

MY WISHES ADVANCE CARE PLAN



My Wishes Palliative Care Support Line

**If you need urgent health advice or help please
call 01634 792098**

**This service is available 24 hours a day, 7 days a
week**

This care plan is a way to record your plans, wishes, preferences and priorities for your care in the future. This form is to be held by you and is for you to record your thoughts in a way that can be shown to the health and social care professionals you may meet if you become ill and are unable to make your wishes known.

You may wish for a copy of this document to be kept with your health records, your health care professional will be able to arrange this.

Please note this is a record of your wishes – it is a **non-legally** binding document

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Notes:

Additional information: Further information is available to help you complete this document – this can be found on pages 6-8.

Completing this document: If required in a different format, please inform your health or social care professional. If there is not enough space on the form to write all you want, please use an additional sheet of paper to record extra information and secure it to this form. Further copies of this form are available; please ask your health or social care professional.

You may wish for a copy of this document to be kept with your health records, your health care professional will be able to arrange this.

Looking after this record: This form should be kept in a prominent place in your home. If you use the '*Message in a Bottle*' system to alert potential emergency carers to your particular health care needs, please write a note on the form in the bottle as to the location of your Advance Care Plan.

'*Message in a Bottle*' is an initiative run by The Lions Club – it is a simple but effective way to keep essential personal and medical details where they can be found in an emergency – in the fridge! Members of the public may find bottles displayed in local chemists or doctors surgeries. In some communities local Neighbourhood Watch, Age UK or housing associations may have these. If you are unable to find a bottle you can contact your local Lions Club or email mdhq@lions.org.uk

Please tick if you have any of the following:

Lasting Power of Attorney for Health and Welfare	
Do Not Attempt Cardiopulmonary Resuscitation (DNACPR)	
Advance Decision to Refuse Treatment	

Please keep these together with this form so that any health professional providing your care is aware of your wishes

Name:	DoB:	NHS No:
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Advance Care Plan Recording Your Wishes and Care Preferences

	Question	Please give details below:
1.	<p>Do you have any special requests or preferences regarding your future care? For example: a preferred place of care</p>	
2.	<p>If your condition changes and you become unwell, where would you most like to be cared for? For example: your usual place of residence, hospital, a hospice</p>	
3.	<p>Is there anything you would ideally like to avoid happening to you? For example: any treatment you may not wish to receive such as a blood transfusion, or you may not want to be resuscitated</p>	
4.	<p>Do you have any comments or wishes that you would like to share with others? For example: your wish for organ or tissue donation www.organdonation.nhs.uk/ www.nhsbt.nhs.uk/tissuedonation - see page 8, your religious or cultural preferences</p>	

Name:	DoB:	NHS No:
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5.	Who else would you like to be involved if it ever becomes difficult to make decisions?	Preferred contact: Relationship to you: Address & telephone number:
6.	Do you have a Lasting Power of Attorney? This only applies if you lose the ability to make these decisions for yourself and is only valid once it is registered with the Office of the Public Guardian www.publicguardian.gov.uk – see page 7	Yes: _____ No: _____ If yes – please give a copy to your Doctor / health or social care professional and keep a copy with this form. Is this a Personal Welfare Lasting Power of Attorney who can make decisions regarding your health and personal welfare? Yes: _____ No: _____
7.	Have you made an Advance Decision to Refuse Treatment? This is a formal legally binding document which allows a person to refuse certain treatments. To be valid an Advance Decision must be made before you lose the ability to make such decisions. www.nhs.uk/Planners/end-of-life-care/Pages/advance-decision-to-refuse-treatment – see page 7	Yes: _____ No: _____ If yes – please give a copy to your Doctor / healthcare professionals and keep a copy with this form
8.	Do you have a Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) decision form in place? It is normal for patients to plan in case of a cardiopulmonary arrest. A DNACPR does not affect any active treatment. Patients who are DNACPR can continue to receive chemotherapy, antibiotics, dialysis, or any other appropriate treatments. Additional information can be found via the following link: www.nhs.uk/Planners/end-of-life-care/Pages/advance-decision-to-refuse-treatment – see page 7	Yes: _____ No: _____ If yes – please keep a copy with this form

Name:	DoB:	NHS No:
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9.	Please record any discussions and decisions related to use of medical treatments in your condition	
10.	Have you made a will so that your preferences and wishes are known? Do your family members know where this is kept? (www.ageuk.org.uk/money-matters/legal-issues)	Yes: _____ No: _____ Yes: _____ No: _____
11.	Would you like this plan to be added to the My Wishes Register to enable healthcare professionals responsible for your care to know the wishes you have recorded here? (only those healthcare professionals responsible for your care such as your GP, community nurse, the ambulance service, hospice staff will have access to your plan – see page 7 for more information).	Yes: _____ No: _____ If yes – please speak to your GP/health or social care professional
12.	Would you like a copy of this Plan to be kept with your healthcare record? (in order to have your wishes recognised and respected)	Yes: _____ No: _____ If yes – please speak to your GP/health or social care professional

Statement of your Wishes and Care Preferences – please confirm this is a true record of your wishes at this time:

Your Name:

Signature:

Date:

Your health or social care professional will be able to supply further copies if you wish to make any additional changes

Further Information

There are a number of other information sources available which you may find helpful:

- **Age UK** – a range of information including writing a will, lasting power of attorney, advance decision to refuse treatment – website: www.ageuk.org.uk telephone: **0800 6781174**
- **Dying Matters** – Dying Matters was set up in 2009 by the National Council of Palliative Care to promote public awareness of dying, death and bereavement. Their aim is to help people talk more openly about dying, death and bereavement, and to make plans for the end of life. They have a wide range of resources to help people start thinking and talking about dying, death and bereavement – website: www.dyingmatters.org telephone: **0800 0214466**
- **Make it Your Decision** - A National Campaign to urge people to think about and record their wishes. They provide information to support Advance Care Planning – website: www.makeityourdecision.org.uk telephone: **0800 9992434**
- **'Planning For Your Future Care'** is a booklet produced by the Department of Health and the National Council for Palliative Care, which can be downloaded from the end of life care website www.nhs.uk/Planners/end-of-life-care/Documents/Planning-for-your-future-care.pdf . (If you have any problems downloading this booklet, please ask your health or social care professional who will be able to help). There are also local guidance booklets available to support patients and carers. Your health or social care professional will be able to provide a copy of these.

A link to all these websites and other supporting information can be found on the Medway and Swale Clinical Commissioning Group websites:

www.medwayccg.nhs.uk , www.swaleccg.nhs.uk

Glossary of Terms

- **Advance Decision to Refuse Treatment (ADRT):**

An advance decision to refuse treatment (sometimes known as a living will) is a decision you can make now to refuse a specific type of treatment at some time in the future. You can refuse a treatment that could potentially keep you alive (known as life-sustaining treatment). This includes treatments such as ventilation and cardio pulmonary resuscitation (CPR), which may be used if you cannot breathe by yourself or if your heart stops. You may want to discuss this with a doctor or nurse who knows about your medical history before you make up your mind.

More information on this can be found at website: www.nhs.uk/Planners/end-of-life-care/Pages/advance-decision-to-refuse-treatment.aspx

- **Do Not Attempt Cardiopulmonary Resuscitation (DNACPR):**

CPR stands for cardiopulmonary resuscitation. It's an emergency treatment used to restart a person's heart and breathing if they stop (called a cardiopulmonary arrest). The aim is to keep the person alive while a cause of the cardiopulmonary arrest is identified and treated. In many cases CPR isn't successful at restarting a person's heart and breathing. If you have a long-term or chronic condition or a terminal illness then it's much less likely to work. The methods used in CPR can have side effects such as bruising, cracked or broken ribs and/or punctured lungs. You have the right to choose not to have CPR if you wish and can record your wish on a DNACPR form. This form can be issued by your health professional.

More information can be found at website: www.nhs.uk/Planners/end-of-life-care/Pages/advance-decision-to-refuse-treatment.aspx, or www.compassionindying.org.uk/making-decisions-and-planning-your-care/planning-ahead/dnar-forms , telephone: 0800 9992434

- **Lasting Power of Attorney (LPOA):**

A lasting power of attorney is a legal document that lets you appoint one or more people to help you make decisions or to make decisions on your behalf.

This gives you more control over what happens to you if you have an accident or an illness and can't make your own decisions (i.e: you 'lack mental capacity').

More information can be found at website: www.publicguardian.gov.uk, or www.ageuk.org.uk/money-matters/legal-issues/powers-of-attorney, telephone: 0800 6781174

- **My Wishes Register:**

The My Wishes register is a way of ensuring the preferences recorded within this plan are accessible to the health and social care professionals responsible for your care such as your GP, community nurse the ambulance service, hospice staff. It is a secure online register which can be accessed at any hour of the day and night so you can be confident that whoever is looking after you knows the wishes you have recorded in this plan. Your wish for your plan to be recorded on the My Wishes Register can be noted in question 11. Please speak to your health or social care professional who can arrange for this.

For more information go to website: www.medwaycommunityhealthcare.nhs.uk/our-services/palliative-care, telephone: **01634 792098**.

- **My Wishes Palliative Care Support Line:**

The Palliative Care Support Line is available to you 24 hours a day 7 days a week. If you need urgent health advice or help you can call the Support Line and speak to a professional who can provide the help or advice you need – **01634 792098**.

- **Organ Donation**

Organ donation is giving an organ to help someone who needs a transplant. Transplants can save or greatly enhance the lives of other people but this relies on donors and their families agreeing to donate their organ. Joining the register makes it easier for everyone to know your wishes and follow them. When you register, tell your family and friends about your decision.

For more information please see website: www.organdonation.nhs.uk, telephone: **0300 1232323**

- **Tissue Donation**

As with organ donation, tissue donation can greatly enhance the lives of others. Donated tissue such as skin, bones and eyes can save or dramatically improve the lives of many people suffering from illness or injury. To be a donor you simply need to join the organ donation register as above.

More information on tissue donation can be found on the website: www.nhsbt.nhs.uk/tissuedonation

- **Palliative Care:**

End of life care includes palliative care. If you have an illness that can't be cured, palliative care makes you as comfortable as possible, by managing your pain and other distressing symptoms. It also involves psychological, social and spiritual support for you and your family or carers. This is called a holistic approach, because it deals with you as a "whole" person.

More information on palliative care can be found at website: www.ncpc.org.uk , telephone: **020 76971520**

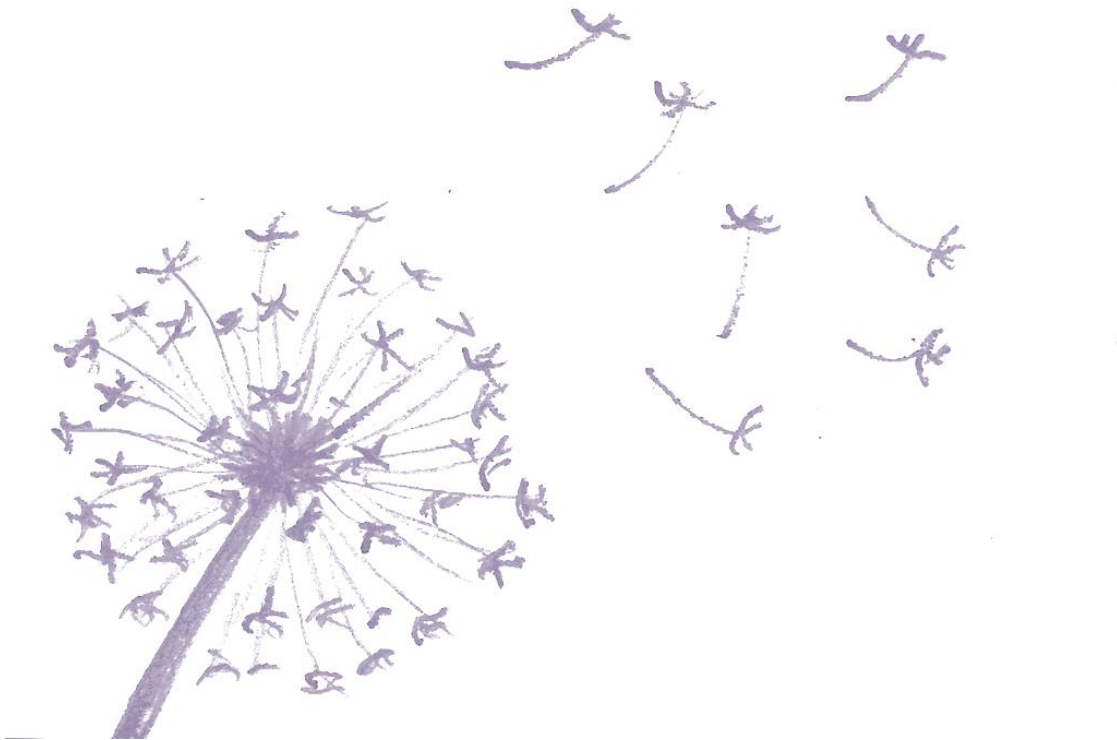
Advance Care Plan Review: It will be important to review this document regularly to ensure it still represents your wishes.

	Note of changes or additions made	Signature:
Date:		
Date:		

Notes:
Please use these next pages for your own notes, for example you may wish to keep a log of who you have spoken to and when:

Notes:

A large empty rectangular box with a thin black border, intended for handwritten notes.



This Advance Care Plan has been developed in partnership with:

