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1	CONCURRENT RESOLUTION ENCOURAGING ADVANCE
2	HEALTH CARE DIRECTIVES
3	2012 GENERAL SESSION
4	STATE OF UTAH
5	Chief Sponsor: Patricia W. Jones
6	House Sponsor: Ken Ivory
7	TO AND THE PROPERTY OF
8	LONG TITLE
9	General Description:
10	This concurrent resolution of the Legislature and the Governor urges each adult citizen
11	of the state of Utah to strongly consider preparing an advance health care directive.
12	Highlighted Provisions:
13	This resolution:
14	<ul> <li>urges adult citizens of the state of Utah to strongly consider preparing an advance</li> </ul>
15	health care directive that expresses their preferences about health care decisions
16	under particular circumstances and that helps ensure that their health care wishes
17	will be honored at a time when they cannot make or communicate health care
18	decisions.
19	Special Clauses:
20	None
21	
22	Be it resolved by the Legislature of the state of Utah, the Governor concurring therein:
23	WHEREAS, medical technology can extend the time it takes for death to occur by days,
24	weeks, months, or years;
25	WHEREAS, because medical technology often cannot assure that persons who are kept
26	alive will have the ability to make and communicate their own health care decisions, a large
27	majority of people will have some decisions, and often end-of-life decisions, made by another
28	person on their behalf;
29	WHEREAS, an advance health care directive is a voluntarily executed written

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30	document or a witnessed oral statement that may designate an agent to make health care
31	decisions for an adult when the adult cannot make or communicate health care decisions, or
32	expresses the adult's preferences about health care decisions under particular circumstances;
33	WHEREAS, the Utah Advance Health Care Directive form offers a simple way for
34	persons to inform their family, friends, and physicians regarding who should serve as a
35	surrogate decision-maker and of their end-of-life care treatment preferences;
36	WHEREAS, advance health care planning begins when a person thoughtfully considers
37	a time when the person may not be able to make health care decisions for himself or herself;
38	WHEREAS, every adult Utahn should consider choosing another person who can serve
39	as a "health care agent" with the legal authority to make decisions if the person becomes unable
40	to make or communicate health care decisions;
41	WHEREAS, the person should appoint a health care agent who is willing and able to
42	serve and who will respect the person's choices and preferences;
43	WHEREAS, the person should legally appoint the health care agent by completing a
44	Utah Advance Health Care Directive form;
45	WHEREAS, people should communicate with their appointed health care agents
46	through ongoing discussions and communication tools, and by documenting end-of-life care
47	preferences in the Utah Advance Health Care Directive form;
48	WHEREAS, appointed agents, families, and health care providers cannot honor a
49	person's end-of-life wishes if the person has never thought about or stated those wishes;
50	WHEREAS, persons should consider preferences for care if they are rendered
51	permanently unable to make or communicate health care decisions through accident or illness;
52	WHEREAS, persons should make an effort to learn whether there are life-sustaining
53	treatments that they are likely to need, given their health, and tell their health care agents how
54	decisions about those interventions should be made;
55	WHEREAS, persons should consider whether there are any specific end-of-life care
56	interventions that they think they would always or never want under any circumstances;
57	WHEREAS, persons should consider whether there are criteria that their health care

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58	agent should use in making end-of-life care decisions, including their goals for care and how
59	they would weigh the benefits or burdens of treatment;
60	WHEREAS, persons should: consider what they would want if they were diagnosed
61	with a serious medical condition or a serious injury; share their thoughts and feelings with
62	family members and loved ones; have a frank conversation with the appointed health care agent
63	and other involved family members so they know the person's wishes; and communicate their
64	wishes to their primary care provider;
65	WHEREAS, individuals who complete an advance health care directive improve the
66	chances that their health care preferences whether asserting the desire for treatment,
67	declining some or all life-sustaining measures, or something in between will be honored;
68	WHEREAS, directions recorded in an advance health care directive can help prevent
69	disagreements among family members and friends when a person loses the ability to make
70	health care decisions;
71	WHEREAS, advance health care directives can help to remove the burden from those
72	who have to make treatment decisions on behalf of others;
73	WHEREAS, decision-makers experience less grief and conflict after the death of the
74	person when the person has made end-of-life care choices clear;
75	WHEREAS, persons who have an advance health care directive have the freedom to
76	change their end-of-life care instructions at any time;
77	WHEREAS, advance health care directives may also save health care costs because
78	unwanted care is not provided;
79	WHEREAS, health care providers should encourage their patients to complete an
80	advance health care directive, and provide support to those who request assistance;
81	WHEREAS, the time for these important health care decisions may never come, but the
82	thinking, sharing, and recording that is done will still be valuable;
83	WHEREAS, advance health care planning can help clarify values and put the minds of
84	both the person and their loved ones at ease; and
85	WHEREAS, having an advance health care directive can help persons and their loved

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ones face the future with more confidence and clarity:

NOW, THEREFORE, BE IT RESOLVED that the Legislature of the state of Utah, the Governor concurring therein, urge Utahns who have no known serious illness to consider what they would want done if they were rendered unable to make or communicate health care decisions.

BE IT FURTHER RESOLVED that the Legislature and the Governor urge Utahns who have serious medical conditions to talk with their doctors or do research to understand what complications they may face and what life-sustaining treatments would likely be offered to address the possible complications.

BE IT FURTHER RESOLVED that the Legislature and the Governor urge Utahns to then take the following steps: (1) meet with family and loved ones to have a discussion about health care and end-of-life care preferences; (2) secure the Utah Advance Health Care Directive Form; (3) fill out the form; (4) keep a copy in a convenient place that can be taken to a hospital or other care facility; (5) provide a copy for the physician and the hospital and request that it be included in their medical record; and (6) at every birthday, when there is a change in health status, or when there is a change in family composition such as the death of a spouse, review their advance health care directive and complete a new form if preferences or circumstances have changed.

BE IT FURTHER RESOLVED that a copy of this resolution be sent to the Utah Healthcare Association, the Utah Association Association, the Utah Association for Home Care, the Utah Hospital Association, the Utah Medical Association, the Utah Association of Physician Assistants, the Utah Nurses Association, the Utah Nurse Practitioner Association, the Utah Geriatrics Society, the Utah Aging Alliance, the Utah Bar Association's Elder Law Section and Estate Planning Section, the Utah Commission on Aging, the Utah Department of Health, the Division of Health Facility Licensing, the Bureau of Emergency Services, the Utah Department of Human Services, the Division of Aging and Adult Services, the Office of Public Guardian, Utah Legal Services, the Utah Disability Law Center, and the Salt Lake Interfaith Roundtable.

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