

<b>My name:</b>	<b>Date of Birth:</b>
<b>Address:</b>	<b>Telephone number</b> <ul style="list-style-type: none"> <li>• Home:</li> <li>• Mobile:</li> </ul>



## My Advance Statement (v2014.12.17)

This document should be read by professionals who care for me, and need to know my views on my future care. If I am unable to be involved in decisions about my care, this Advance Care Plan may help you make a decision in my best interests.

**I can change my mind about my wishes at any time. This document is not legally binding.**

<p><b>If I cannot communicate easily:</b></p> <ul style="list-style-type: none"> <li>- you can help me by:</li> <li>- if a decision needs to be made, please talk to:</li> <li>- please keep the following people informed of my progress:</li> </ul>
<p><b>Information that I need from the people looking after me:</b></p>
<p><b>Things that are important to me:</b></p>
<p><b>I am concerned / worried about:</b></p>
<p><b>Things I would like to happen to me:</b></p>
<p><b>When time is short, I would like:</b></p>
<p><b>At the very end of my life, <u>if circumstances allowed</u>, my first choice for my place of care would be : Home Hospice Hospital</b>          (Please underline first choice)</p> <ul style="list-style-type: none"> <li>- This is because:</li> <li>- If this care was not available, my second choice would be:</li> </ul>
<p><b>Religious / spiritual things important to me:</b></p>

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The list below shows who has been given / sent a copy of my advance care plan

Name	Relationship	Telephone Number
Patient		
Hospital notes (purple copy)		
SystemOne (stored on Communications & Letters)		
Overgate Notes		
General Practitioner		
District Nurse		
Clinical Nurse Specialist		

An Advance Decision to Refuse Treatment is a more legally binding statement of a person's wishes about future care. I wish to complete one of these: YES  NO

This advance care plan replaces any earlier statements of this kind.

**Patient's signature:** ..... **Date:** .....

**For professional use only:**

Professional who has helped the patient complete this form:

Name..... Role..... Contact no. .... Date .....

- Was the patient offered an opportunity to complete ACP ?
  - o No  – state reason ACP not offered:.....
  - o Yes  – did the patient complete the ACP?
    - o Yes
    - o No

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## My EXAMPLE Advance Statement

*An example of the sorts of things you might put on an advance statement. These ideas are NOT exhaustive.*

### If I cannot communicate easily, you can help me by:

eg providing – hearing aid, pen & paper, litewriter, my glasses/dentures, an interpreter

- **if I still can't communicate, if a decision needs to be made, please talk to:**  
eg family member / NOK / named friend / faith representative
- **please keep the following people informed of my progress:**  
eg family member / NOK / named friend / faith representative

### Information that I need from the people looking after me:

eg -medication / treatment options,  
-name /role of individuals involved in my care,  
-how much I like to know about my condition / prognosis

### Things that are important to me:

eg -friends /family/pets, -symptom control, -appearance deodorant / make-up / shaved face or legs  
-dignity, -comfort, -finances/estate/funeral sorted out

### I am concerned / worried about:

eg -symptoms such as pain, -side effects of medicines, -my family/pets,  
-being a burden, -dying, -people not following my wishes

### Things I would like to happen to me:

eg -organ / body / corneal donation,  
-to be treated with respect and dignity,  
-to be comfortable,  
-music CD

### When time is short, I would like:

eg -to know vs NOT to know,  
-to say who I do and don't want present,  
-to be kept sleepy and comfortable vs to be kept as alert as my symptoms allow

**At the very end of my life, if circumstances allowed, my first choice for my place of care would be :** Home  
(circle first choice)

Hospice  
Hospital  
Care Home

- **This is because:** eg I want to avoid hospital vs I want to avoid being on my own etc
- **If this care was not available, my second choice would be:**

### Religious / spiritual things important to me:

eg "last rites", visit from my faith representative, particular funeral arrangements