# What Are Your Wishes?

How To Have Goals of Care Conversations

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#### Disclosures

- ✦ Relationships with Financial sponsors: none to disclose
- → Potential For Conflict(s) of interest: none to disclose

## Objectives

- → Experience a session of Mindfulness
- ♦ To define the types of Advance Directives
- ♣ To provide guidance through a goals of care conversation
- → To define life sustaining measures

# In Memory Of Gail & Roland



AMARAL, GAIL A., and SMITH, ROLAND W. Gail A. (Smith) Amaral, LPN, 66, of West Greenwich, died Thursday, March 2, 2017 in a car accident in Arcadia, Florida. She was reunited in heaven 6 days later on March 8th, 2017 with her brother, Roland W. Smith, also of West Greenwich, who succumbed to injuries he received in the same accident.

#### A face to the name



## Not Today!

- ♦ 92% people believe it is important to talk about end of life wishes
- \* 32% have had conversation Source: The Conversation Project National Survey (2018)
- ♦ 21% of people say they haven't had the conversation because they do not want to upset their loved ones
- ♦ 53% say they would be relieved if a loved one ask to start conversation
- ♦ 95% are willing or want to talk to talk about their end-of life wishes.

  Source: The conversation Project National Survey (2018)

# The Conversation that made the difference

- ♦ 97% of people say it's important to put their wishes in writing
- \* 37% have actually done it. Source: Kaiser Family Foundation Serious Illness In Late Life Survey (2017)

# In The Blink Of A Eye

Ge goes by in a blink of an eye. Be sure to appreciate the many moments with family and friends that make your life complete.

# Considerations Before Conversation

- ♣ Type of Conversation Everyone should have the conversation 18 and up.
- \* As with the general population, it is important to initiate the advanced care planning discussions for all people with intellectual/developmental disabilities and those with dementia 18 years of age or older.

### Mindful Interactions



How is the clients health- good, fair, poor, high risk.

Multiple chronic conditionsasthma, diabetes, cancer, chronic bronchitis, congestive heart disease, cirrhosis of the liver, depression, emphysema, HTN

Photo By Melissa Mc Glensey, http://themight.com/wp-content/uploads/2014/12/Screen-Shot-2014-12--11-at-12.21.02-pm.png

# Conversation Considerations

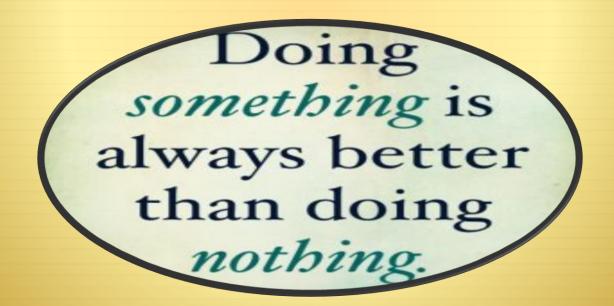
- ♣ In planning the conversation it is important to determine the capacity or ability of the client to choose who they trust to make health care decisions or to join in the conversation.
- ♦ Clients who have decisional capacity have a right to make their own healthcare treatment decisions.
- ♦ Decisional capacity is the ability to consent to or refuse care.
- ♣ If the client does not have the capacity to choose a health care agent, consider initiating guardianship, with the the authority to make medical decisions.

# Forms Needed For Conversation

- ♦ Conversation Five Wishes, The Conversation Project
- ♦ Advanced Directives/Living Will State Specific
- ♦ DPOA- Durable Power of Attorney for Health Care or a Medical Power of Attorney/ Health Care Agent/Surrogate
- ♦ DNR- Physician Signed
- ♦ DNI Physician Signed
- \* MOLST /POLST Healthy people are NOT appropriate for MOLST or POLST and should complete a Advanced Directive- (MOLST-1 year e.g. client of advanced age or serious illness may have explicit wishes. Physician Signed)

# Deciding What Is Best For Your Client

- **♦** A Conversation
- → Multiple Conversations



## Environment



### Environment



# Creating The Environment

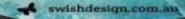
- → Privacy
- → Temperature
- ♦ Colors
- ♦ Seating
- ♦ Nature
- → Air Quality & Smells
- ♦ Tea and Truths

# Introduction to the goals of care conversation

- ♦ Tonight we are going to lead by example.
- ♦ Experience a goals of care conversation

The biggest communication problem is we do not listen to understand.

We listen to reply.



#### Welcome

- ♦ Warm welcome
- ♦ Sit facing the client
- ♦ Begin by stating why we have gathered here today
- ♦ Does the client understand their medical condition

# Mindfulness



#### Advance Directive

- ♣ Advanced Directives are legal documents that can guide health care decisions if you become ill and can no longer speak for yourself. The Advanced Directive can help your loved ones know what you want, what means a lot to you.
- ♦ This Advanced Directive only is used if you can no longer talk for your self any more.
- ♦ Encouraged to have at 18 years of age and revisited.

# Who Should You Pick To Speak For You When You Can't Speak For Your Self





# The Person I Want To Make Health Care Decisions For Me When I Can't Make Them For Myself

- ♦ When a person is too sick to make decisions, the health care team relies on someone close to them to help them understand and help others understand what it is they may want.
- ♦ Pick someone who you trust, cares about you and knows you well.
  It might be a family member or a close friend
- ♦ They must be 18 years or older
- ♦ They should NOT be:
  - ♦ Your Health care provider, including owner or operator of a health or residential or community care facility
  - ♦ An employee or spouse of an employee of your Health Care Provider

#### Second & Third Person

♣ Incase the first person is not able to be reached a second contact should be listed.

# Understanding The Medical Condition

- ♦ It is EXTREMELY important to inquire what the clients understanding of their condition is first.
  - ♦ Ask open ended questions:
  - ♦ Can you tell me about one of your medical conditions
  - ♦ Why have you been brought to the hospital?
- ♦ Do they understand risks and potential benefits?
- ♦ Do they understand consequences of treatment or intervention refusal?
- ♦ Do they understand alternatives?
- ♦ Do they understand the treatment interventions?

#### Wishes

- → I would like my friends to visit
- ♦ I would like my family to visit
- → I would like to be alone
- ♦ Being able to tell my life story
- Having religious or spiritual visits
- → Being at home, hospital, nursing home, ALF.
  - ♦ I call home

#### Wishes For Comfort

- ♦ I do not want to be in pain. I want medicine even if it makes me sleep
- → I wish to have a cool cloth on my head
- ♦ I want my lips and mouth moist
- ♦ I want bed baths if I cant take baths anymore
- ♦ I wish to have massage
- → I wish to have my favorite music played\_\_\_\_\_\_\_

**♦** \_\_\_\_\_

\* Sample Resources: Five Wish Booklet

#### Comfort & Treatment

- ♦ I wish to have prayers read to me
- ♦ I wish to have people with me when possible
- → I want my hand held
- ♦ I wish to have pictures in my room
- ♦ Other\_\_\_\_\_\_

Sample: Resource Question From Five Wishes

# I wish for my friends and family to know

- ♦ I love them
- ♦ I wish to be forgiven
- ♦ I do not fear death
- → I want my family and friends to make peace with each other
- ♦ Please respect my wishes
- ♦ I want you to remember me like:

\* Resource: Five Wish Booklets

### Medical Conditions

Unconsciousness, coma and vegetative state

Dementia

## Life Sustaining Measures

- These are medical treatments that are available to us sometimes they are used for a short time to get a person through a health crisis, like when when a chronic illness suddenly gets worse.
  - ♦ Can be used in a sudden serious situation or illness.
     They do not cure disease or chronic illness

Cardiopulmonary resuscitation (CPR)

Dialysis

Feeding Tubes

Ventilator

#### CPR

- ♦ CPR is performed only when your heart has Stopped beating (cardiac arrest)
- ♦ Know your client
  - ♦ Expected part of the disease and dying process
  - ♦ Unexpected is this sudden

You have a choice about whether or not you would get CPR when your heart stops beating.

# Dialysis



# Feeding Tubes



# VENTILATOR



# **FORMS**

♦ DNA: Do Not Attempt Resuscitation

♦ DNR: Do Not Resuscitate

♦ DNI: Do Not Intubate

♦ Difference between DNR/DNI & MOLST/POLST

## Burial And Arrangements

♦ Burial And Funeral Arrangements

Buried

Cremated

♦ Discuss Funeral or memorial services

where it is held

songs

donations

wishes

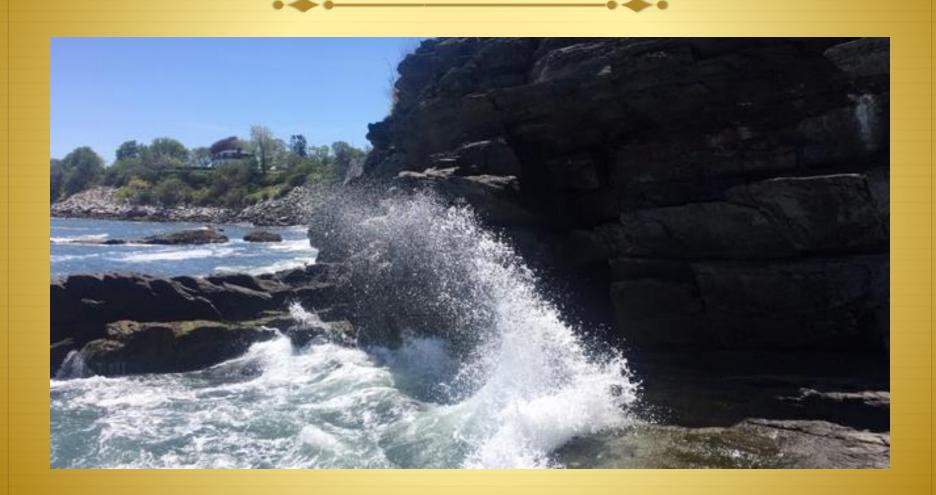
## The Specific Forms Rules

- ♦ Sign The Form as stated
- ♦ Witness Statement (2 witnesses usually needed)
- ♦ Notarization

## After Completed

- \* Review your wishes with your Health Care Agent, family member
- \* Keep original copy keep in a safe spot in your home
- ♦ If it has a wallet card fill out and place in your wallet
- ♦ Talk to your Doctor about your wishes and give them a copy.
- ♦ Make a Hospital folder place one in there for emergency.
- ♦ Organ Donation Consideration

# Questions?



#### Resources

MOLST.org- Beautiful Resource and Videos

POLST.org

Compassionandsupport.org

<u>CaringInfo</u> provides free advance directives and instructions for each state.

Fivewishes.org

Nhpco.org

The conversationproject.org

There is even an online card game you can play to begin thinking about these topics - "Go Wish" (<a href="http://gowish.org/gowish.html">http://gowish.org/gowish.gowish.html</a>).

Net Flix film, Extremis -https://www.youtube.com/watch?v=TJiY8duVgz0