

Advance Care Planning: Your Right to Make Your Healthcare Decisions Known

SCL Health and our care sites in Montana are committed to providing healthcare that is safe, is of high quality, and respects the values of healthcare in the Catholic tradition. We also respect your right to make decisions about your healthcare.

We understand the importance of advance care planning. At any age, a medical crisis could leave someone too ill to make his or her own healthcare decisions. Advance care planning involves learning about the types of decisions that might need to be made, considering those decisions ahead of time, and then letting others know about your preferences, often by putting them into an advance care planning document. An advance care planning document is a legal document that goes into effect only if you are incapacitated and unable to speak for yourself. We treat people with respect and actively protect human dignity. Healthcare in the Catholic tradition respects life from conception to natural death. We cannot honor any directive or decision that is intended to end life or make death happen sooner.

An advance care planning document is any written statement or document you make to communicate about your medical treatment and your choice of the person you want to make decisions for you if you are unable to communicate. Federal law requires us to inform you about advance care planning documents at the time you are admitted by any hospital, nursing home, hospice, or home healthcare that receives federal funds such as Medicare.

If you do not have an advance care planning document, you will still receive the medical care and treatment you need.

Advance care planning documents can be either advance directives or written medical orders that reflect your values about medical treatment and end-of-life care.

In Montana, some of the main types of advance directives are:



- Medical Durable Power of Attorney (MDPOA, also referred to as a Durable Power of Attorney for Healthcare, healthcare agent or healthcare proxy): a document you sign naming someone to make your healthcare decisions, if and when, you are not able to communicate. The person you name is called your healthcare agent. MDPOA's are important as your legally named person to speak for you and reflect your values and wishes when you are unable to do so. It is valuable to have an MDPOA even when you have other advance care planning documents. This is a legal document that you can complete on your own; you do not need a lawyer to complete an MDPOA document.
- <u>Living Will:</u> a document that you complete and sign telling your doctors to stop or not start certain life-saving treatments if you are dying and can't make your own decisions, or if you are in a persistent vegetative state.
- <u>CPR (Cardio-Pulmonary Resuscitation) Directive:</u> a document that you or your healthcare agent signs that allows you to refuse resuscitation. *This form of advance directive must be signed by both you or your healthcare agent and your physician.*
- Organ donor document, including organ donor designation on one's driver's license: a signed document often referred to as an organ donor card, where you indicate that you desire to be an organ donor and which organs you are willing to donate.
- <u>Jehovah's Witness "No Blood Card</u>": a legal informed refusal of treatment declaration you sign indicating a refusal to accept a blood transfusion in any circumstance that may arise at a future time where you, as a Jehovah's Witness, lack decisional capacity or are unable for any reason to speak for yourself.

Montana also recognizes the Providers Orders for Life-Sustaining Treatment (POLST) form.

• The POLST form is a summary of patient treatment choices which, when signed by a healthcare professional, becomes a medical order set that directs your treatment in any setting: hospital; clinic; long-term care facility; assisted living residence; hospice; or at home.



• This form is meant for use by seriously ill people who see healthcare providers often or who are already living in any healthcare setting.

We want to be sure that you can tell us what you have decided about your healthcare. We have provided a list of resources below to help you in your healthcare planning. You can use these resources to acquire advance care planning forms and documents. This list does not represent an endorsement on behalf of SCL Health and our care sites in Montana.

If you have any questions about advance care planning, are in need of an advance care planning form, or are in need of assistance in completing an advance care planning document, please contact the Spiritual Care Department at one of our local health facilities. One of our Spiritual Care personnel will be glad to respond to your call as they are available.

Advance Care Planning Resources:

- <u>Montana End of Life Registry & Advance Healthcare</u>
 <u>Directives</u>
- <u>Caring Connections (various state forms and materials)</u> (free download)

 800-658-8898
- Supportive Care Coalition (various states forms and materials) (free download)

 503-216-5377
- <u>Catholic Health Association, "Advance Directives: A Guide</u> to Help You Express Your Healthcare Wishes"



- Providers Orders for Life-Sustaining Treatment (POLST)
 - National site (free download)
 Montana POLST site
- <u>National Healthcare Decisions Day</u>