



Did you know?

- Approximately **50 per cent** of the families we serve do **not** know their loved ones' wishes, but may at some point have to make difficult decisions regarding their loved ones' care.
- When faced with sudden, end-of-life decisions, most people will ask for interventions for their loved ones *that they would not want for themselves* - because most people do not want to feel responsible for making decisions that allow another person's life to end.
- Research indicates that patients who have end-of-life conversations with their doctors and loved ones are more likely to be satisfied with their care and require fewer aggressive interventions at the end of life, placing less strain on loved ones and health-care providers.

Plan *now* for your future health care decisions!

Advance Care Planning

It's about conversations.

It's about decisions.

It's about how we care for each other.

Contact information

For more information about advance care planning:

- Ask your doctor or health-care professional.
- Visit www.advancecareplanning.ca
- Visit our Eastern Health website at www.easternhealth.ca
- Visit the Government NL website at: http://www.swsd.gov.nl.ca/seniors/pdf/ahcd_booklet.pdf

ADVANCE CARE PLANNING

Your Wishes: Our Guide

Plan now for your future health-care decisions!

**INFORMATION FOR YOU, YOUR
SUBSTITUTE DECISION-MAKER,
CAREGIVER, AND FAMILY**



www.easternhealth.ca

WHAT IS ADVANCE CARE PLANNING?

Advance care planning is a process of both reflection and communication; a time to reflect on your values and wishes about the care you may wish to receive at end of life.

It is about quality of life and *being in control* of how you live and die.

It involves:

- getting the information you need to make informed choices about health care treatments and interventions.
- discussing your end-of-life preferences with your loved ones when you are well, so your wishes are in place when you're no longer able to speak for yourself.
- talking to your doctor or health care team about different treatments and what you can expect from those treatments.
- naming your **Substitute Decision-Maker** – the person who will speak for you when you cannot speak for yourself.

WHEN YOU ARE ADMITTED TO HOSPITAL*

Our goal at Eastern Health is to raise awareness about advance care planning with our patients and to offer you the opportunity to discuss end-of-life care and treatment options.

When you are admitted to hospital, an admitting clerk will ask if you have an Advance Health Care Directive (AHCD). If you do, we ask you to share it with our staff who will place on your Health Record.

You can expect a doctor, nurse or social worker to ask you about advance care planning. They could:

- speak with you about your current treatment options, and preferences for future treatment and care, as appropriate;
- ask you if you have designated a substitute decision-maker; and/or
- review your AHCD with you.

Following your conversation, your wishes regarding any end-of-life care decisions made during that hospitalization will be documented on your health record.

**includes patients of the Dr. H. Bliss Murphy Cancer Centre*

HOW DO I MAKE MY OWN ADVANCE HEALTH CARE DIRECTIVE (AHCD)?

THINK about what's right for you. What's most important to you about your end-of-life care?

LEARN about different medical options that may be offered at the end of life. Some may improve your quality of life, others may only prolong dying.

CHOOSE your Substitute Decision Maker. Choose a loved one who is willing to follow your wishes and who will speak for you if you can't speak for yourself.

TALK about your wishes with your Substitute Decision-Maker, loved ones and doctors/health-care professionals. If you have a written plan, make sure they have a copy.

RECORD your end-of-life wishes – prepare an AHCD.

REVIEW your plan regularly. Your AHCD can be changed by you at any time. It will only be used if you cannot speak for yourself.