

Advance Directives







- 1. Understand the different Advance Directives options available in WI
- 2. Understand the benefits of completing an Advance Directive
- 3. Define the role that IDT staff in educating and assisting members regarding Advance Directives



Why Plan Ahead, why an Advance Directive?

- To guide decisions when you may not have the ability to do so
- To identify preferences you may have
- To avoid burden being placed on the remaining support system



• To avoid costs and time of guardianship

Different Types of Advance Directives

of people believe that talking with their loved ones about end-of-life care is important, but only 27% have actually done so.

60%

of people think that making sure their family is not burdened by tough decisions is "extremely important," but 56% have not communicated their end-of-life wishes. 80%

say that if they were seriously ill, they would want to talk with their doctor about end-of-life care. Sadly, only 7% have had an end-of-life conversation with their doctor.

82% of the population thinks it is important

to put their wishes in writing, but only 23% have actually done so.



Health Care Advance Directive Options in WI

- Living Will (Declaration to Physicians)
- Power of Attorney for Health Care (POA-HC)
- Power of Attorney for Finances (POA-F)
- Do-Not-Resuscitate Orders (Code Status)



Living Will

- Declarant states preferences; does not delegate another person to make decisions on their behalf
- Doctor retains authority to treat based on what is felt to be in the best interest medically for that person

Only applies in two medical situations: 1. Terminal with death "imminent" 2. "Persistent Vegetative State"

Only applies to two "treatments" 1. Life-sustaining Treatment 2. Feeding Tubes



When a Living Will would not apply

- Declarant is pregnant
- Not in a persistent vegetative state or terminal with death imminent....
 Examples: post-stroke, Alzheimer's, head injury....
- Not life-sustaining treatment or tube feedings involved... Examples: after a head injury you may require admission to a facility this documents would not outline your wishes regarding that.

Completing a Living Will

- Declarant makes three decisions by checking boxes
- This document requires two "disinterested" adult witnesses (18 or older)
- Discuss document with family, friends & doctors
- Provide a copy of this document to: the Declarants family, Primary MD, Long-term care agency and local hospital



Choices in a Living Will

- Completion of a Living Will allows you to declare your preferences regarding:
 - ✓ Feeding tubes when terminally ill
 - ✓ Life-sustaining when in Persistent Vegetative State
 - ✓ Feeding tubes when in Persistent Vegetative State
- **NOTE:** Living Wills do not allow you to express your choice regarding life sustaining treatment when terminally ill



Power of Attorney for Health Care (POA-HC)

- The "Principal" (person completing document) appoints an "agent" (decision maker) to make <u>healthcare</u> decisions on their behalf in the event they have been deemed incapacitated (unable to make decisions) by a Dr.
- POA does not become 'activated' until the principal is incapacitated (unless specified differently within document)



Decisional authority of an Agent

- Agents can make the following decisions once a POA is 'activated':
- Additional decisions can be delegated per principals wishes

Can admit to residential settings such as:Nursing Home

Assisted Living

Can authorize life sustaining treatments such as:

- Feeding tubes
- Breathing tubes

Can authorize use of Experimental drugs or treatments



Selecting an Agent

- Choose someone you trust and will follow your wishes
- If possible, choose a person who is geographically close so they are able to act timely when needed
- Talk with your potential agent(s) about their level of assertiveness to understand if they would advocate for them
- Choose someone who is a good communicator and has the ability to understand medical situations



• NOTE: Lakeland Care staff members cannot be an agent or a witness

Completion of a POA

- Complete the advance directive paperwork and sign the document
 - The POA document requires signatures from the principal and two "disinterested" adult witnesses (18 or older)
- Provide copies of the document to the agent, family, medical providers, long-term care agencies and local hospitals



Principal should retain the original copy

Financial Durable Powers of Attorney (POA-F)

- POA-F is needed to make <u>financial</u> decisions on your behalf if you are no longer able to
- The "Principal" appoints "agent"
- The POA-F becomes effective immediately, does not require the "Principal" to be named incapacitated
 - If listed specifically within the document, it can have different terms of when the document will go into effect



Powers that can be Delegated to an Agent

- Banking
- Bill paying
- Real estate
- Investments
- Insurances
- Public benefit applications

- Pensions
- Borrowing / Collecting loans
- Gifting Caution!
- Limit to whom
- Limit amounts
- Limit Frequency
- Third party consent



Do Not Resuscitate Order

- Can only be offered to a "Qualified patient" which is defined as a person who has been diagnosed to be terminally ill
- Person must ask the physician to sign the order
- When a DNR order is complete, person is issued a bracelet to wear indicating their code status



Summary

- Advance Directive Types:
 - Power of Attorney for Health Care (POA HC)
 - Power of Attorney for Finances (POA F)
 - Living Will
- Any competent individual can complete an Advance Directive
- Do Not Resuscitate Order (DNR)

 Any terminally ill patient is considered a 'qualifying patient' to request a DNR status



Check out the Department of Health Services Website to learn more about each of your options and to complete the necessary paperwork to initiate an advanced directive.

https://www.dhs.wisconsin.gov/forms/advdirec tives/index.htm



