

THE SUN CHRONICLE

Attleboro-North Attleboro, Mass.

SUNDAY, AUGUST 11, 2013

\$2.50 newsstand

Exit strategy



The Conversation Project helps health care professionals, patients talk end-of-life planning

BY LAURA CALVERLEY
FOR THE SUN CHRONICLE

While doctors and nurses deal with life and death every day, their main focus is on caring for patients and helping them stay healthy.

They aren't expected to talk about death until the necessity arises.

However, health care professionals across the country are hoping to start a new trend by en-

couraging patients to talk about their values and wishes for end-of-life care, even if the patient is young and healthy.

"Those conversations aren't easy, but they are more expected when someone is clearly in decline. Now, we're trying to do it a lot more — talking to healthy people about whether they have a health proxy or a will," said Dr. Jean Siddall-Bensson, a board certified internal medicine physician at Sturdy Memorial Hospital in Attleboro.

Doctors at Sturdy are sharing information and materials from The Conversation Project, a national group founded in 2010 that works with hospitals, communities and individuals to help people talk about their wishes for end-of-life care in an attempt to normalize these discussions.

Siddall-Bensson participated in a panel at the hospital last month discussing how to have end-of-life conversations. She tells patients that the

SEE PLAN, PAGE E4 ►

PLAN: Young and old encouraged to address end-of-life care

FROM PAGE E1

time to talk about these things is when they are healthy and well.

The doctor-patient relationship is more of a partnership, she says, and it is about providing compassionate, patient-centered care that is focused on the best outcome that the patient can have.

"We need to involve patients in their own care and we need to ask them what their core values are and what they want. The Conversation Project helps patients identify their goals and communicate them to me and more importantly, to their family," said Siddall-Bensson.

According to The Conversation Project's website, 56 percent of people have not communicated their end-of-life wishes.

Martha Hayward of the Institute for Healthcare Improvement (IHI) in Cambridge, which works with The Conversation Project, says that everyone wants to have the conversation, but they don't know how to start.

"An adult child has fear of bringing up the subject with parents because they don't want to upset their parents and parents feel they're going to upset their kids," said Hayward, IHI's lead for public and patient engagement.

The Conversation Project offers information and a starter kit on its website to get people thinking and talking about the issue.

Hayward says it can be very stressful when a family member is dying, but knowing the person's wishes ahead of time reduces the stress and uncertainty.

"People who have these conversations have less stress and more peace. That's the number one word that's used when we ask people what they want at the end of their lives, it's peace. And it's not just for themselves, it's for their families," Hayward said.

The first step, says Hayward, is for individuals to address the question themselves. The Conversation Project's starter kit offers a series of questions of self awareness that helps people get started.

"It's a way of identifying for yourself where you stand on the subject," Hayward said.

The Conversation Project does not provide legal advice, but Robert Deschene, a lawyer who has been practicing estate planning and elder law in North Attleboro for 23 years, knows first hand what can happen when people have not prepared legally for end-of-life care.

"I have clients who come in and have children who've gone off to college and something happens while they're at college and they find out they can't make healthcare decisions for the child, and the hospital or col-



PHOTOS BY MARTIN GAVIN / THE SUN CHRONICLE

ABOVE: From left, Dr. Steven Bensson, Karen Messier and Martha Hayward participate in a panel discussion at Sturdy Memorial Hospital. **BELOW:** Hayward, from the Institute for Healthcare Improvement, speaks before the group.



lege can't release medical information to the parent," Deschene said.

If the child is an adult, the hospital does not have to give the parent information, says Deschene.

Deschene says there are a lot of people who don't have any plans in place.

"A lot of us think we don't need these documents unless we're old, but anybody can be in a car accident," said Deschene.

According to Deschene, there are three legal documents that everybody should have in place: a healthcare power of attorney — known as a health proxy in Massachusetts, a living will and a Health Insurance Portability and Accountability Act (HIPAA) authorization.

"A lot of people don't have these in place even though they have a will. They have planned

for their death, but haven't planned for the situation if they become seriously ill and can't make decisions for themselves," Deschene said.

With a health care proxy, a person chooses someone to be their health care agent, to make medical decisions if he or she can't. The agent does not have the authority to make decisions unless the person is unable to so. An alternate can also be named.

"I think the reason a lot of people don't do it is they assume that they're covered," Deschene said. "I find a lot of people assume their spouse will be able to make medical decisions but they don't realize that legally a spouse can't make those decisions unless you name them as your health care agent."

Most hospitals ask patients to sign a health proxy, but it is usually only good for the hospital

stay, according to Deschene.

Sturdy also asks office patients to designate a health proxy and keeps the forms on file, Siddall-Bensson said.

A living will specifies the end-of-life procedures that a person does or doesn't want. For example, use of a respirator or artificial nutrition should the individual be involved in a severe accident or other incapacitating injury.

Siddall-Bensson says that in a modern, technologically advanced medical system, there are many treatments and procedures available.

"The question is which are in line with a patient's values and what they want?" said Siddall-Bensson.

Finally, a HIPAA authorization is a release form that states who can get medical information from a doctor and hospital about a person's condition. If you are listed on the HIPAA authorization, the doctor can talk to you about the patient.

Deschene says that a health proxy, living will and HIPAA authorization are relatively simple legal documents and they're not expensive.

But, first you have to have the conversation — with yourself and your family.

In addition to having the conversations in the doctors' office, The Conversation Project encourages talking about it at home, at the dinner table and during family rituals, such as birthdays, holidays and funerals.

"There's so much tragedy around death. All we want is for people to have a good and peaceful death. Everyone deserves one," Hayward said.

"It's a gift to your family. The families that have talked about this are really at peace," Siddall-Bensson said.