

Illinois Healthcare POA Form Could Put Donation Desires at Risk

Gift of Hope is encouraging its donor hospitals to revisit the intent of the State of Illinois' healthcare power of attorney (POA) short form to better understand how it can impact donation. Depending on if, when and how the POA is completed, a person may unknowingly put his or her desire to be an organ and tissue donor at risk.

The form in question is the *Statutory Short Form Power of Attorney for Health Care*, a revised version of which was made available by the State of Illinois in July. Many hospitals distribute this generic POA form to offer patients the opportunity to ensure that "advance directives" are in place to govern critical decision-making should they be unable to make healthcare decisions for themselves.

By properly signing, dating and notarizing the POA form, a person—the principal—grants someone else—the agent—broad powers to make healthcare decisions on the principal's behalf should the principal be unable to do so for himself or herself. One decision is whether to make an anatomical gift for transplantation or research.

That's where potential problems can arise, according to Kathy Vasilopoulos, RN, Director of Hospital Development for Gift of Hope. "Hospital staff members must fully understand the impact a POA can have on a person's previous decision to be a donor," she explained. "The POA is a legal document. If it is properly completed after a person has registered as a donor and initialed to shift the decision-making for being a donor to an agent, the POA is the legal document in force. All other legal decisions made before it are rescinded, and the agent is then empowered to make donation decisions on the principal's behalf should the principal become incapacitated. That means a principal's donation decision registered in the Illinois Organ/Tissue Donor Registry becomes moot."

A second potential problem arises if the principal does not authorize the agent to make anatomical gifts—one check-off option on the POA form. "Initialing there does not constitute a decision to not be a donor," Vasilopoulos added. "This selection merely indicates the principal does not grant decision-making power about being a donor to the agent. The opportunity for donation still exists, either through the principal's previous designation in the Illinois Registry or, absent that, through authorization by the person with legal authority to make the decision."

Hospitals must understand the impact a healthcare POA can have on donation.

Hospital staff can take two steps to avoid these problems, Vasilopoulos advised. First, they must have a clear understanding of the POA's intent and the potential ramifications of having a patient sign and initial a POA if he or she is a registered donor. Second, they must explain these ramifications to patients and family members when they distribute these documents to patients.

"Ask if he or she is a registered donor," Vasilopoulos advised. "If so, explain that giving an agent the power to decide whether to make anatomical gifts via the POA could affect their previous decision to be a donor. More than likely, the agent will be on board with the principal's previous decision and will honor it. But the POA grants the agent the legal right to go against an individual's wishes."

Hospitals are encouraged to talk with their Gift of Hope representatives if they have any questions about the POA form and its intent with regard to donation, Vasilopoulos said.

The Illinois POA's Donation Language

The donation-related language in the *Statutory Short Form Power of Attorney for Health Care* appears on page three of the 11-page form. It reads: "Effective upon my death, my agent has the full power to make an anatomical gift for the following:". Below it are three selections with "initial here" lines beside each:

- Any organs, tissues, or eyes suitable for transplantation or used for research or education.
- Specific organs: (with a write-in area beside it)
- I do not grant my agent authority to make any anatomical gifts.

Some hospitals are misinterpreting what powers principals are granting to their agents when they initial the lines. Here are the facts:

- Initialing the first line empowers an agent to decide whether to donate all of the principal's organs and/or tissue. It grants the power to decide; it is not a decision to donate.
- Initialing the second line empowers an agent to decide whether to donate specific organs, and, if so, which ones. Again, it empowers the agent to make this decision. It does not constitute a decision to donate.
- Initialing the third line indicates the agent is not empowered to decide whether to donate the principal's organs and/or tissue. It does not indicate the principal does not want to be a donor. The donation decision remains with the principal, via a previous, legally binding decision (in the Illinois Organ/Tissue Donor Registry, e.g.), or with the person who has legal authority to make that decision.

NorthShore Salutes Gift of Hope Volunteer for Donation Support Work

NorthShore University HealthSystem presented Gift of Hope volunteer Julie Prangl with a *Sharing Spirit Award* in October to recognize her efforts to advance donation as both an employee at NorthShore and a volunteer for Gift of Hope. Prangl is Lead Associate in Rehab Services for NorthShore's Park Center in Glenview, Ill. She also serves on Gift of Hope's Donor Family Advisory Council. Along with the award, NorthShore gave Prangl a \$500 gift, which she donated to Gift of Hope.

Prangl has experienced the joy and heartache of organ and tissue donation. The joy was seeing daughter, Lindsey, free herself from more than two decades of hardship and pain brought on by a congenital foot deformity. An ankle transplant gave her a new life. The heartache was the death of her 17-year-old son, Nick, in a 2007 car accident. But out of that tragedy came something meaningful. Nick was able to donate multiple organs and tissue, and every person who benefited from his generosity is doing well today. "We are extremely grateful for the work that Julie does to support donation in the community and are so pleased to see her



NorthShore University HealthSystem presented Julie Prangl (left) with a Sharing Spirit Award to recognize her efforts to advance donation. With her is Diane Schmitz, Donor Family Services Coordinator for Gift of Hope.

recognized by NorthShore for her commitment to our cause," said Jerry Anderson, President/CEO of Gift of Hope. "We also thank NorthShore for its generous gift to support our efforts to educate the public about donation. Through the dedication of gracious people like Julie and organizations like NorthShore, we bring new hope—and life—to all those who benefit from donation and transplantation."

New Hospital Development Region Created for Northwest Illinois

Gift of Hope has created a new Hospital Development region to enhance its professional connection with donor hospitals in northwest Illinois. The new regional team includes a Donation Specialist and a Donation Coordinator who will work in Rockford and surrounding areas.

"We have had two regional teams in place for well over a year now, so we are taking what we have learned in our new process and spreading those successes to a newly formed region within our service area," said Kathy Vasilopoulos, Director of Hospital Development for Gift of Hope.

The new region encompasses Gift of Hope's donor hospitals in Rockford, Elgin and McHenry County. Allison Wallace is the Donation Coordinator for the region, and Kimberly Gunderson is the Donation Specialist. Regional Manager Barbara Dolan oversees the area's operations. "We are excited to launch this new region and look forward to enhancing our ability to respond most effectively to the hospitals and potential donor families in this area," Dolan said.



Kim Gunderson is the Donation Specialist for Gift of Hope's new region.

Gift of Hope ONLINE

Learn About Adipose Use on GiftofHope.org

Gift of Hope has posted new online resources to help hospital professionals better understand adipose recovery and how the tissue is used to benefit transplant recipients. Adipose—fatty tissue removed from areas such as a donor's abdomen and thighs—promotes healing in patients with hard-to-repair injuries like bone fractures. The tissue is rife with mesenchymal stem cells, which take their signals from surrounding cells to form cartilage, skin, bone and other cell types. AlloSource, Gift of Hope's tissue partner, uses recovered adipose to create a live cell bone graft substitute called AlloStem®. Learn more about adipose and its use in tissue transplants in the Hospital Professionals section of GiftofHope.org.

STATE OF DONATION

| | 11-30-11 | 11-30-10 | %Change |
|-----------------------------|----------|----------|---------|
| National Organ Waiting List | 112,674 | 109,064 | 3.3% |
| Illinois Organ Waiting List | 4,971 | 4,777 | 4.1% |
| Indiana Organ Waiting List | 1,494 | 1,328 | 12.5% |
| Recovered Organ Donors | 266 | 238 | 11.8% |
| Organs Transplanted | 809 | 731 | 10.7% |
| Bone Donors Recovered | 890 | 614 | 45.0% |
| Heart Valves Recovered | 144 | 138 | 4.3% |
| Skin Donors Recovered | 844 | 782 | 7.9% |



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For more information about Gift of Hope and organ and tissue donation, call 630/758-2600 or visit our Web site at GiftofHope.org.

Hospital Connections provides hospital professionals and their affiliated staff with news and information on organ and tissue donation and the critical roles they play in achieving successful donation outcomes. We encourage you to share this newsletter with your associates and learn more about donation by visiting GiftofHope.org.

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