

'My Death - My Way'

End-of-life Care Planning

Most people wish for their end-of-life care to take place outside of hospital and to die in the comfort of their own home. One of the ways to do this is to write an individual *end-of-life care plan* which anyone, regardless of age or current state of health, can do with their doctor.

Unfortunately, we often do not have control over *when* our death occurs but we can try to plan for '*how*' and '*where*' we die. Hence the aim of this end-of-life care plan is to state exactly *what* your treatment will be, *where* this should take place and importantly what care you would *NOT* wish to receive. This plan will only come into effect if you become unable to express your wishes and can be changed at any time - by talking to your doctor.

Locally there are three parts to an end-of-life care plan.

1) **The Emergency Health Care Plan (EHCP):** This is for anyone who may develop or already have an urgent medical need, from a peanut allergy to end-of-life care. It states what emergencies are anticipated, who to call and what treatment should be started.

2) **The Advanced Decision to Refuse Treatment (ADRT):** This is the only legally binding document where you can state what care you do NOT want to receive in an emergency. It is only used when you are unable to communicate your wishes (called loss of capacity). Examples of this may be the refusal of a life support machine, intravenous antibiotics or blood products.

3) **The Do Not Attempt Resuscitation (DNAR) form.** This is a very important aspect of end-of-life care. It allows a natural death to take place with no attempts made to '*bring you back to life*' in circumstances where this is *unlikely to succeed* or when you have said this would be *against your wishes*. This form is discussed in more detail over the page.

Your death is worth thinking about and planning for. If you would like to begin discussing your own end-of-life care plan, to ensure 'your death' happens 'your way', please make an appointment with your GP or specialist doctor. Your relatives and other Health Care Professionals can be involved and help you make these decisions.

Emergency Health Care Plan (EHCP)

Emergency Health Care Planning is a process of discussion between you, your partner, family or friends, and depending on your individual circumstances at the time, those who may provide care for you, for example nurses, doctors, care home manager or social worker.

During this discussion you may choose to express some views, preference and wishes about your future care so that these can be taken into account by those caring for you if you were unable to make your own decisions at some point in the future. This process will enable you to communicate your wishes to all involved in your care. This will help those caring for you to identify what is in your best interests and make decisions on your behalf.

Emergency Health Care Planning is a voluntary process and no one is under any pressure to participate.

Identify your wishes and preferences

The wishes you express during advance care planning are personal to you and can be about anything to do with your future care.

You may want to include your priorities and preferences for the future, for example:

- The name of a person/people you wish to be consulted on your behalf at a later time; this could be a close family member but can be anyone you choose. You may wish consider arranging that this person has a Lasting Power Of Attorney for Health and Welfare. (POA). You should let your GP know if you have done this.
- How you might want any religious or spiritual beliefs you hold to be reflected in your care
- Your preference about where you would like to be cared for, for example at home, in a hospital, nursing home or a hospice and who you would like to be with you
- Your thoughts on different treatments or types of care that you might be offered. Common reasons that patients become ill and going to hospital is considered are:
 - A fall where they may have a broken bone
 - Not being able to eat or drink
 - An infection- would you want to be admitted to hospital to be given antibiotics into a vein.
 - Their heart stopping – see DNAR leaflet
- Concerns or solutions about practical issues, for example who will look after your pet should you become ill.

If you wish to discuss having a EHCP form please make an appointment with you GP or specialist doctor. If you already have a EHCP form, please keep this in an easily accessible place for ambulance crew, a relative or a GP to find in an emergency.

Your GP should be informed that you have an EHCP so that a copy can be kept in your medical record.