HOW DOES ADVANCE CARE PLANNING WORK?

CARE

C Chat and Communicate

Ask patients to think about their values and preferences and what living well means to them. Encourage them to talk with you, their doctor, their healthcare team and their Medical Treatment Decision Maker about what is important to them. This may include clinical situations that the patient would find unacceptable or too burdensome, or values and attitudes towards treatment options. They may also talk about personal and cultural issues that are important to them. Key people who can help patients with these discussions are doctors, healthcare professionals, the Medical Treatment Decision Maker, and family/friends/carers/Support Person.

PLANNING

P Put it on Paper

A patient can complete an **Advance Care Directive** to document their healthcare preferences and values. The Directive will be used to guide the patient's healthcare team and Medical Treatment Decision Maker if they are unable to make medical decisions themselves.

An Advance Care Directive has two parts:

- Values Directive
- Instructional Directive

A **Values Directive** is a statement of the patient's values and preferences regarding their medical treatment. The Medical Treatment Decision Maker will use the Values Directive to guide them when they need to make a medical decision for the patient.

An **Instructional Directive** is a legally binding statement. A patient can consent or refuse future medical treatment. The Instructional Directive takes effect as if the patient had consented to, or refused the treatment. For example, if a Jehovah Witness would like to refuse blood products, they need to complete an Instructional Advance Care Directive.

A patient can choose to complete either or both directives.

Interstate Advance Care Directives will default to a Values Directive. Interstate patients will need to complete an Instructional Directive to consent to, or refuse treatment.

The patient should discuss and complete an Advance Care Directive with their doctor and their Medical Treatment Decision Maker. The patient may also talk to their specialists and involve their family/carers/Support Person. The healthcare team can explain the details to patients about medical treatments related to their condition and the benefits and risks of these treatments.

NEED HELP?

Contact the Advance Care Planning Program Manager at St Vincent's:

Caroline Scott - Advance Care Planning Program Manager
9231 2847
bestCARE@SVHM.org.au
http://intranet/Departments/advancecareplanning/Pages/Default.aspx

ST VINCENT'S HOSPITAL MELBOURNE
A FACILITY OF ST VINCENT'S HEALTH AUSTRALIA

St Vincent's
PO Box 2900 Fitzroy
VIC 3065 Australia
(03) 9231 2211
www.svhm.org.au

StVincentsHospitalMelb
@StVincentsMelb
st-vincent's-hospital-melbourne
@stvincentsmelb

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Inspired by you

Advance Care Planning

Information for Staff

WHAT IS ADVANCE CARE PLANNING?

Advance Care Planning is a process of planning for future health. This ensures St Vincent's Hospital Melbourne (SVHM) and the patient's Medical Treatment Decision Maker know what is important to the patient and what treatment the patient would like if they are unable to make decisions themselves.

Advance Care Planning is about discussing and documenting the patient's values and preferences. This may include clinical situations that the patient would find unacceptable or too burdensome, or values and attitudes towards treatment options. The patient may also talk about personal and cultural issues that are important to them. Key people who can help patients with these discussions are doctors, healthcare professionals, the Medical Treatment Decision Maker, family/friends/carers/Support Person.

Making decisions for someone else can be difficult and distressing. Advance Care Planning can help those caring for patients know what is important to the patient. It lets patients be part of their future health decision making while they are still able. Advance Care Planning can also reduce the burden of medical decision making during crisis situations and can provide a clearer understanding of patients' preferences.

Above all, Advance Care Planning allows the patient to be heard when they are unable to speak. The Values and Mission of SVHM supports patients and staff with Advance Care Planning.

WHY IS ADVANCE CARE PLANNING IMPORTANT?

There are 3 main benefits of Advance Care Planning:

- reduces stress for those close to the patient *who will make medical decisions for them*
- clarifies treatments and *identifies the legal decision maker*
- gives the *patient peace of mind*

ADVANCE CARE PLANNING DOCUMENTS AND TERMINOLOGY

The Victorian law on Advance Care Planning changed on 12th March, 2018. The new Act, ***Medical Treatment Planning and Decisions Act 2016*** (Vic), provides a framework and more support for Advance Care Planning.

Previous Terminology/Document Medical Treatment Planning and Decisions Act 2016 Terminology:

Previous Terminology/Document	*Medical Treatment Planning and Decisions Act 2016* Terminology
Refusal of Treatment Certificate	Instructional Advance Care Directive
Advance Care Directive or Advance Care Plan or Statement of Choices	Values Advance Care Directive
Enduring Power of Attorney (Medical Treatment) or Enduring Power of Attorney (Personal Matters) or Enduring Power of Guardianship	Appointed Medical Treatment Decision Maker
Person Responsible	Medical Treatment Decision Maker (unappointed, determined by the Medical Treatment Decision Maker hierarchy)
No previous equivalent	Support Person (legally appointed)
Next of Kin or Person Responsible or Preferred Next of Kin or Senior Next of Kin or Emergency Next of Kin	Emergency Contact Person (no legal significance, cannot be contacted for medical decision making)

Advance Care Planning documents have also changed with the introduction of the new Act. The following documents made prior to 12th March 2018 are still valid going forward:

- Advance Care Directive/Plan, also called Statement of Choices
- Enduring Power of Attorney (medical treatment)
- Enduring Power of Guardianship
- Enduring Power of Attorney (with power to make decisions about personal matters)
- Refusal of Treatment Certificate

Advance Care Plans made prior to 12th March 2018 will be considered by the Medical Treatment Decision Maker as a statement of the patient's values and preferences.

Ask if your patients have completed either previous documents or documents under the new Act. If so, a copy must be sent to Health Information Services (HIS) for community patients or placed in the patient's medical file for inpatient admissions:

The new Advance Care Directive, Appointed Medical Treatment Decision Maker and Appointment of Support Person forms are available online: http://intranet/Departments/advancecareplanning/Pages/Default.aspx

PATIENT STORY

On Grand Final Day, Val would have loved to have been watching the Hawks take on the Eagles, even if her beloved Bombers did not make the finals.

Instead, Val was sitting in the St Vincent's Emergency Department. Val knows the ED well, having completed her nursing training at St Vincent's many years ago and subsequently being an in-charge nurse of the ED in the 1970's.

As the siren sounded to begin the final quarter of the Grand Final, the ED doctor approached Val. 'Sorry Val, I have some bad news for you.' With those words, Val knew her life would be changed forever.

Val was diagnosed with terminal cancer and admitted to the ward for further treatment. Over the next few days, Val lay in bed, contemplating her next steps.

Over the next few months Val underwent many rounds of chemotherapy. During one visit Val met Sue, a Social Worker, who introduced the topic of Advance Care Planning.

Val knew what mattered to her and what her wishes were. 'My nursing experience, family values and my mother's death helped shape my views and wishes,' Val says. 'I don't want to prolong life without quality of life – I want to keep my dignity.'

Val revised her Will, Power of Attorney (Financial), and Medical Treatment Decision Maker. Val had never married or had children. However, choosing a trusted and knowledgeable friend to be her Medical Treatment Decision Maker was an easy choice for Val to make. This person will make medical treatment decisions on behalf of Val when she is no longer able to make decisions herself.

HOW DOES ADVANCE CARE PLANNING WORK?

ADVANCE

A Appoint a Medical Treatment Decision Maker and/or Support Person

What is a Medical Treatment Decision Maker?

A Medical Treatment Decision Maker is a person who the patient appoints to make medical treatment decisions on their behalf if they do not have capacity to make the decision.

A patient may legally appoint a Medical Treatment Decision Maker using an Appointment of Medical Treatment Decision Maker form. A patient can appoint more than one Medical Treatment Decision Maker, however only one person acts at any time.

Prior to 12th March 2018, the patient may have completed an Enduring Power of Attorney (Medical Treatment), an Enduring Power of Attorney with power to make decisions about personal matters; or an Enduring Power of Guardianship. The person appointed in these documents is the patient's Medical Treatment Decision Maker.

Why do people need a Medical Treatment Decision Maker?

- It gives the patient control over who will make their healthcare decisions for them.

Who should a patient appoint as their Medical Treatment Decision Maker?

It is important the patient chooses someone who has a clear understanding of their values and preferences. It is a good idea for the patient to choose someone they trust and is available if required. They must be over 18 years of age and be a strong advocate to ensure the patients preferences are adhered to if and when required.

What if the patient hasn't appointed a Medical Treatment Decision Maker?

If a patient has not appointed a Medical Treatment Decision maker, the following provides a list of persons who may take on this role provided they are in a close and continuing relationship with the patient and, in the circumstances, are reasonably available and willing and able to make the medical treatment decision—

(a) the spouse or domestic partner of the patient;

(b) the primary carer of the patient;

(c) the first and eldest of the following —

(i) an adult child of the patient; **(ii)** a parent of the patient; **(iii)** an adult sibling of the patient.

What is a Support Person?

An appointed Support Person can assist the patient to make their own medical treatment decisions whilst they are still able to. A Support Person may assist by collecting and collating medical information, being a contact person for the healthcare team, or advocating on behalf of the patient. They cannot make decisions on behalf of the patient but instead support them to make their own decisions.