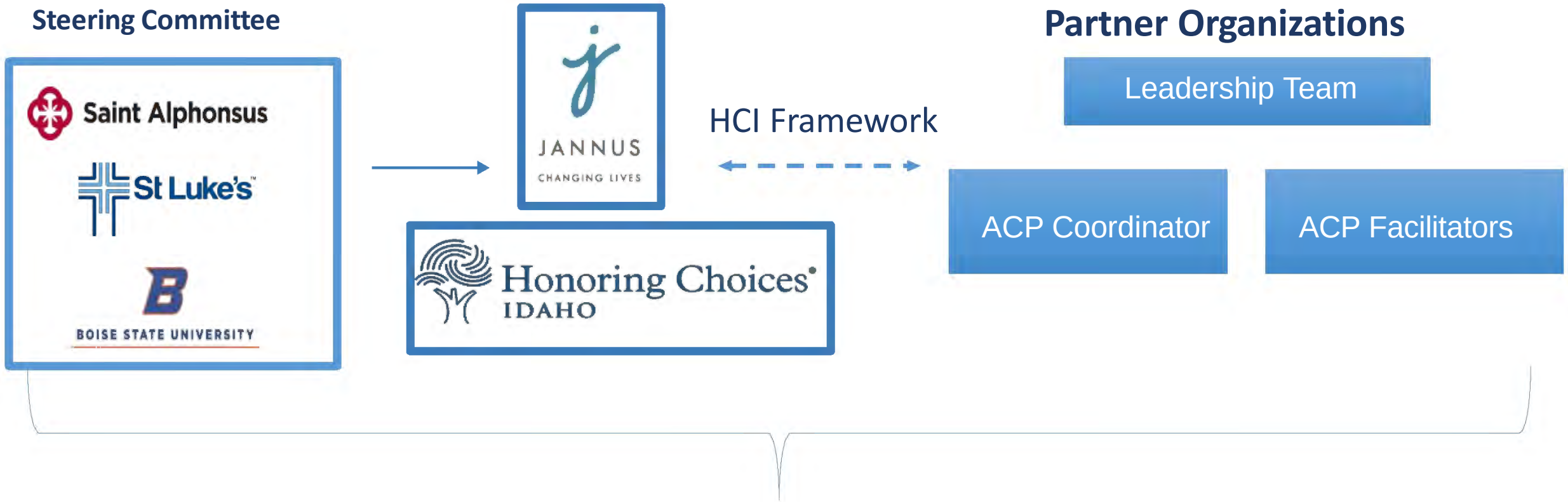
Honoring Choices® Idaho Structure



Coordinated, consistent advance care planning

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Honoring Choices® Idaho Teams
(as of 2019)

Inpatient
Family Medicine
Internal Medicine
Employee Wellness
Cardiac Rehab
Faith

Community
Chaplaincy
Cancer Clinic
Hospice
Home Health
Palliative Care

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Data: Current State of ACP in Idaho

People in Idaho have strong preferences about their own end-of-life care

- 93% say it is important that they are able to stay in their own home
- 72% are concerned they will experience a financial burden paying healthcare
- 79% say it is very important to not be a physical burden to loved one

People in Idaho want to be involved in making decisions about their own death…

- 94% would want to know if they had a serious illness
- 95% say it is important to be able to understand treatment options
- 97% say it is important to be able to choose treatment options

* Idaho End-of-Life Personal Preferences Survey 2018, Boise State University

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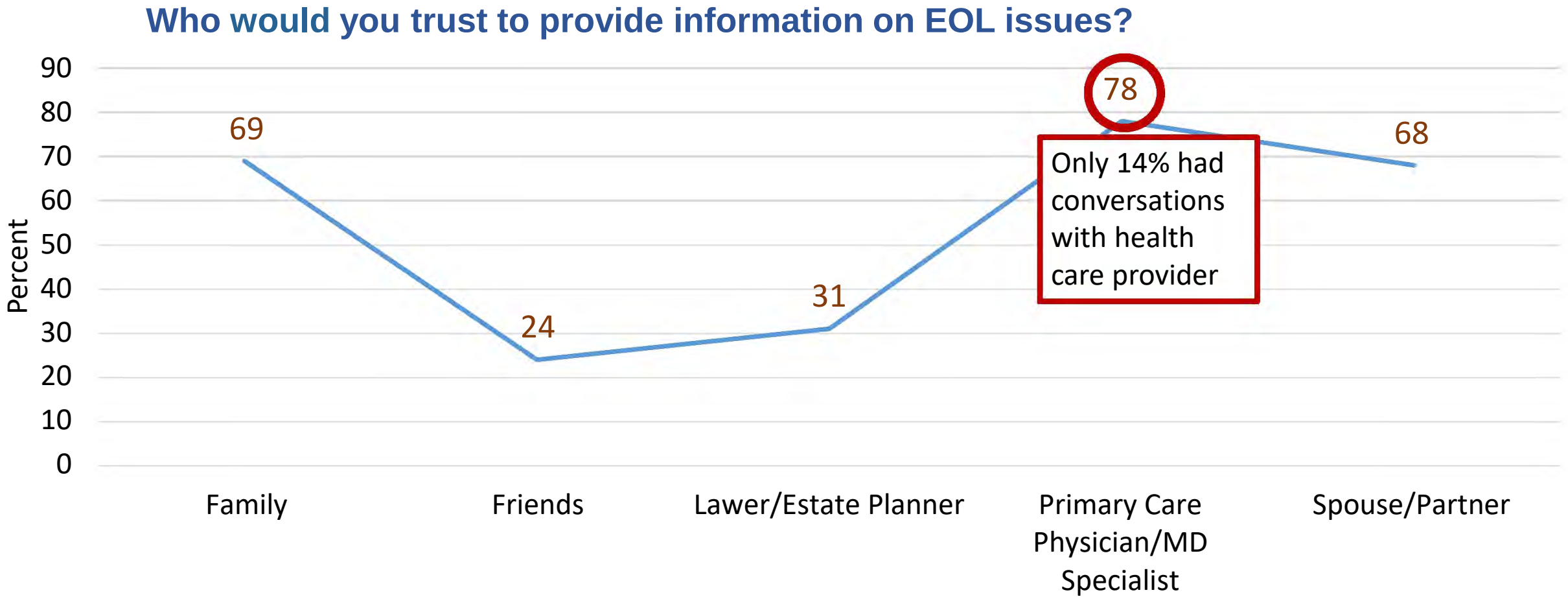
Data: Current State of ACP in Idaho



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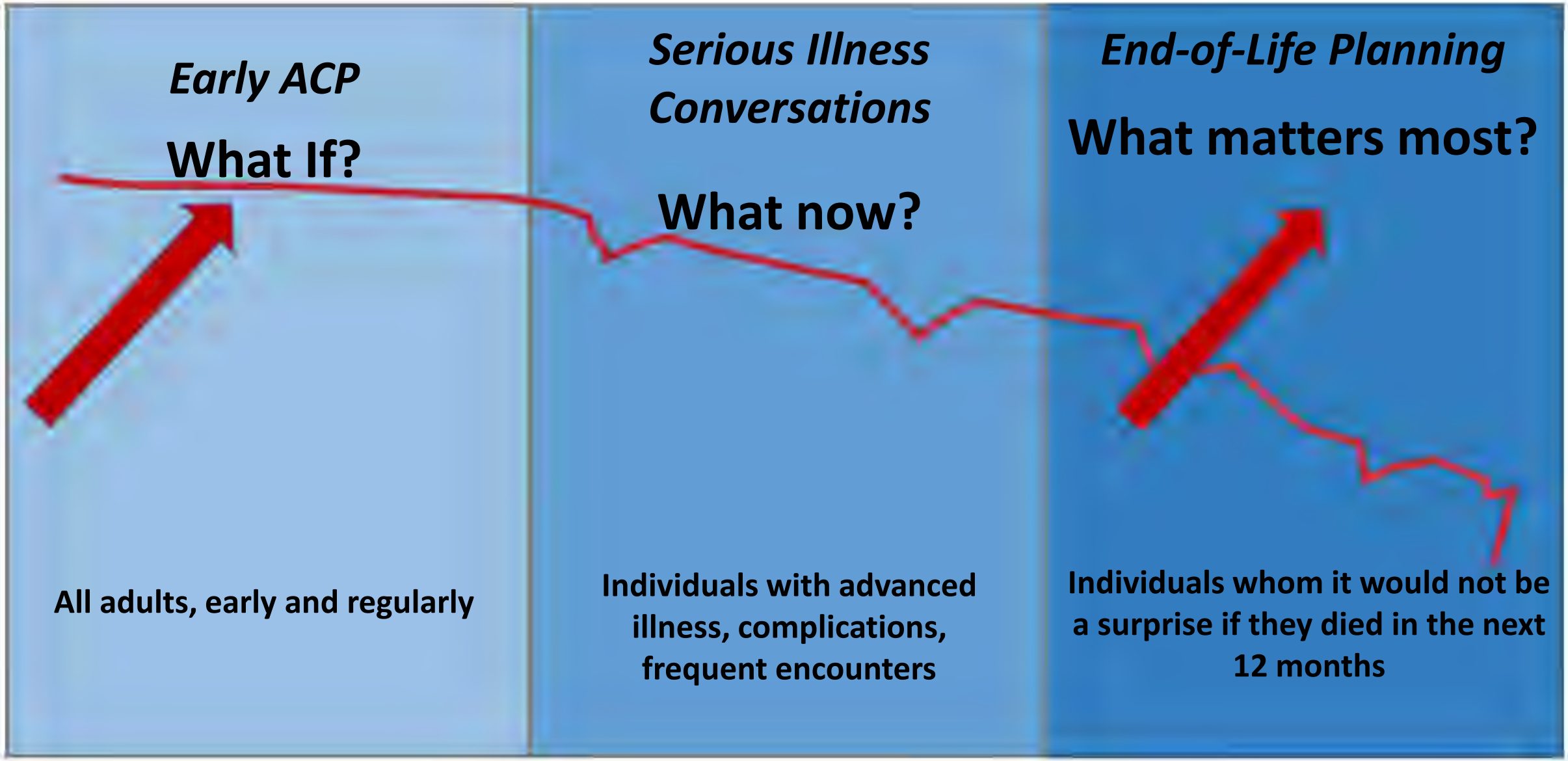
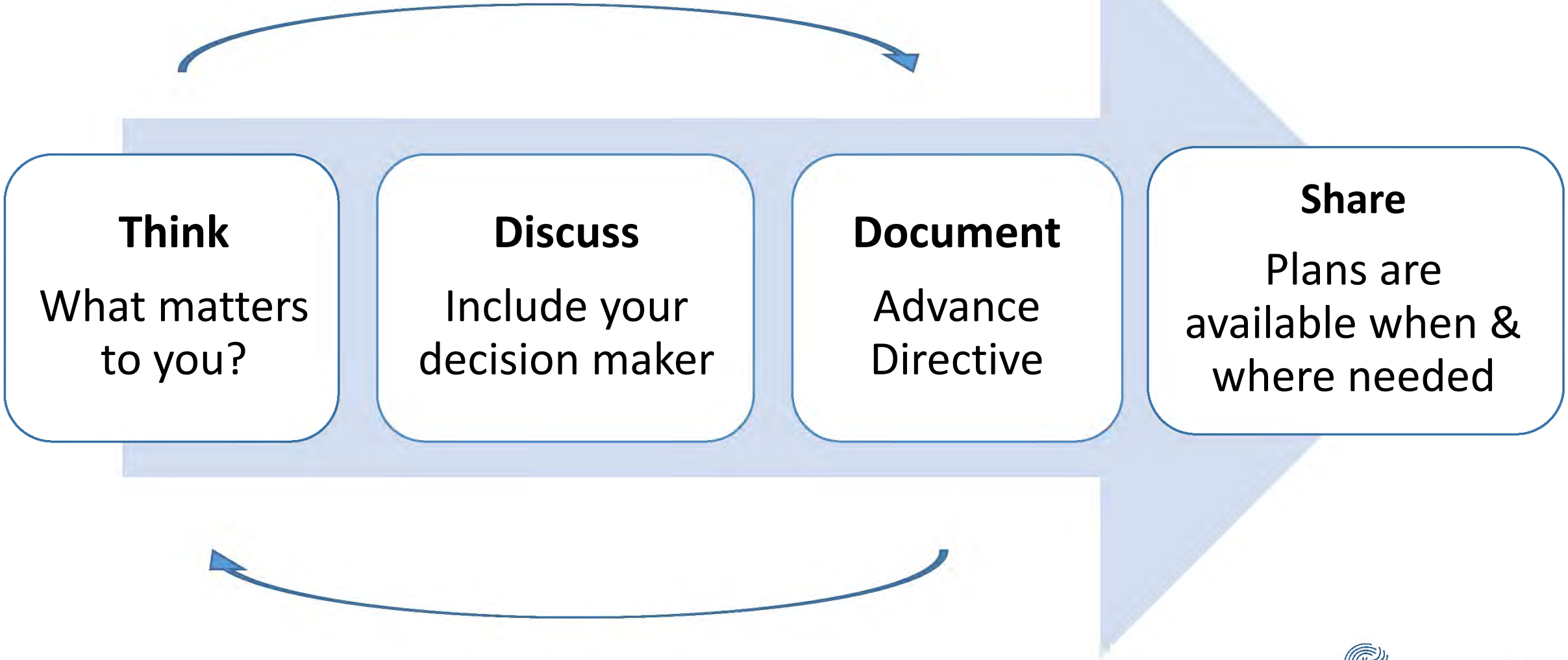
Person-Centered Advance Care Planning



Conversations are Needed:
A new workflow to support Advance Care Planning



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LaCrosse Study

- Results of ACP program created in 1991-1993
- ACP program focused on
  - ✓ *Prevalence*
  - ✓ *Availability*
  - ✓ *Consistency*

	Study 1* Data collected in 1995/1996 N=540	Study 2** Data collected in 2007/2008 N=400	P value
Decedents with ADs	**459 (85%)**	**360 (90%)**	.023
ADs found in the medical record where the person died	**437 (95.2%)**	**358 (99.4%)**	<.001
Treatment decisions found consistent with instructions	**98%**	**99.5%**	0.13

*Hammes BJ, Rooney BL. Death and end-of-life planning in one Midwestern community. *Arch Intern Med.* 1998;158:383-390.
**Hammes BJ, Rooney BL, Gundrum JD. A comparative, retrospective, observational study of the prevalence, availability, and utility of advance care planning in a county that implemented an ACP microsystem. J*AGS*. 2010;58:1249-1255.

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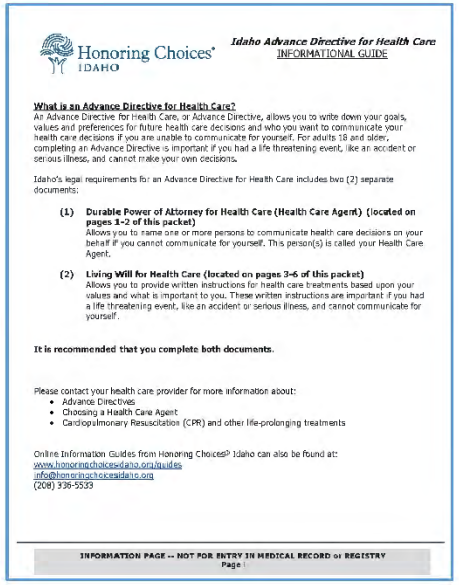
Support: Honoring Choices® Idaho Tools/Infrastructure

Education Guides



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Idaho Advance Directive for Health Care
INFORMATIONAL GUIDE

What is an Advance Directive for Health Care?
An Advance Directive for Health Care, or Advance Directive, allows you to write down your goals, values and preferences for future health care decisions and who you want to communicate your health care decisions if you are unable to communicate for yourself. For adults 18 and older, completing an Advance Directive is important if you had a life threatening event, like an accident or serious illness, and cannot make your own decisions.

Idaho's legal requirements for an Advance Directive for Health Care includes two (2) separate documents:

(1) **Durable Power of Attorney for Health Care (Health Care Agent) (located on pages 1-2 of this packet)**
Allows you to name one or more persons to communicate health care decisions on your behalf if you cannot communicate for yourself. This person(s) is called your Health Care Agent.

(2) **Living Will for Health Care (located on pages 3-6 of this packet)**
Allows you to provide written instructions for health care treatments based upon your values and what is important to you. These written instructions are important if you had a life threatening event, like an accident or serious illness, and cannot communicate for yourself.

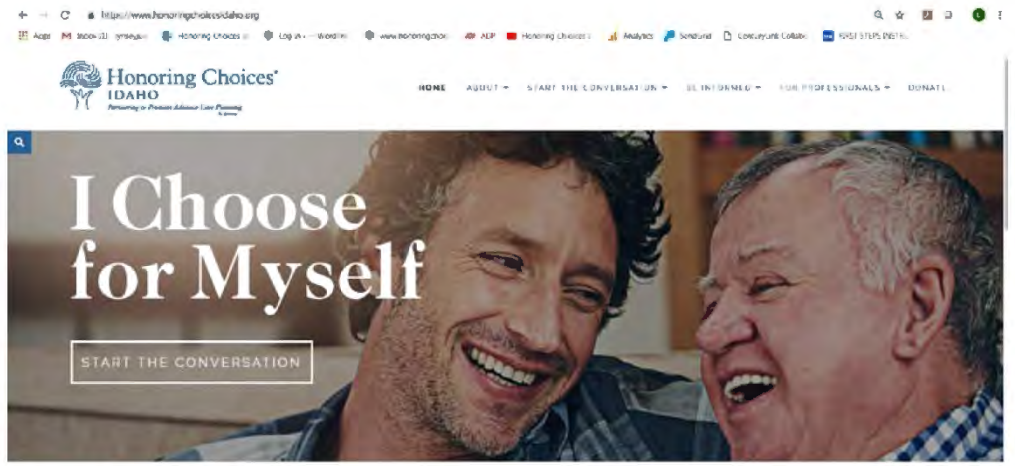
It is recommended that you complete both documents.

Please contact your health care provider for more information about:
- Advance Directives
- Choosing a Health Care Agent
- Cardiopulmonary Resuscitation (CPR) and other life-prolonging treatments

Online Information Guides from Honoring Choices® Idaho can also be found at:
www.honoringchoicesidaho.org/guides
info@honoringchoicesidaho.org
(208) 336-5533

INFORMATION PAGE -- NOT FOR ENTRY IN MEDICAL RECORD or REGISTRY
Page 1

Advance Directive



HonoringChoicesIdaho.org

- HCI provides training for healthcare and community based-organizations:
  - Develop sustainable ACP Program
  - Train Facilitators

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ACP Facilitators: Guided, person-centered conversations

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A Facilitated Conversation:
Helps people with three decisions

#1. Choose a health care agent

#2. Explore values and beliefs important to you

#3. Explore your goals for medical care

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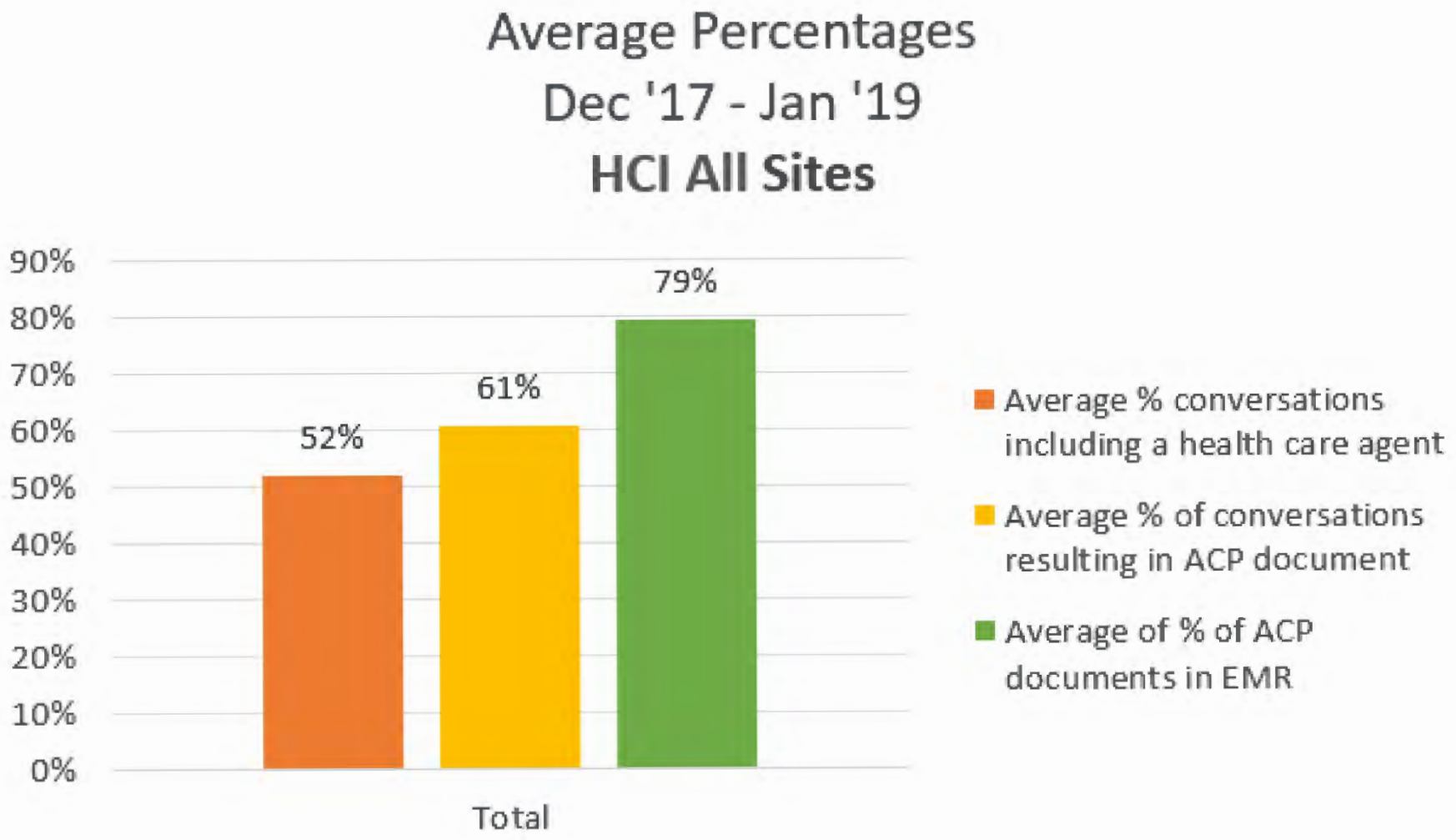
Honoring Choices® Idaho Conversations Data



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Terminology Review

Review of Common Terms

1 Advance Care Planning (ACP)

The *process* of planning for future medical decisions

To be effective, this includes:

- Reflection on goals, values and beliefs
- Understanding of possible future decisions
- Discussion with identified health care agents

2 Advance Directive (AD)

A written, legal document

Who: *Durable Power of Attorney for Health Care*

Identify a health care agent (person you would want to communicate your health care decisions if you are unable to communicate for yourself)

What: Living Will

Identify your goals, values and preferences for future health care decisions

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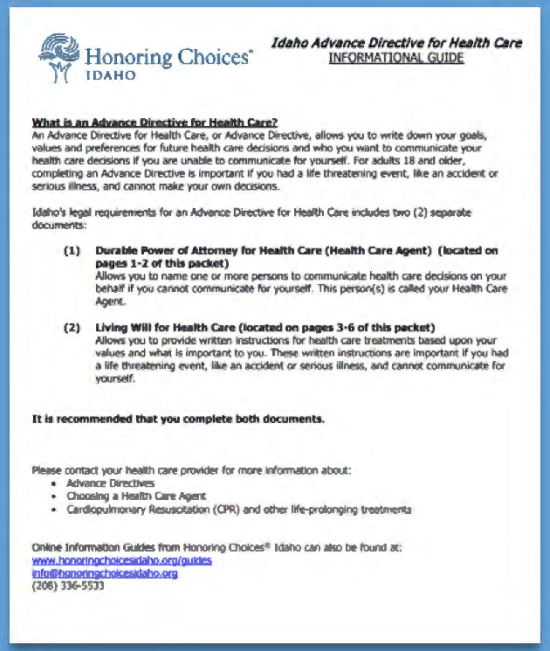

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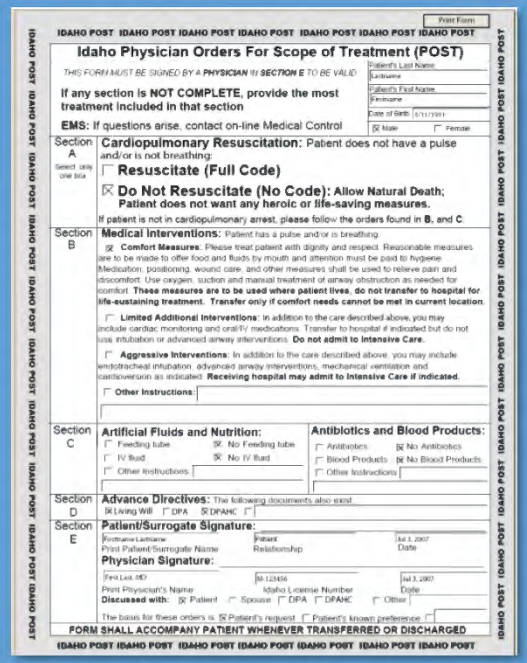

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Idaho Physician Orders For Scope of Treatment (POST)

THIS FORM MUST BE SIGNED BY A PHYSICIAN IN SECTION E TO BE VALID

If any section is NOT COMPLETE, provide the most treatment included in that section

EMS: If questions arise, contact on-line Medical Control

Section A — **Cardiopulmonary Resuscitation:** Patient does not have a pulse and/or is not breathing
- ☐ **Resuscitate (Full Code)**
- ☒ **Do Not Resuscitate (No Code):** Allow Natural Death; Patient does not want any heroic or life-saving measures.

If patient is not in cardiopulmonary arrest, please follow the orders found in **B.** and **C.**

Section B — **Medical Interventions:** Patient has a pulse and/or is breathing
- ☒ **Comfort Measures:** Please treat patient with dignity and respect. Reasonable measures are to be made to offer food and fluids by mouth and attention must be paid to hygiene. Medication, positioning, wound care, and other measures shall be used to relieve pain and discomfort. Use oxygen, suction and manual treatment of airway obstruction as needed for comfort. **These measures are to be used where patient lives, do not transfer to hospital for life-sustaining treatment. Transfer only if comfort needs cannot be met in current location.**
- ☐ **Limited Additional Interventions:** In addition to the care described above, you may include cardiac monitoring and oral/IV medications. Transfer to hospital if indicated but do not use intubation or advanced airway interventions. **Do not admit to Intensive Care.**
- ☐ **Aggressive Interventions:** In addition to the care described above, you may include endotracheal intubation, advanced airway interventions, mechanical ventilation and cardioversion as indicated. **Receiving hospital may admit to Intensive Care if indicated.**
- ☐ **Other Instructions:**

Section C — **Artificial Fluids and Nutrition:** ☐ Feeding tube ☒ No Feeding tube; ☐ IV fluid ☒ No IV fluid; ☐ Other Instructions
Antibiotics and Blood Products: ☐ Antibiotics ☒ No Antibiotics; ☐ Blood Products ☒ No Blood Products; ☐ Other Instructions

Section D — **Advance Directives:** The following documents also exist: ☒ Living Will ☐ DPA ☒ DPAHC ☐

Section E — **Patient/Surrogate Signature:** Print Patient/Surrogate Name; Patient Relationship; Date
Physician Signature: Print Physician's Name; Idaho License Number; Date
Discussed with: ☒ Patient ☐ Spouse ☐ DPA ☐ DPAHC ☐ Other
The bases for these orders is ☒ Patient's request ☐ Patient's known preference ☐

FORM SHALL ACCOMPANY PATIENT WHENEVER TRANSFERRED OR DISCHARGED

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Terminology Review: Continued

POST **P**hysicians **O**rder for **S**cope of **T**reatment

****Federal guidelines: POST is NOT an Advance Directive****

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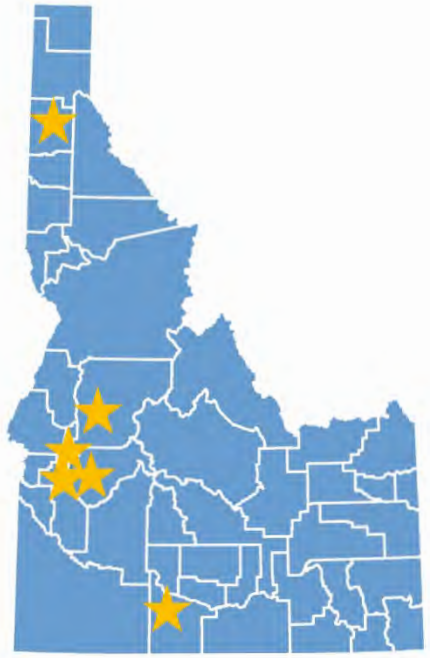
Honoring Choices® Idaho has an Opportunity:

Work with Long Term Care/ Skilled Nursing Facilities to help integrate evidence-based practices in advance care planning



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Thank you! Please let me know if you have questions.

Lynsey Winters Juel: lrjuel@honoringchoicesidaho.org