

Advance directives are gifts to loved ones, health care professionals say

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Conversations about death and dying may not rank high on the list of preferred topics when families gather for the holidays. But advance directives concerning end-of-life care may be the most precious gifts imaginable for loved ones, some Baptist hospital administrators and chaplains insist.



Joe Perez “Letting family and friends know our wishes for this difficult part of the human journey is a tremendous gift to them,” said Joe Perez, vice president for mission and ministry at Valley Baptist Health System.

When a patient faces a terminal illness or irreversible medical condition, the disease or injury victimizes both the patient and the people he or she loves, Perez said.

“But if we don’t make our wishes known in advance and prepare our family

for the decision-making associated with that situation, they become victims twice—to the tragedy and to the process,” he said.

Instead of leaving behind victims, Christians can provide advance directives that empower family members to become “informed champions to uphold the wishes” of someone they love.

Important documents

Advance directives include two vital documents, Perez noted.

One grants medical power of attorney—the legal authority for a surrogate to make health-care decisions for someone who is incapacitated.

The other is a directive to physicians and family or surrogates, sometimes called a living will. This document allows an individual to make his or her wishes known about end-of-life medical treatments before a crisis occurs.

Issues include when or how long a person would want to be placed on mechanical ventilation or tube feeding, if and when a person wants to be resuscitated, and how aggressively physicians should seek to extend life through artificial support.

More is not always best

During a panel discussion at a workshop during the Baptist General Convention of Texas annual meeting, three hospital administrators—Joel Allison from Baylor Scott & White Health, Tim Lancaster from Hendrick Health System and Glenn Robinson from Baylor Scott & White-Hillcrest—emphasized the importance of advance directives and end-of-life planning.



Hospital administrators (left to right)

Tim Lancaster from Hendrick Health System, Joel Allison from Baylor Scott & White Health and Glenn Robinson from Baylor Scott & White-Hillcrest participate in a panel discussion on health care during a workshop at the Baptist General Convention of Texas annual meeting in Waco. (Photo/BGCT Newsroom) “One of the greatest gifts we can give to our children is not putting them in the place of having to make the decisions,” Lancaster said.

Robinson noted 60 percent of an average American’s lifetime expenditures on health care occur in the last six months of life.

“We need to teach Americans how to die differently,” he said. “Giving more health care is not always best.”

Allison offered praise both for the spiritual care chaplains in his system provide and for the palliative care physicians offer, not only at the end of life, but also as a part of chronic disease management.

Understand what is available

As families discuss end-of-life issues, they need to understand what is available, the administrators noted.

Palliative care—sometimes called “comfort care”—is specialized medical attention focused on relief from the symptoms and stress of serious illness. It is designed to improve patients’ quality of life, the administrators explained.

They distinguished between palliative care and hospice care, noting palliative care is one dimension of hospice care but is not limited to it.

Hospice care typically is reserved for terminally ill patients during the last six months of life, assuming a disease follows its normal course, and normally is offered in a home setting. Palliative care helps keep patients as comfortable as possible through various phases of a life-limiting condition, whether in a home, hospital or nursing facility, and it may extend for years.

Families can benefit from the resources Baptist hospitals offer with regard to end-of-life planning—particularly the pastoral care or chaplaincy staff, the administrators noted.

David Cross, director of chaplaincy services for Baptist Hospitals of Southeast Texas, who attended the panel discussion, noted most chaplaincy programs offer advance directive workshops for the communities their hospitals serve. Chaplains also typically are willing and eager to talk to churches about how families can prepare, he added.

Bring the conversation to church

While churches offer messages of hope about everlasting life, too often they shy away from discussions about the dying process, Perez noted.

“We don’t talk about death and dying much. We hope for a miracle, and if that doesn’t happen, we just say it was God’s will,” he said.

Consequently, Christians often are least prepared to take advantage of end-of-life services and most inclined to seek aggressive treatment at that stage, he noted, pointing to a [published study](#) of patients with advanced cancer.

However, spiritual care and end-of-life discussions by the medical team and pastoral care providers can reduce aggressive treatment and increase use

of hospice care, the study showed.

The study underscores the importance of chaplains—as well as health-care providers who work in an environment that encourages them to offer holistic care, Perez observed. During the summer, chaplains at Valley Baptist Medical Center-Harlingen led an educational campaign involving more than 900 employees, from physicians to food-service staff, about advance directives and related issues.

But the study also points to the need for more end-of-life education in churches, Perez noted. Congregations can do more to facilitate end-of-life discussions and create an environment that values advance planning, he said.

See what the Scriptures say

A Bible study or sermon could focus on what he called “the first advance directive”—the story of Barzillai of Gilead in 2 Samuel 19:31-39, who received the king’s blessing for making his end-of-life wishes known.

He also pointed to another Old Testament passage, Isaiah 38:1, when the prophet commands an ailing King Hezekiah, “Set your house in order, for you shall die.”

Christians can learn best from the example of Jesus—not only in terms of how he dealt with the awareness of his approaching death, but also in how he talked about it with his closest followers, Perez observed.

“Jesus prepared his disciples for his own death,” he said. “What are we doing to prepare the people we love for that aspect of life? ... Have the conversation.”