

HPCA Advanced Healthcare Planning



HPCA
CARE & SUPPORT
Hospice Palliative Care Association of South Africa

Health care planning

Financial planning for retirement is important so that we don't face financial hardship in old age. We need to start saving for retirement while we are still young and fit. In the same way, even while we are still young and healthy, we should start thinking about our future health needs. This is not easy as it is hard to imagine that one day we won't be young and healthy; and talking about death, dying and end of life issues is a taboo in our society.

Before we go on holiday we plan the journey so that we end up at the right destination. In the same way, we need to see our lives as a journey and plan for both the beginning and the end.

Having a discussion about our wishes and preferences for our care if we experience serious illness or injury may be difficult to start but it is something that many people have found very rewarding. The Conversation Project in the USA has put together important facts and stories to help people who have this conversation. <http://theconversationproject.org/>. Ellen Goodman the founder of the Conversation Project makes the point that "it is always too soon to have the conversation until it's too late."

Medical knowledge and technology has developed to such a degree that there are treatment possibilities that can prolong life and delay death. Often these treatments are important so that the body can recover from a sudden injury or illness and with life-saving treatment, a person can survive and recover his or her health. Sometimes the illness or injury results in disabilities and restrictions to a person's physical or mental function and he or she needs to adapt to a new reality and may be dependent on others for day-to day activities. People are wonderfully adaptable and often find that they have good quality of life in spite of their changed state of health and ability to do different things. At other times the disease or injury is so great that even modern medical treatments cannot improve the situation to an acceptable level. However, because doctors are well trained in providing treatments and interventions, these treatments that may not provide any benefit to the patient – termed 'futile' treatment – are started and the patient is kept alive rather than allowing a peaceful and natural death.

The Hospice Palliative Care Association of South Africa encourage people to talk with their family and their doctor about their own choices and preferences in the event of experiencing serious illness or injury; and that we document our wishes for care if we are seriously ill or injured. Palliative care can relieve pain and other distressing symptoms, provides emotional, social and spiritual support to patients and families; and help families care for a loved one with illness or injury so that this care can

be provided in the home. We can choose to die at home in familiar circumstances and with the people we love close to us. Palliative care can help this to be a peaceful and comfortable death without pain; being able to speak to our friends and family without confusion, although this also depends on the disease or injury. Hospice nurses and other carers will visit a patient's home to make sure he or she receives good clinical care at home and will also support the family with bereavement care once the patient dies.

What are your choices?

This document is a guide to consider your own wishes and preferences and to discuss these with your family and doctor before you face the crisis of serious illness.

You may also want to visit this website to find out more <http://theconversationproject.org/>

There are a number of things to consider before we can document our wishes for care in the event of serious illness.

Who do I want to talk to about this? My family? Particular people in my family? My doctor?

What do I value most in terms of my mental and physical health?

What abilities are so critical that I can't imagine living without these abilities?

What would I be prepared to put up with in order to have more time?

If my illness is likely to result in my death what are my worries about the experience of dying?

What would I want to make dying more comfortable and peaceful?

Is there a friend or family member who could explain my wishes and preferences if I cannot speak for myself?

You may feel you don't need to discuss these things yet but it is a good idea to start thinking about them and maybe write a few things down. This is not a once-off conversation. We change our minds about our choices and preferences and new things may become more important.

If you want to write your wishes down more formally, the next pages provide a guide to how to document preferences for care.

Name: _____

Address: _____

ID/date of Birth _____

If I cannot speak for myself, I would like my doctor to talk about my healthcare and medical problems with the following person/s:

Name: _____

Contact details: _____

Name: _____

Contact details: _____

If I am not able to make decisions about financial and other matters, I have given the following person power of attorney, to make financial decisions on my behalf:

Name: _____

Contact details: _____

The most important things I want you to know about me are:

These are some of the things to guide my doctors in providing appropriate care¹:

I would like to know: Only the basics about my condition		Not sure	All the details about my condition and treatment
I would like: My doctors to do what they think is best		Not sure	To have a say in every decision about my care
I would like: To receive care indefinitely, whatever treatment is available, proven or unproven.		Not sure	To stop treatments that are no longer effective or have unbearable side effects
If I need constant and permanent care: I would accept living in a nursing home		Not sure	I want to be cared for at home with home-based care
If I am dying: I would accept spending my last days in hospital		Not sure	I want to spend my last days at home
I would like: Medical interventions such as ventilation, resuscitation, necessary drips, catheters and medication to preserve my life		Not sure	Effective pain relief and measures so that I am comfortable

In addition, the following considerations are important to me:

If I am ill and unable to make my own decisions, the following would be important to me – *for example, time with my family, needs of my family, respect for my culture*

In addition to basic care, ordinarily including the provision of food and drinks, the following care would be important to me – *for example, effective pain relief, being kept comfortable*

¹ From Conversation Project Starter pack

Treatments I wouldn't want - *for example, distressing treatment that offers little benefit, excessive or distressing attempts to resuscitate, culturally or religiously inappropriate treatment*

Religious and spiritual care – *for example, religious rituals, care from a pastoral practitioner, chaplain, minister or elder*

Other wishes – *for example, reconciliation with friends or family, biography writing, music & art, dying at home if possible*

Other planning documents:

In addition to this document to guide healthcare decisions, I have also completed the following documents:

Will Location: _____

Power of Attorney Location: _____

Electronic Passwords Location: _____

Facebook Legacy Contact–Click link for details
(<https://www.facebook.com/help/1568013990080948>)

Other eg Organ Donor Location: _____

Name & Surname: _____ **Signature:** _____

Witness 1 (Name & Surname): _____ **Signature:** _____

Witness 2 (Name & Surname): _____ **Signature:** _____

Date: _____

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