



THINK ABOUT IT



TALK ABOUT IT

A close-up photograph of hands typing on a laptop keyboard. The image is tinted with a warm, golden-brown color. A pen and a small container are also visible on the desk next to the laptop.

WRITE IT DOWN

ADVANCE CARE PLANNING GUIDE

**Starting a conversation with loved ones
and choosing someone to make medical decisions
for you if you are unable to do so.**

MYLIFEMYCHOICES.ORG

ABOUT MY LIFE MY CHOICES

My Life My Choices is a program of the South Carolina Coalition for the Care of the Seriously Ill. It is funded through the support of the BlueCross BlueShield of South Carolina Foundation.

This booklet was created with help from the South Carolina Hospital Association, South Carolina Medical Association, the Physicians Foundation, and The Carolinas Center, and will help guide you in **talking with loved ones about what matters most to you should they have to make health care decisions for you in the future.**



It will also help you choose a health care agent and document your wishes for health care if you are unable to speak for yourself. This information will help your health care agent to honor your decisions.

Please read this booklet carefully and use the information to discuss what matters most to you with your loved ones, health care agent, and your doctor.

“It’s never too early until it is too late.”

Nathan Kottkamp, JD


Founder of National Healthcare Decisions Day

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ADVANCE CARE PLANNING (ACP)

“Our ultimate goal, after all, is not a good death, but a good life to the very end.” — *Atul Gawande*



Advance care planning (ACP) is not just about planning for the elderly, but it is for anyone 18 years or older. It is making decisions about the care you would want to receive if you become unable to speak for yourself due to a sudden, serious accident or illness.

You have the right to make your decisions about what care you would receive and have that care based on your personal values, goals, and beliefs.

If you became seriously ill, would those who had to make decisions for you know what matters most to you? Take time to talk with them about the kind of care that is right for you. Let them

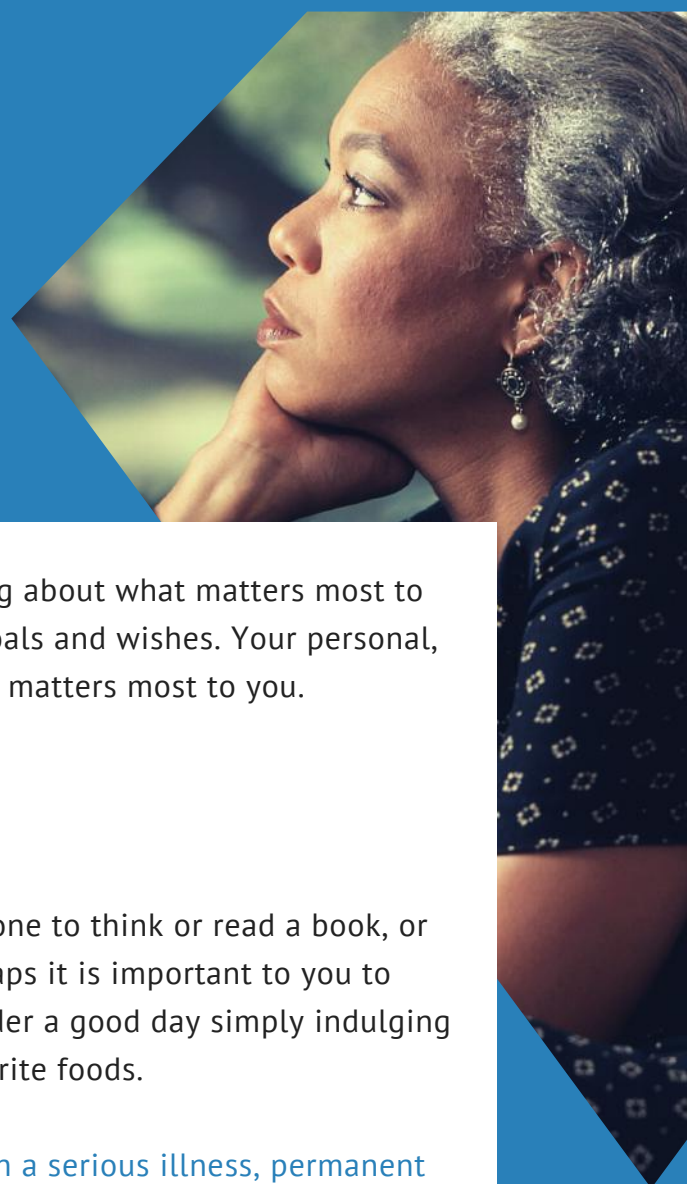
know what a good day looks like for you. This can help guide them should they have to make decisions for you.

Knowing what matters most to you can help decrease stress and guilt about the decisions that need to be made.

My Life My Choices provides tools to help South Carolinians understand that making future health care decisions is more than deciding what care they would or would not want. It starts with **thinking** about what matters most to you, **talking** about it with loved ones and **writing** those choices down in an advance directive that is shared with family, friends, and health care providers.

taking the first step

THINK ABOUT IT



The first step to advance care planning is thinking about what matters most to you. That begins with considering your values, goals and wishes. Your personal, spiritual or religious beliefs may also shape what matters most to you.

Start by considering:

- **What do you consider a good day?**
 - Is it making more good memories, being alone to think or read a book, or having time to make peace with God? Perhaps it is important to you to repair a family relationship. You may consider a good day simply indulging in daily pleasures such as ice cream or favorite foods.

- **What concerns you most if you were faced with a serious illness, permanent disability or death?**
 - Is it being in pain, losing the ability to think or communicate, creating a financial burden on loved ones or being removed from life support too soon?

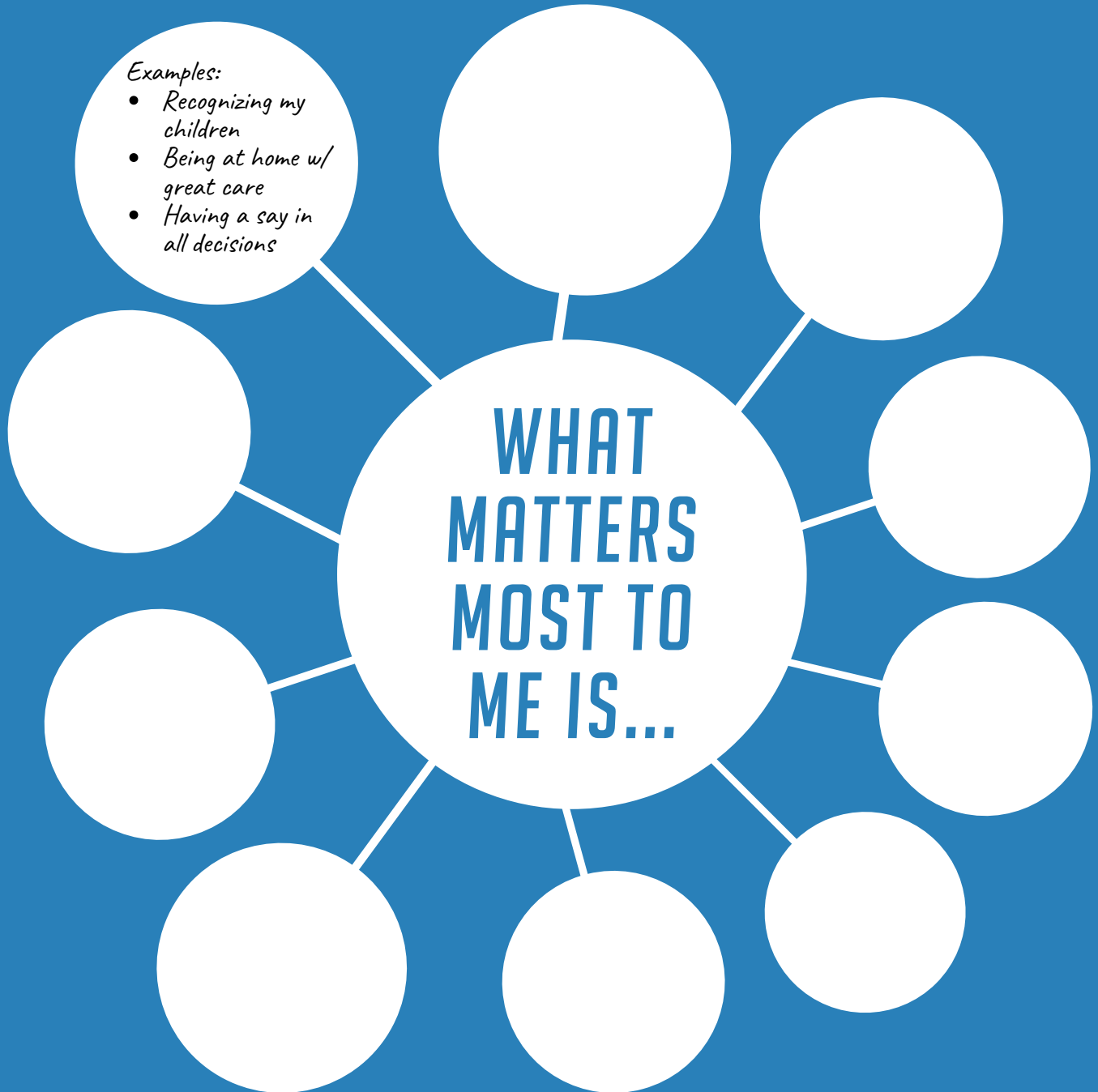
- **What do you consider to be a good death?**
 - Where would you prefer to die? Do you want others with you at your death, or would you rather be alone? What would you like to have happen in the time (days or weeks) before your death?
 - Some people like to make a list of things they want to do or see before they die.

Remember this process is very personal. There are no right or wrong answers.

YOUR ACP BUBBLE MAP

Use this bubble map to prepare for your talk by filling in some answers to this question:

What matters most?



Download a copy to complete & share at MyLifeMyChoices.org



TALK ABOUT IT

Now that you have thought about it, it is time to talk about it. Talk to your loved ones about what matters most to you should you become seriously ill. What health care choices would you want made for you should you not be able to speak for yourself?

It can be hard to start a conversation with friends and/or family about health problems or death. It makes some people uncomfortable. Some may worry that talking about death might make it happen.

It is not always easy to start the conversation, so use an approach that makes you comfortable.

CONVERSATION STARTERS

A USEFUL TOOL TO GET TALKING

Having an open and honest dialogue with loved ones about the end of life is critical, but isn't the easiest thing to do. We've come up with a few conversation starters you can use to begin the talk.

These examples are a useful tool if you need a little boost to begin the dialogue about your health care choices. Check them out on the next page.

CONVERSATION STARTERS

01 REFER TO A PAST TRAGIC EVENT OR SUDDEN ILLNESS

“Remember the (car wreck, sports injury, drug overdose of an adult in your community)? It came out of nowhere! Their family had no idea what type of treatment he/she wanted, and there are still hard feelings among family members.”

02 BRING UP A SPECIFIC SHARED MEMORY

“Remember how hard it was for Dad when Grandma had her stroke? He and your uncles argued over everything. I don’t want you to go through that if something happens to me. So here’s what I want if something happens to me.”

03 REFERENCE SOMETHING YOU RECENTLY READ

“I just read about South Carolina Health Care Decisions Month. It’s in April and encourages you to express your future health care wishes to others. It made me think about what I would want, and you’re someone I feel comfortable talking to.”

04 MENTION A MOVIE EVERYONE’S SEEN

“Did you see (movie name)? It made me start thinking about what I would want if I get that sick. Can we talk about it a little?”

05 DISCUSS THE DEATH OF A CELEBRITY

“Can you believe Kobe Bryant died at 41? And so unexpectedly. It’s hard to imagine the difficult decisions his family had to make, all while going through tremendous grief. What would you want if you were badly injured?”





IT'S NEVER TOO
SOON TO PLAN
FOR YOUR
FUTURE HEALTH
CARE CHOICES.

WHEN THOSE YOU LOVE DON'T WANT TO TALK:

How to Overcome Resistance

These types of talks can be emotional and difficult. Some people may try to avoid the conversation altogether, and you may need to find a way to show how important this is to you.

The following are two ways to deal with resistance:

RESISTANCE *"I don't want to talk about it now. Let's do it later."*

RESPONSE *"It may be too late later. I want you to know my wishes today, in case you have to make decisions for me tomorrow."*

RESISTANCE *"You're not sick or dying. Why do we need to talk about this now?"*

RESPONSE *"I am healthy now. That can change any minute, leaving me unable to make decisions for myself."*

Remember, this is an ongoing process and doesn't have to be finished in one talk. You have been thinking about this for some time; your loved ones may need time to catch up. It can take a few conversations for everyone to truly understand your goals, beliefs, and wishes. The important thing is to *start* talking.

TALKING WITH YOUR DOCTOR

Once you have talked with your loved ones, it is important to have a good talk with your doctor(s) and other health care providers.

He or she can explain what health care choices make the most sense based on what matters most to you.

You can talk about any health problems

you have now, or possible problems you are worried about facing in the future.

Do not be afraid to ask questions or to tell your doctor you want to talk openly about the kinds of treatment options that you want if you become ill.

Below are some questions you can ask your doctor or medical team.

“Nothing haunts us like the things we don't say.”

Mitch Albom, Have A Little Faith: A True Story



3 QUESTIONS TO ASK YOUR DOCTOR ABOUT ADVANCE CARE PLANNING

- 01** Given my health problems and family history, am I at risk for any serious health problems that would affect my quality of life?
- 02** *[If you already have a serious illness]* What usually happens with an illness like mine and what are my options for treatment? What can I expect?
- 03** What if you are not the doctor who is on call when I need care; how will other doctors know about my wishes?

IMPORTANT!

If you've been told you have a specific illness or problem, or if your health is worsening, be honest about what is important to you. Speak out loud about any fears that you have.

FUTURE HEALTH CARE DECISIONS

CONSIDER POSSIBLE CHOICES YOU MAY FACE

There are many decisions that may need to be made if you become seriously ill or injured. A decision may be needed as to whether to place you on a breathing machine to breathe for you. Would you want a feeding tube placed? Are there certain conditions that would lead you to choose comfort care instead of treatments to keep you alive longer?

Your health care agent (Health Care Power of Attorney) should understand your feelings about possible treatments. They should know what treatments you would want; what would be acceptable or unacceptable to you.

Each one of these decisions may be seen in a different light based on your current health status. Think in terms of a sudden accident or illness. If you are healthy with no chronic illness or disease, your choices may be different than if you have been diagnosed with a disease.

Your doctor can help you understand more about these choices and how your core values can impact the decisions you make.

ADVANCE CARE PLAN

These are only used when someone

	SC HEALTH CARE POWER OF ATTORNEY (HCPOA) <i>S.C. Code § 62-5-500, et. Seq.</i>	SC DEATH WITH DIGNITY ACT (LIVING WILL) <i>S.C. Code § 44-77-10, et. seq.</i>
Limited to terminal illness and/or permanent unconsciousness?	No	Yes
Covers a broad range of situations?	Yes	No
Covers what you do and do not want?	Yes	Yes
Requires witness designated by State Ombudsman if in a hospital or nursing care facility?	No	Yes
Witness required?	Yes	Yes
Notary required?	Optional. Not Required	Yes
An actionable medical order?	No. It's an advance directive	No. It's an advance directive
Advantages and Limitations	<ul style="list-style-type: none"> • Most preferred ACP document since it covers most situations and is the most flexible. • If a person has both a Living Will and an HCPOA, the Living Will takes precedence. Any conflicts can cause confusion, so attorneys generally recommend only the HCPOA, not both. • A physician must review, consider clinical condition, and issue medical treatment orders. 	<ul style="list-style-type: none"> • Cannot be executed in a hospital or LTC facility unless witnessed by an Ombudsman, as designated by the State Ombudsman, Office of the Governor. • A physician must review, consider clinical condition, and then issue medical treatment orders.

My Life My Choices is an initiative of the South Carolina Coalition for the Care of the Seriously Ill and is funded by the generous support of the BlueCross BlueShield of South Carolina Foundation.

NING CROSSWALK

is unable to speak for themselves.

<p>EMS DNR ORDER</p> <p><i>S.C. Code § 44-78-10, et. seq.</i></p>	<p>PHYSICIAN ORDERS FOR SCOPE OF TREATMENT (POST)</p> <p><i>S.C. Code § 44-80-10, et. seq.</i></p>	<p>ADULT HEALTH CARE CONSENT ACT (TAKES EFFECT IF NO ACP)</p> <p><i>S.C. Code § 44-66-10, et. seq.</i></p>
Limited to terminal conditions.	No	No
No. Applies only to EMS	Yes	Yes
No. Applies only to EMS	Yes	No
No	No	No
No	No	No
No	No	No
Yes. Physician must sign	Yes. Physician must sign	No
<ul style="list-style-type: none"> • This is a physician's order for EMS to implement. • Applies only when a patient is experiencing cardiac arrest while under the direct care of EMS personnel. • Very limited. 	<ul style="list-style-type: none"> • Very flexible, actionable medical order. Hospitals should have a process in place if the signing physician is not on staff. • Intended for patients with serious illnesses for whom their health care professionals would not be surprised if they died within a year. • Also signed by patient, giving health care workers actual knowledge of patient's wishes. 	<ul style="list-style-type: none"> • Priority of proxy decision maker is set by this statute and may be unclear. • Physician should locate proxy, discuss, consider clinical condition, and then issue orders. The physician can issue medical orders if no proxy is available. • In SC, individuals can use Five Wishes® documents to express ACP wishes, if notarized and witnessed.

For more information, please visit www.mylifemychoices.org or email info@mylifemychoices.org.
Revised April 2020.

“I HAVE AN ADVANCE DIRECTIVE, NOT BECAUSE I HAVE A SERIOUS ILLNESS, BUT BECAUSE I HAVE A FAMILY.”

- Ira Byock, MD



WRITE IT DOWN

Advance directives are written plans that let health care providers know what medical treatments you want or don't want in the event that you could not speak for yourself.

Two of the advance directives accepted in South Carolina are the South Carolina Health Care Power of Attorney and the South Carolina Living Will (also known as Declaration of a Desire for a Natural Death).

The Health Care Power of Attorney covers a wide range of issues regarding treatments you do or do not want. Health care lawyers typically recommend the Health Care Power of Attorney since it is the more flexible and covers most situations. It does not have the restrictions of the Living Will.

Your health care agent can speak for you on any health care issue if you are unable to speak for yourself, unless you limit their power.

The Health Care Power of Attorney requires two witnesses. In South Carolina, a notary public signature is *optional*. The instructions that come with the form outline who cannot be named as your agent or be a witness for the signing of a Health Care Power of Attorney form.

There are certain restrictions that apply to a Living Will. It is limited to your treatment choices when faced with a terminal illness or permanent unconsciousness. This form requires a notary signature. A Living Will is a good choice, however, if you have no one to act as your health care agent.

Use our ACP Crosswalk on page 12 to choose the advance directive that's best for you.

Visit MyLifeMyChoices.org for more information on advance directives.

(Please check laws in North Carolina or Georgia if you receive health care from either of these states.)

CHOOSING A HEALTH CARE AGENT

WHO WILL SPEAK FOR YOU WHEN YOU
CANNOT SPEAK FOR YOURSELF?

Choosing who will speak for you if you cannot make medical decisions is one of the most important steps in advance care planning. This person is known as a health care agent or legal representative. **You** name your health care agent by completing a Health Care Power of Attorney form.

Your health care agent will be able to make medical decisions for you if you are unable to speak for yourself. The decisions made by your agent should be based on the decisions you discuss—what you would decide for yourself if you could do so.

The Health Care Power of Attorney form states the responsibilities of a health care agent. You can set limits on the powers of your agent on the form when it is signed. **It is important to remember that as long as you can do so, you will make your own health care decisions.** Your health care agent only speaks for you when you cannot.

A good health care agent is someone that you trust, who knows you and what matters most to you. Your agent must be willing and able to serve, usually living close by.

Your health care agent will need to be a strong advocate for you and your wishes if conflict arises between family members and/or the health care team. It is a good idea to name at least one alternate as a health care agent in case your first choice is unavailable at the needed time.

Things to keep in mind when selecting your health care agent:

- ✓ **Who is willing to speak on my behalf?**
- ✓ **Who can honor my wishes?**
- ✓ **Who knows what is important to me?**
- ✓ **Who can handle conflicting opinions between family members, friends or health care providers?**



SHARING YOUR WISHES

You have made your choices, named a health care agent and completed an advance directive. Now it is important for you to share your decisions and documentation with those who are important to you. Do the people who matter know what matters to you?

Keep the original in an easily-accessed spot, maybe on the side of your refrigerator. Do not put it in a safe or safe deposit box or it may make be difficult to get to when needed in an emergency. Give a copy to your health care agent and alternate. Also give one to your doctor(s) and ask that it be put in your medical record.

Another good idea is to keep a copy in the glove compartment of all family vehicles. No matter who gets sick or which car is driven to the hospital, the advance directive is available.

MAKING CHANGES

You should review your advance directive at least once per year or any time that you have a big change in your health status.

You should also review your advance directive if you get married, get a divorce or if your spouse dies. You can also change it at any time your goals or wishes change.

An advance directive may be canceled simply by stating that you wish to cancel it, tearing it up or writing “revoked” across it.

If you change or cancel your advance directive, be sure to tell your health care agent, doctor(s) and loved ones so that they are aware. Complete your new advance directive and give copies to those who need to know your new decisions.



SUMMARY

Advance Care Planning (ACP) is for anyone 18 years or older, including those in perfect health as well as those with a diagnosed illness.

Remember it is never too early... until it's too late.

IT'S BEST TO COMPLETE A WRITTEN ADVANCE DIRECTIVE, BUT THE IMPORTANT PART IS TALKING WITH YOUR LOVED ONES ABOUT WHAT MATTERS MOST.

THE ACP 3

- **Think** about what matters most to you if you become seriously ill.
- **Talk** with others about your care choices and what matters most.
- **Write** those choices down in an advance directive.

CONTACT US

for more information

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www.mylifemychoices.org





ACKNOWLEDGEMENTS

For local information on advance care planning, please contact us at:

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**South Carolina
FOUNDATION**

The BlueCross BlueShield of South Carolina Foundation is an independent licensee of the Blue Cross and Blue Shield Association.



**SC COALITION
FOR THE CARE
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