

of people say it's important to put their wishes into writing



have actually done it

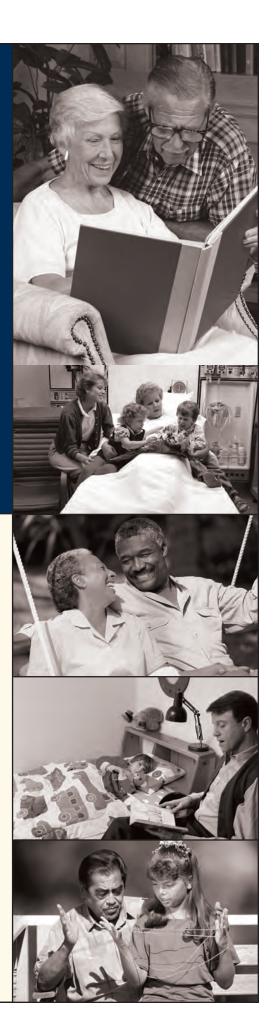
SOURCE: NATIONAL SURVEY BY THE CONVERSATION PROJECT (2013)

# Advance Care Planning

A guide to
communicating
your preferences
for care when
you can no longer
speak for yourself.







# What is Advance Care Planning?

The process by which you determine your wishes in regard to medical care and treatment including the designation of a health care representative. These wishes can be expressed through several types of legal documents

# Advance Care Planning Checklist

- Get the information you need to make informed choices about end-of-life care
- Discuss your thoughts, concerns, and questions with loved ones
- O Discuss treatment options with physician
- Review Indiana advance directive options
- Designate a health care representative and fill out appropriate paperwork
- Complete appropriate document: living will, POST, or other advance directive
- Talk with your health care representative, physician, and other family members about paperwork & healthcare choices
- Keep copy of advance directives in designated place and inform health care representative of location
- Keep ALL original documents.
   Give photocopies to health care representative, physicians, and hospital(s)
- Continue to review documents periodically and discuss choices with family members and physicians

# Care Planning (ACP) Understanding Advance Care Planning (ACP)

## Advance Directives: A document that provides clear instructions about your

**Advance Directives:** A document that provides clear instructions about your future medical care and treatment, which may also designate someone to act on your behalf and is used when you are unable to communicate your wishes.

**Living Will:** A document that specifies which types of medical treatments you desire in the event you become terminally ill or are unable to communicate.

**Power of Attorney:** A document that authorizes another person to act on your behalf in specified matters such as financial decisions, health care decisions, or both.

**Health Care Representative:** The person you appoint to receive health care information and make health care decisions for you when you are unable to do so. This may be done through several documents including Advance Directive and Power of Attorney.

### **POST (Physicians Orders for Scope of Treatment)**

Who: POST is for seriously ill and frail adults. Not all adults need a POST.

**What:** POST lets health care providers know what treatment you do or do not want in a medical crisis by recording treatment preferences as a signed medical order.

**When:** POST works with other Advance Directives such as a living will, Power of Attorney for Health care, and appointment of a health care representative. As your health declines, you – or the person who speaks for you – may consider a POST form to communicate preferences.

**Where:** The original POST form travels with you at all times. If you are at home, the form should be kept with your medications. If you live in a facility, the form will be kept in your medical record.

**How:** Once you have spoken with your physician and/or their designee (such as a social worker, chaplain, or nurse), you and your physician, advance practice nurse, or physician assistant sign the form. The POST is valid in all health care settings.

### Comparison of Indiana Living Will, Out of Hospital DNR, and POST

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	LIVING WILL	OHDNR	POST
When is it used to guide care	In the event the person develops an "incurable injury, disease, or illness determined to be a terminal condition" and is unable to express directions for his or her care	When a person outside an acute care hospital or health facility experiences cardiac or pulmonary failure	POST guides treatment from the moment it is signed by a physician, advance practice nurse, or physician assistant
Requirements for executing	18 years of age and of sound mind	18 or older, is of sound mind, and has been certified by his or her physician as having a terminal condition or a condition in which survival of cardiac / pulmonary failure is unlikely	Person has an advanced chronic progressive disease, frailty, terminal condition, or condition in which survival of cardiac / pulmonary failure is unlikely
Required in order to be valid	Form meets statutory requirements, signed by declarant and two witnesses	Form meets statutory requirements, signed by declarant and two witnesses, and signed by physician	Form meets statutory requirements and BOTH the patient's / representatives signature in section E and the physician, advance practice nurse, or physician assistant signature in section F are mandatory
Whether EMS can honor	Essentially no	Yes, EMS can and should honor the OHDNR	All health care providers, including EMS, can and should honor the POST
How it can be revoked	The declarant may revoke the will, OHDNR, or POST orally, in writing, or by destruction of the document		
Whether representative can revoke	No	ONLY IF the declarant is incompetent to make health care decisions	
Statutory protection for healthcare workers	The statute provides immunity to health care providers who withhold care pursuant to the wishes of the patient as expressed in these documents	The statute provides liability protection as long as health care provider acts in good faith and in accordance with "reasonable medical standards"	Protects health care providers when they act in good faith to honor the orders; Allows a health care provider to choose not to honor the orders if the provider believes: the form is invalid; the form has been revoked; the declarant or his/her representative have requested alternative treatment; the orders would be medically inappropriate for the patient; or the orders conflict with the care provider's religious or
CREDIT: WWW.IN.GOV/DHS			moral beliefs

# Advance Care Planning Resources



Central Indiana Care Coordination Coalition: Indianapolis; 317-223-3090

**LifeStream Services, Inc.**: Yorktown; 765-759-1121 or 800-589-1121

**Qsource**: Indianapolis; 317-646-0887

Putnam County Hospice and Palliative

Care Association: Greencastle;

765-655-2524

Northeast Indiana Coalition for Advance Care Planning (NICA):

Fort Wayne; 260-745-1200

Wabash Valley Care Coalition:

Terre Haute; 812-238-7295

**Indiana Patient Preference Coalition:** 

Indianapolis; 317-274-0032

Indianapolis Coalition for Patient

Safety, Inc.: Indianapolis; 317-223-3090

The University of Southern Indiana's New Harmony Conversations Team:

Evansville; 812-461-5277

Honoring Choices® Indiana- North Central: South Bend; (574) 243-2058



**Contact:** Katelyn Hougham, ACP Coordinator; khougham@agingihs.org

260-745-1200 x334

The Northeast Indiana Coalition for Advance Care Planning (NICA) is modeled after Respecting Choices® Advance Care Planning, an internationally recognized, evidence-based model of advance care planning (ACP) that honors an individual's goals and values for current and future healthcare.

#### **Information on POST:**

www.polst.org

www.indianapost.org

### Information on ACP and Care Options:

Aging & In-Home Services of Northeast Indiana

Aging & Disability Resource Center; 260-469-3036 or 800-552-3662 www.in.gov/fssa/inconnectalliance

www.in.gov/isdh/25880.htm

www.gundersenhealth.org/respecting-choices

www.compassionandsupport.org

http://theconversationproject.org (Starter Kit)

www.aarp.org (Caregiving Resource Center)

www.honoringchoicesindiana.org

#### **Electronic Advance Directive Options:**

My Health Care Wishes Lite – A free phone app to safeguard your wishes www.mydirectives.com

#### **Legal Assistance:**

United Way 2-1-1 Line, or your local United Way

Dale, Huffman, and Babcock Lawyers: www.dhblaw.com

Cancer Legal Resource Center\*\*: 1-866-843-2572; CLRC@LLS.edu;

www.cancerlegalresourcecenter.org

National Hospice and Palliative Care Organization\*\*: 1-800-658-8898

(helpline); 1-877-658-8896 (multilingual line); www.caringinfo.org

Neighborhood Christian Legal Clinic\*\*: 260-456-8972

Allen County Bar Association: 260-423-2358

Indiana Bar Association: 317-639-5465

Volunteer Lawyer Program Legal Line: 260-423-2358; 260-407-0917

or 877-407-0917

Indiana Legal Services: www.indianalegal services.org

Indiana Legal Services - Fort Wayne: 260-424-9155 or 888-442-8600

\*\*Spanish interpreters offered