

Expressing My Wishes for Future Health Care Companion to My Voice Advance Care Planning Guide

Advance Care Planning Basics 1-2 -3:

1. Have conversations with family, friends and health care providers about your beliefs values and wishes.
 - Discussions taking place
2. Write down your beliefs, values and wishes for future health care treatment.
 - Complete page 30 of the My Voice Guide
3. Write down the contact information for the people who qualify to be on your Temporary Substitute Decision Maker list (TSDM).
 - Complete page 28, 29

If you have appointed a Representative (see A & B below), you may choose not to complete the TSDM list on page 28 of the My Voice

Advance Care Planning Options A-B-C:

A. Standard Representation Agreement: Section 7

- Primarily for adults with lower levels of capability (e.g., adults with developmental disabilities or injuries/ illness of the brain that affect cognitive ability may be able to complete this agreement)
- For routine health care and financial decisions only
- Refer to Page 11, forms: complete pages 34-43

Representative cannot make life prolonging or sustaining decisions

B. Enhanced Representation Agreement: Section 9

- Adults with full capability who wish to appoint a person to make health care decisions that can include accepting or refusing life support and life-prolonging interventions
- When the adult is incapable, the Representative becomes the decision maker
- Not for financial and legal decisions
- Refer to Page 12, forms: ONLY complete pages 44-49

Representative can make life-prolonging or sustaining decisions

C. Advance Directive

- Completed by a fully capable adult who wishes to complete a document that will accept or refuse specific health care treatments, document must meet legal requirements
- Health care providers and paramedics must follow instructions in a valid Advance Directive, the Health care provider will not seek consent from a substitute decision maker unless content is unclear
- If you have a Representation Agreement and an Advance Directive refer to page 16 for important details
- Discuss content of Advance Directive with your physician

More information:

BC Seniors Ministry: to print **MY VOICE** and DVD: <http://www.seniorsbc.ca/legal/healthdecisions/>

NIDUS: <http://www.nidus.ca/>

VIHA: http://www.viha.ca/advance_care_planning/

- Documents listed under Advance Care Planning Options A-B-C require two valid witnesses or a second witness is not required if witness no.1 is a B.C. Lawyer or Notary Public
- A health care provider including your physician, family members or paid caregiver cannot act as a witness to these documents
- Provide a copy of advance care planning documents to your family physician, other health care providers, appointed Representative(s) and family
- Keep documents in your home within easy access in case of emergency