

## Looking and Thinking Ahead

A document to inform decisions about future care preferences and wishes for people living in care homes.

This document has been produced to help care home staff to open up discussions about future care with frail older people living in care homes. This is important in case residents find themselves not being able to voice their preferences and wishes at a later date.

The document aims to enable discussions about such future care to take place between a resident, their family/other people important to them, and the caring team (GPs, nurses/ district nurses and care home staff). The document has some suggested questions that are useful to ask.

Wherever possible it is important to involve the resident, and the people who are important to them, in these discussions - even when a resident has dementia.

This is not a legal document. However, if in the future a decision regarding care needs to be made, the information in this document is available to decision makers.

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Name of resident:

Date of birth:

GP's name:

Family member who is point of contact:

Name:

Address:

Postcode: Telephone Number:

Has a power of attorney(s) been appointed? Yes  No

If 'yes', please provide details:

Name:

Address:

Postcode: Telephone Number:

Has an advance statement or other document outlining personal wishes already been written?  
Yes  No

Has an advance decision to refuse treatment (ADRT) been written? Yes  No

Discussions in this document are based around the care the frail older person themselves would want to happen towards the end of life. It is about preparing for the worst, while hoping for the best. Such knowledge is collectively gathered and recorded in this document.

**Do you (or, in the case of incapacity, your family member) have any particular wishes that you (or your family member) would want to achieve in the near future? If so, is there anything we can do to help with this?**

**In the event of a gradual decline in health, is there anything that worries you (or, your family member), or that you (or, your family member) dreads happening?**

**Are there any special wishes that you (or, your family member) would like us to know about when you (or, your family member) approach the end of life?**

**Do you (or, your family member) have a particular faith or belief system that is important to you (or them)? Would you like a priest/spiritual adviser to come and visit?**

**At the very end of life, where would you (or your family member) like to be cared for?**

**Is there any specific ritual/religious practice that you wish to happen following the death that you (or, your family member) would like to make known? For instance, funeral details, burial/cremation**

**Summary of any further discussion**

**Care professional leading the discussion:**

Name:

Role:

Date:

**Please list those present at discussion:**

Name:

Relationship to resident:

Name:

Relationship to resident:

Name:

Relationship to resident:

