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|  SOCIAL SERVICES DATA BASE GUIDELINES  | NO. 110 |
| ADVANCE DIRECTIVESFACILITY POLICYADVANCE DIRECTIVES FOR HEALTHCAREPURPOSE:The purpose of this policy is to ensure that residents and/or families are informed of their right to make decisions regarding their treatment, and that the residents’ choices regarding treatment are respected, even at the point they are unable to communicate their treatment preferences. This policy is developed in compliance with the federal Patient Self-Determination Act of 1990.OVERVIEW:The following Statement of Policy, addressed to residents and families, reflects the overall policy of this facility regarding advance directives, and will be given to every new admission to the facility:STATEMENT OF FACILITY POLICY TO OUR RESIDENTS AND FAMILIES:ADVANCE DIRECTIVES AND LIFE-SUSTAINING TREATMENTUnder state and federal law, you have the right to make your own decisions regarding healthcare treatment. This includes your right to determine in advance what life-sustaining treatment you should be provided if, in the future, you might be unable to communicate those desires yourself.Life-sustaining treatments are the measures we take to sustain your life and health. For example, in the event you suffer a heart attack, we will perform cardiopulmonary resuscitation (CPR) in an attempt to get your heart started again. Further, we will take other measures ordered by your physician, Including IV's, tubes, and the administration of medications, antibiotics, and artificial hydration and nutrition In order to maintain your life. In the hospital you could have surgical procedures, a respirator, a ventilator, a dialysis machine, and blood transfusions in order to keep your vital functions working. This is called life-sustaining treatment.You have a right to provide written instructions to your physician and your family about your desires for treatment in the future, including life-sustaining treatment. Medical science and technology have advanced to the point that with some incurable or irreversible situations where death is expected, these life-sustaining procedures prolong the dying process rather than contribute to recovery. If you desire to limit these life-sustaining treatment procedures in those situations, you should inform your doctor in writing. These instructions are called "Advance Directives." State law has established standard Advance Directive forms, called 'Living Wills" or "Healthcare Powers of Attorney" in order to communicate your instructions. These forms are available at this facility, should you desire to obtain one.It is the policy of this facility to follow your physician's orders made in accordance with state law regarding advance directives limiting life-sustaining treatment. If there are limitations on implementing advance directives at this facility, they will be stated at the end of this informational statement. You are not required by this facility to have an advance directive, nor are you discouraged by this facility from having an advance directive. Quality healthcare is provided to you here whether or not you have developed a written advance directive regarding your treatment. |
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| If you do have a signed advance directive (either a Living Will or a Healthcare Power of Attorney) you should provide a copy of this document to your physician and to this facility. We cannot follow an advance directive until we have received a copy and it becomes part of your medical record. If, in the future, you wish to change an advance directive which you have provided the facility, you should make your wishes known to a facility staff member and your physician.If you do not have an advance directive, treatment consistent with your plan of care will be provided in accordance with accepted professional practice and with state and federal public health law. If we do not have any advance instructions from you, in the event of a heart attack, we will perform cardiopulmonary resuscitation (CPR) to start your heart again, and follow other life-sustaining treatment your physician may order. If you have not given us advance instructions regarding life sustaining treatment, and have a terminal condition and cannot communicate your wishes at that time, under the Illinois Health Care Surrogate Act, it is possible that someone who knows you well will be asked by your physician to make life-sustaining treatment decisions on your behalf. This healthcare facility provides you and other residents with information regarding advance directives, as we are required to do by federal and state law. After reading the written material, if you have questions or would desire to discuss the matter further with someone, you may contact our administrator who will be pleased to assist you and your family in obtaining additional information regarding making your own treatment decisions.This, facility honors Advance Directives limiting life-sustaining treatment, except in the following circumstances:If this facility is presented with an advance directive which, under the Illinois Right of Conscience Act, we cannot implement, our administrator will inform you of this.PROCEDURES:1. ADMISSIONS:1. Responsibility. The facility admissions representative will assist the resident or family in completing Form AD-1. Form AD-1 requires the resident or family to indicate whether or not the resident has an advance directive, and to indicate that the resident or family has received information regarding the night to make decisions about medical treatment and the right to formulate advance directives.2. Existing Advance Directive. If the resident and/or family indicates that there is an advance directive signed by the resident, the admissions representative should request a copy of that advance directive. The admissions representative should inform the family that the facility cannot implement an advance directive until the facility receives a written copy of the advanced directive. The admissions representative shall be responsible for ensuring that the resident’s physician and the nursing director (or a person the nursing director designates) each receives a copy of the advance directive. The nursing director is responsible for ensuring that the advance directive becomes part of the medical record.3. Information. Whether or not there is an existing advance directive, newly admitted residents (or their families, guardians, or representatives, if the residents are not competent), will be given written information concerning the resident's dghts under state and federal law to make decisions about medical treatment, including the night to refuse or accept medical treatment and the night to formulate advance directives. At a minimum, the following information shall be provided: |
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| • The Statement of Illinois Law on Advance Directives, prepared by the Illinois Department ofPublic Health; and• The Statement to Facility Policy--to Our Residents and Families: Advance Directives and Life-Sustaining Treatment,4. Referral. If the resident or family has further questions or desires to discuss the matter, the admissions representative will refer the resident or family to an appropriate staff representative. The admissions person will contact the designated staff person with the name of the resident or family who wishes to discuss advance directives further. This staff representative will have available the forms and instructions for Wills and Illinois State Form for Durable Power of Attorney for Healthcare, as provided by the Illinois Department on Aging, and will provide these forms to the resident or family, if requested. The staff representative should neither encourage nor discourage the execution of an advance directive. If a resident requests assistance in filling out an advance directive, the facility staff representative should recommend assistance by family members or clergy or a physician. Whatever assistance is provider by others in discussing or filling out an advance directive, no one but .the individual declarant can sign a Living Wig or Healthcare Power of Attorney. No facility staff member should assist the resident in filling out an advance directive. |
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