



“My Voice – Planning Ahead” Framework for Advance Care Planning Conversations

Conversations with an individual who is healthy		Conversations with an individual who is living with a chronic disease		Conversations with an individual who has limited life expectancy	
<i>Discussions should include</i>	<i>Documents and decisions</i>	<i>Discussions should include</i>	<i>Documents and decisions</i>	<i>Discussions should include</i>	<i>Documents and decisions</i>
<ul style="list-style-type: none"> • Values, wishes, and beliefs regarding quality of life • Whether they have chosen a representative or agent and the importance of this role • Anticipated goals of care if they were in a situation where they were unable to speak for themselves • Preferences for end of life care 	<ul style="list-style-type: none"> • Will • “My Voice” workbook and/ or personal directive • Choice of representative/agent • Enduring power of attorney 	<ul style="list-style-type: none"> • Values, wishes, and beliefs regarding quality of life • Whether they have chosen a representative or agent and the importance of this role • Anticipated goals of care if they were in a situation where they were unable to speak for themselves • Preferences for end of life care • Quality of life and goals for living well • The individual’s understanding of diagnosis, prognosis and trajectory of illness • Benefits and burdens of treatment options • The individual’s hopes for the outcome of treatment 	<ul style="list-style-type: none"> • Will • Choice and involvement of representative/agent • Enduring power of attorney • Whether there are any limitations/parameters for interventions that the individual would like their family and health care team to know • Preferences with regard to medically appropriate treatment options • Expected and anticipated outcomes of treatment options • Involvement of representative/agent • A completed and available “My Voice” workbook and/ or personal directive 	<ul style="list-style-type: none"> • Values, wishes, and beliefs regarding quality of life and daily goals for living well • Whether they have chosen a representative or agent and the importance of this role • Anticipated goals of care if they were in a situation where they were unable to speak for themselves • The individual’s understanding of diagnosis, prognosis and trajectory of illness • Preparation for end of life including wishes for specific comfort care measures, visitors, location of care, and pain management • Specific beliefs, wishes, or rituals related to the dying process (prayer, chanting, special garments, etc) • Specific wishes or rituals for after death (prayer, bathing, cremation, funeral planning, etc) 	<ul style="list-style-type: none"> • Will • Choice and involvement of representative/agent • Enduring power of attorney • Expected and anticipated outcomes of treatment options • A completed and available “My Voice” workbook and/ or personal directive • Preferences for interventions as the individual’s health status changes (what to do for shortness of breath or other anticipated complications) • Preferences for interventions should the individual’s health status change dramatically (what to do for urgent complications and whether or not to call EMS)