



### Anticipatory Care Planning: information for people who are severely frail

#### What is Anticipatory Care Planning?

Thinking ahead and making a plan helps people who are frail, like you, make choices about their care. We call this Anticipatory Care Planning. It is important for us to talk with you, your family or a close friend about what might happen if you are unwell. If you have chosen someone to have Power of Attorney we will involve them too.

No one knows when a person's health may change so it is better to have a plan in place. Then everyone will know what things are important to you and what you would like to happen. You might have talked with your family or a close friend about this before.

If you are not able to talk about anticipatory care planning, we ask those who know you well to tell us about what would matter to you and what you might choose.

Staying at home enables you to be looked after in a familiar place rather than going to hospital for treatments that might not work. Hospital treatments may not help or could mean ending up in much poorer health. During the Coronavirus pandemic going to hospital also has more risks than usual. Because of this you may wish to be looked after by District Nurses and your GP Practice Team if being comfortable at home is more important to you. However, there are a few conditions for which admission to hospital may still be appropriate even in the current times, for example, a hip fracture.

#### How is an Anticipatory Care Plan made?

- Some people already have their own Anticipatory Care Plan. Other people have thought about planning ahead. You may have talked about this with your family before.
- We try to make the Anticipatory Care Plan as soon as we get to know you so that we have the right information available if it is needed.
- Your Plan is looked at by District Nurses, GPs, Practice Nurses, and other health and social care professionals involved in your care. Your plan is updated if your health or wishes change. These plans are not legally binding.

#### Where is the Anticipatory Care Plan kept?

- The Anticipatory Care Plan is usually kept with your other District Nurse records in your home.
- A summary of your Plan is written by your GP and includes any information we have about your views and wishes. It is added to your record at the GP practice.
- If you agree, the Plan is also added to a secure electronic record (called a Key Information Summary) used by the GPs on duty for evenings and weekends (NHS24), local hospitals and ambulance staff.

#### What happens now?

- On the next page are some situations to think about. If you have any questions, please ask your District Nurse or your GP. We will be happy to discuss these with you.

## Anticipatory care planning questions for people who are severely frail

There are changes in health that do sometimes happen in frail people.

Please tick the box that is closest to what you think you would like to happen. We will use this information to help us make an Anticipatory Care Plan for you.

1. If you had a sudden collapse (such as from a stroke or a heart condition), what do you think you would like to happen?

a)	Keep you comfortable, clinically assess you, treat any pain or other symptoms, and care for you at home.	
b)	Contact a family member/close friend, if possible, to help support you at home	
c)	Contact a family member/close friend, if possible, to help you choose the most appropriate place of care	

2. If you had a serious infection, including Coronavirus, that was not improving with treatment, what do you think you would like to happen?

a)	Keep you comfortable, clinically assess you, treat any pain or other symptoms, and care for you in your home.	
b)	Contact a family member/close friend, if possible, to help support you at home	
c)	Contact a family member/close friend, if possible, to help you choose the most appropriate place of care	

**Intensive care or treatment with a breathing machine do not help people who are very frail and in poor health from underlying health problems. It is better to care for them in a different way.**

3. If you were not eating or drinking because you were now very unwell, what do you think you would like to happen?

a)	Keep you comfortable, clinically assess you, treat any pain or other symptoms, and care for you in your home.	
b)	Contact a family member/close friend, if possible, to help support you at home	
c)	Contact a family member/close friend, if possible, to help you choose the most appropriate place of care	

If you have chosen options b) or c) to the questions above, who would you like us to contact?

Name:	Contact telephone number:
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Are there any specific illness or treatments that need a plan such as epilepsy, diabetes or tube feeding?

Is there anything else that matters to you about your health and care that it is important for us to know?

Patient's name.....CHI number.....

Practitioner's name .....Date completed.....