"Planning for your Future Care" Advance Care Planning Tool
Interim Guidance Sheet (January 2011)

Purpose: Mission Statement

The Advance Care Planning (ACP) Tool is held and owned by the individual to support discussions about their end of life decisions and to record what they would like to happen or not want to happen. Whilst the ACP Tool is associated with end of life care anyone can have an ACP Tool even without a prognosis, long term condition or diagnosis – we should all thinking about planning for our future care. ACP enables people to be supported as they would wish, even when they are unable to express their views for themselves. ACP includes planning for a time when we may lack capacity to make decisions using an Advance Decision or Lasting Power of Attorney.

Please note this is not a **Clinical Record** but a booklet held by the individual to record their wishes and preferences about their health and social care as well as end of life decisions. The booklet is designed to guide the individual through the process rather than being led by the professional involved. The aim is that the patient or carer completes the ACP Tool themselves. The ACP Tool must be regularly reviewed to ensure that preferences or decisions are kept up to date as circumstances can change.

Not all the sections needed to be completed or all at one time. Individuals can use it which ever way they feel is right for them. The professional/clinician/paid carer can then use the information to proactively plan care and inform the patient and family of the availability of services and resources to support their preferred place of care and wishes. This will be supported by a Care Plan.

Content of the ACP Tool

The booklet has been divided into 5 sections. Each section also contains signposting for individuals to gain further information and guidance:

1. Statement of your wishes and care preferences
2. Advance Decision making
3. Putting your affairs in order
4. Making a will
5. Funeral Planning

1. Statement of your wishes and Care preferences (Advance Statement)

This section:

- Is based on the National Preferred Priorities for Care Tool and has four opened questions that enables discussions about wishes and preferences
- Provides examples of information which should/could be recorded
- Includes prompt questions to help provide ideas about what might be recorded

2. Advance Decision making

This section:

- Provides a definition of an Advance Decision:
- Is a legal document
- Is about refusing **not** requesting certain treatments
- Only comes into place if capacity is lost, must be 'relevant & applicable'
- Requires a signature
    - Individual
    - Witness

Links to further information on advance decision making are included.

3. Putting your affairs in order

- Describes the two types of Lasting Power of Attorneys (Property & Affairs and Personal Welfare).
- Lists information which should be stored in a safe place with the name of a trusted nominee who can access this.
- Page 15 - is focused on End of Life Care wishes

Links to further information on Lasting Powers of Attorney are included.

4. Making a will

This section:

- Explains the benefits of making a will and guidance on what to include

5. Funeral Planning

This section:

- Provides an example form for recording funeral planning preferences.

Who can use the ACP Tool - Anyone - even individuals without a diagnosis, a long term condition or a poor prognosis can use the ACP Tool. If appropriate, Professionals can support patients and their carers in completing the ACP Tool in parts, or in total, but is not a Clinical Record.

When to use the ACP tool - The ACP Tool should be introduced as early as possible when appropriate to the individual. Identifying cues in conversations or "triggers" can be an opportunity to introduce the idea of ACP e.g. early stages of Dementia. The booklet can be left for the individual and their family to discuss or be introduced as a concept for a later conversation. Every person should be given the opportunity to make an informed choice to whether they would like to discuss planning for their future care (ACP).

If you would like to understand more about advance care planning go to http://www.endoflifecareforadults.nhs.uk/publications/differencesacpadrt - This explains the differences between general care planning and decisions made in advance and other related information.