Senate Bill 193: Amends Advance Directive Law

Written Testimony for Senate Committee on Judiciary - April 7, 2015

Speaking in Favor:

As a Certified Advance Care Planning Facilitator, my work is to go out into the community here in Oregon, helping individuals and families plan for the last chapter of their lives by discerning and expressing their wishes for end-of-life health care. As I go about this work, it has become increasingly apparent to me that most Oregonians are having significant difficulty completing the Oregon Advance Directive – it is a long and complicated document with questions that are confusingly obscure.

Oregon has long been at the forefront of advancing appropriate care at the end of life, both with this Advance Directive and later with the POLST. Now, with the passage of time, our Advance Directive has become outmoded and it is time to go back to work to create new alternatives that more easily allow people to express their values and wishes about the medical care they receive – or choose not to receive – as they near death.

We must create a document that is more user-friendly and relevant – one that allows people the ability to fill it out intuitively, without need for the lengthy explanations/instruction that is required for the current document. This became apparent to me when I began presenting workshops in Washington, where I am able to refer people to an Advance Directive called *Five Wishes* (legal in 42 states, but not Oregon) or a simple alternative form approved by Washington. Both of these options are straight-forward and easy to understand by almost everyone, requiring nothing more than a few minutes of explanation. Returning to Oregon, though, I'm faced with the need to spend at least an hour trying to teach groups our own Advance Directive, and even still, those who want to complete their forms will come back to me uncertain as to how to do so: "What I'm I supposed to put here?" "What does this part mean?" "I don't understand this question." "What do they want me to write on these lines?" Many who have received guidance from their attorney in the past remain confused, as attorneys often don't understand the ramifications of the questions being asked on the form, either.

The United States is undergoing a societal change as people are increasingly becoming more willing to think and talk about dying, death, and how they want to leave this life. Here in Oregon, those of us who work in this field are excited to find more and more openness to this topic. Yet as we move to assist people with documenting their end-of-life wishes, we find that they are often stymied by a long, complex document that frustrates them to the point that they just give up, often not completing it. Then, when they come to the end of their lives, their wishes remain undocumented and often unknown by healthcare professionals and loved ones. The medical care that they end up

receiving may well not be at all what they wanted, and their family is often stressed and heartbroken as they struggle to make decisions without written wishes.

The Oregon Advance Directive, once an important new concept in end-of-life documentation, has become a dinosaur in dire need of an overhaul. Allowing the document itself to be removed from statute so that knowledgeable professionals in the field can create something better is clearly the way to allow Oregon to regain in a leadership role in this area. Those of us who work in healthcare see the need for this change all the time – the longer we wait, the more we fall behind the rest of the country in our quest to increase the percentage of people who have documented end-of-life wishes and the more difficult deaths people will suffer.

I ask that you continue to move this bill toward approval in a timely manner.

Thank you very much for your consideration.

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