



Carla Jolley

START TALKING!

Carla Jolley ARNP, MN, AOCN, CHPN
Oncology/Palliative Care Advanced Practice Nurse

Recently, I had two very different conversations with families facing loss to a serious illness. They offer a great compare and contrast of why it is so important to take time to find courage to talk about personal wishes and values regarding end of life.

THE FIRST FAMILY was a husband and son who faced the loss of their wife and mother to metastatic colon cancer. She was in palliative treatment and expected to extend her life for a couple more years. She wanted everyone to know what her health choices were, and wanted peace of mind that at the end of her life, her wishes would be honored. She was very clear that, if at all possible, she wanted to die at home on hospice when treatment was no longer working, and that if something serious happened in the meantime she did not want to be resuscitated. She filled out a green POLST (Physician Orders for Life Sustaining Treatment) form to support these decisions. Though her family was devastated by their impending loss, they were grateful they knew what to do to honor her wishes. This family engaged in ongoing conversations about the long health care journey ahead because they realized in filling out the advanced care directives, though it was necessary to have them in writing, it was more important that they were able to learn what was most important to all of them in looking at their limited time together.

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THE SECOND FAMILY were two daughters and their father. He had end stage heart failure and lung disease. The father had been in the hospital four times in the last six months. Each time he returned home he was able to do less and less for himself. He had been very ill the last time he went to the hospital, and the doctor asked the daughters about their father's wishes. All they knew

was their father's oft repeated phrase, "don't put me out to pasture in a nursing home." They had to decide, since he could not speak for himself, whether to agree to have him on the ventilator to try to prolong his life and help him breathe. The doctors did not know if it would help because he was so fragile. If they put him on the ventilator he might not ever be able to breathe on his own again with his bad lung disease. The daughters knew his quality of life was declining, but had no idea how he felt about it, and what he would want them to do. They had trouble agreeing, and neither one had talked to him about his declining health or wishes. He did not have any advanced directives to help guide their decisions. They were in significant distress over what to do. No matter what they decided, they did not have any peace of mind that either to try the ventilator or not is what their father wanted.

THIS IS WHY IT IS IMPORTANT TO HAVE THESE CONVERSATIONS. While 60% of those surveyed, say that making sure their family is not burdened by "tough decisions" is "extremely important", only 56% had communicated their end-of-life wishes. Also, according to the 2012 Health Care Foundation Survey, 82% of people say it's important to put their wishes in writing, while 23% have actually done it. What the Institute for Health Care Improvement found (2005) was that though 70% of Americans prefer to die at home, the reality is that 70% die in the hospital, nursing home, or long term care.

Some of the ice breaker questions are:

"Even though I'm okay right now, I'm worried that....., and I want to be prepared."

"Remember how someone in the family died? Was it a good death or a hard death? How will yours be different?"

"I just answered some questions about how I want the end of my life to be. I want you to see my answers. And, I'm wondering what your answers would be?"

For more Information

At www.whidbeygen.org, Whidbey General has developed the resources and information that you may need complete your own advanced care planning and tools you might use to help you with your conversations.

There is also a quarterly class offered **BEYOND ADVANCED DIRECTIVES: Decisions to Consider, Conversations to Have**, July 10. See Health Education Classes, page 16 for more information.

The Institute of Health Care Improvement started a program called *theconversationproject.org*. In the "Starter Kit" they offer several ways to begin the "end of life" conversations, as well as specifics about topics to cover.

START TALKING continued next page

WHIDBEY FALL FASHIONS

Style Show, Luncheon, & Silent Auction

Saturday
September 15
11:30 am
Useless Bay
Golf & Country Club

Benefit for:
Friends of Home Health Care and Hospice of Whidbey General Hospital

SAVE the DATE!

CABULANCE DISCONTINUED

The hospital owned Cabulance program has provided an important service to our patients and community for the past several years; however the aging vehicle and the high operating cost for a relatively small number of transports has rendered the service financially unviable at a time when other transportation providers are prepared to take on the work.

After much analysis and deliberation, we have concluded the most cost effective and responsive manner to provide transportation services for hospital patients in need of a ride is through a partnership with local taxi, van and Para transit services. The companies that have committed to provide this service understand that our patients are to be treated in a manner consistent with our values and standards of behavior and that responsiveness is an expectation.

Should you have any questions or concerns please contact Jean Caldwell, Director for Care Management at 678.7656 ext 2354 or 321.7656 ext 2354. Following are the companies we are working with.

Transportation Partnerships

AULT FIELD TAXI
360-682-6920

- No advance reservation required, although advance reservation will be accepted within 48 hours of transport

CARRY ME
360-756-3239

- Normally requires advance notice

PARATRANSIT
360-678-4353

- Free service for eligible individuals as part of Island Transit and requires advance reservation, generally one day in advance

SENIOR SERVICES
360-678-4886

- Volunteer-operated vehicles requesting advance reservation

START TALKING *continued*

SO WHY DON'T PEOPLE TALK ABOUT IT?

Some people are afraid to think or talk about their dying, though it is a sure inevitability. It is easier to not address it thus saving us from uncomfortable feelings. Some family members are afraid to talk to their seriously ill loved ones, because it makes their impending decline or loss more "real." Some people put it off, because they think they can deal with it when they are older or when something happens, though trauma or life-threatening health crisis can strike anyone at any time. Even if people have completed their advanced directives, it is still important that those who will be making decisions for the person, know more about their wishes or health care preferences than what is on the forms.

Thank you TO OUR NURSES

National Nurses Week is celebrated annually from May 6 through May 12 (the birthday of Florence Nightingale, the founder of modern nursing). Like Florence Nightingale, our nurses embody this year's theme for nurse's week by *Delivering Quality and Innovation in Patient Care.*

Whidbey Island Public Hospital District salutes our nurses and the team of nursing assistants, emergency technicians, and health unit coordinators who support them. Together they provide exceptional care in our hospital, community clinics, physician practices, and through our Home Healthcare and Hospice departments. They tirelessly carry out their responsibilities with care, compassion, and a strong commitment to clinical excellence.