END OF LIFE READY

END-OF-LIFE OPTIONS & ADVANCE CARE PLANNING

end of life
WASHINGTON
EOLWA Services

Education & Resources
Support: Volunteer Client Advisors (VCA)
Advocacy & Public Policy

What This Session Will Cover

Part 1:
Planning Ahead
Preparing for the unexpected

Part 2:
End of Life Choices
Dying on your terms
Talking About End of Life
Complete a Values Worksheet

Review your values and choices

• What does living well mean for you?
• How do you define quality of life?
• How important is your independence?
PART 1: Planning Ahead

Choose Your Support Team
Choose Your HealthCare Agent

Create a Durable Power of Attorney for Health Care
Complete a Health Care Directive

Health Care Directive

4. When I do not want life-sustaining treatment

I value life very much, but I believe that in certain circumstances it would be better that it be stopped. If I listed an item in this section, it means that if such an itemized life-sustaining event should occur, I would not want to receive life-sustaining treatment. I want my caregivers to focus on comfort care and pain management, and I should be allowed to die as peacefully as possible.

a. Unconsciousness or coma that probably will prevent me from communicating, permanently.

b. Irreversible dementia such as Alzheimer’s Disease.

5. Life-sustaining treatments I do not want

I express my wishes in writing to my primary care provider. If I am unable to sign, or my primary care provider is unavailable or unable to communicate, I want my caregivers to focus on comfort care and pain management, and I should be allowed to die as peacefully as possible.

6. My wishes concerning comfort care and pain management

I want to receive pain medication and comfort care, and I want my caregivers to focus on comfort care and pain management, and I should be allowed to die as peacefully as possible.

Create an Advance Directive

Advance Directive (Living Will)
- Health Care Directive
- Health Care Agent (Durable Power of Attorney for Healthcare)
Completing Your Advance Directive

✓ Validate
✓ Share
✓ Make Accessible
✓ Update as Needed
✓ Evaluate Travel
✓ Only Need One
Additional Directives

Living with Dementia Mental Healthcare Directive

My Instructions for Oral Feeding and Drinking

Instructions and Mental Health Advance Directive for Living with Dementia

The instructions contained in this document will enable you to complete and implement the Living With Dementia Mental Health Advance Directive (referred to from now on as “Directive”). Because this document offers you the option of permanently giving away your rights to make certain decisions, it is very important that you read and fully understand these instructions and the entire Directive before you complete and sign the Directive.

Updated 1-15-2020
Download pdf

My Instructions for Oral Feeding and Drinking

Instructions and an Advance Directive form protecting against attempts to give you food and water if progressive dementia such as Alzheimer’s cause you to lose the ability to feed yourself, interest in food or water, or the ability to eat or drink without aspirating food and water into your lungs. This document does not apply to people with dementia who still get hungry and thirsty and want to eat and drink.

Updated 10-5-2020
Download the PDF

Evaluate Need for a POLST

Portable Order for Life-Sustaining Treatment

- Diagnosis of serious illness or end stage of life
- Medical order that documents your choice regarding life-sustaining treatment
Advance Directive & POLST

All Adults

Complete Advance Directive: HC Directives & DPOA for Health Care

Update Periodically or as Needed

Living with an Illness/Over a certain age

Evaluate Need for POLST

Update as Status Changes

End of Life Wishes Documented
PART 1: Planning Ahead

Summary & Questions?

- Complete a Values Worksheet
- Create Advance Directive
  - Complete Health Care Directives
  - Choose your Health Care Agent
- Evaluate need for a POLST
- Choose Your Support Team
PART 2: End of Life Choices
Know You Always Have a Choice

Accept or Refuse Treatment
# Reducing Discomfort

## Palliative
- Any stage of disease
- Same time as curative treatment
- Paid for by most insurance
- Home, facility or hospital

- Reduces Pain & Stress
- Offer complex symptom relief related to serious illness
- Physical and Psychosocial relief

## Hospice
- 6 months or less prognosis
- Excludes curative treatment
- Paid by Medicaid, Medicare, Insurance
- Home, facility or hospital
- Includes resources for support team

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Hastening Death,
Dying on Your Terms
Medical Aid in Dying (MAID)

Allows someone terminally ill to control the timing of their death with medication, to reduce anxiety, pain and/or suffering.
Death With Dignity Act

Qualifications

- Terminal illness with less than 6 months to live
- Resident of WA State
- 18 years of age or older
- Capable of self-administering
- Two providers who can and will support DwD, one of which can be a PA or an ARNP.
- Decision-making capacity
MAID: Important Aspects

If interested, make the request as soon as eligible
7 day waiting period from time of first oral request to prescription.
25% of patients don’t end up using the medication
1:1 support available from EOLWA
- Volunteer Client Advisors (VCAs)

<table>
<thead>
<tr>
<th>18-104 Years Old</th>
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</thead>
<tbody>
<tr>
<td>70% Cancer</td>
</tr>
<tr>
<td>7% ALS</td>
</tr>
<tr>
<td>6% COPD</td>
</tr>
<tr>
<td>6% Heart Disease</td>
</tr>
<tr>
<td>2% Parkinson's/MS</td>
</tr>
<tr>
<td>9% Other</td>
</tr>
</tbody>
</table>
Christine’s Story
When Medical Aid in Dying Is Not an Option
VSED is a voluntary choice to hasten death by removing nutrition and hydration to allow the body to die within 1-2 weeks.
Jeff’s Story
VSED in Washington State

Collaboration with entire care team essential

Clients have been suffering from various diseases:

- Parkinson’s
- Huntington’s
- ALS
- Early Alzheimer’s
- Muscular Dystrophy
- Neurodegenerative diseases
- Autoimmune diseases
- Severe Arthritis
## End-of-Life Options with Dementia

<table>
<thead>
<tr>
<th>Stages 1-3</th>
<th>Stages 4-5</th>
<th>Stages 6-7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Some Functional Decline and Early Alzheimer’s</td>
<td>Mild to Moderate Alzheimer’s</td>
<td>Moderately Severe to Severe Alzheimer’s</td>
</tr>
</tbody>
</table>

### Advance Directives
- Dementia Directive
- POLST

### Voluntary Stopping Eating and Drinking (VSED)

### My Instructions for Oral Feeding and Drinking (SED)
- Comfort Feeding Only (CFO)
PART 2: End of Life Choices

Summary & Questions?

✓ Know you always have a choice
  • Stopping or refusing treatment
  • Medical Aid in Dying
  • Voluntary Stopping Eating and Drinking
✓ Dementia Options
Review:
Most Important Step
## Know and Confirm Who Will Support You

### End-of-Life Choice

<table>
<thead>
<tr>
<th>End-of-Life Choice</th>
<th>Required Facilitator</th>
<th>Support &amp; Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>POLST</td>
<td>Doctor</td>
<td>Friends &amp; Family</td>
</tr>
<tr>
<td>Refusing or Stopping Treatment</td>
<td>Doctor, Physician Assistant, Nurse Practitioner</td>
<td>Health Care Providers</td>
</tr>
<tr>
<td>Hospice and Palliative Care</td>
<td>Doctor, Physician Assistant, Nurse Practitioner</td>
<td>Death Doulas</td>
</tr>
<tr>
<td>Death with Dignity (Medical Aid in Dying)</td>
<td>Two Supportive Providers, one of which can be a PA or ARNP</td>
<td>Spiritual/Religious leaders</td>
</tr>
<tr>
<td>Voluntary Stopping Eating and Drinking (VSED, SED, CFO)</td>
<td>Encourage Doctor/Hospice Involvement</td>
<td></td>
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</table>

# Check the Boxes

## End of Life Ready Checklist for Health

- **Identify my Support Team:** Physicians, Nurse Practitioners, Physician’s Assistant, Care Providers, Health Care Agent, Friends, Loved Ones, Spiritual Support
- **Complete Advance Directive:** Health Care Directive & DPOA for Healthcare (Named Health Care Agent)
- Evaluate need for a POLST
- Discuss and provide copies of Advance Directive to my support team
- Talk about your end-of-life wishes with those who care for you so they are prepared and aware of your choices
Additional End-of-Life Planning

- Final Disposition Arrangement
- Designated Agent
- Contact List
- Worry Free Wednesdays

- Account and Password Management
- Last Will and Testament
- Celebration of Life
- Legacy
Help Us Educate Others

End of Life Ready: An Introduction to Advance Planning and your End-of-Life Options

Prepare now, reduce anxiety for yourself and those you love.

A 40 minute engaging presentation with stories, resources followed by Q&A, suitable for adults of all ages, community groups and organizations.

No one plans to become seriously ill, disabled or unable to make healthcare decisions. Planning is a way to ensure you get the healthcare you want—and none of the medical interventions you do not want.

Presentation is customizable to include or focus on specific topics (including those below) or to be paired with partner organizations on leaving your legacy for loved ones, financial and legal planning etc.

Request an End of Life Ready presentation for your organization or group today.

End of Life WA    (206) 256-1636    www.endoflifewa.org


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Co-Workers

Personal Network

Community

Health Care Providers

Organizations
Supporting EOLWA

Providers
Join our Provider’s Network

Volunteers
We provide training and support to volunteers throughout the state

Donations
We are 100% supported by donor dollars. Our services are offered at not cost to clients.