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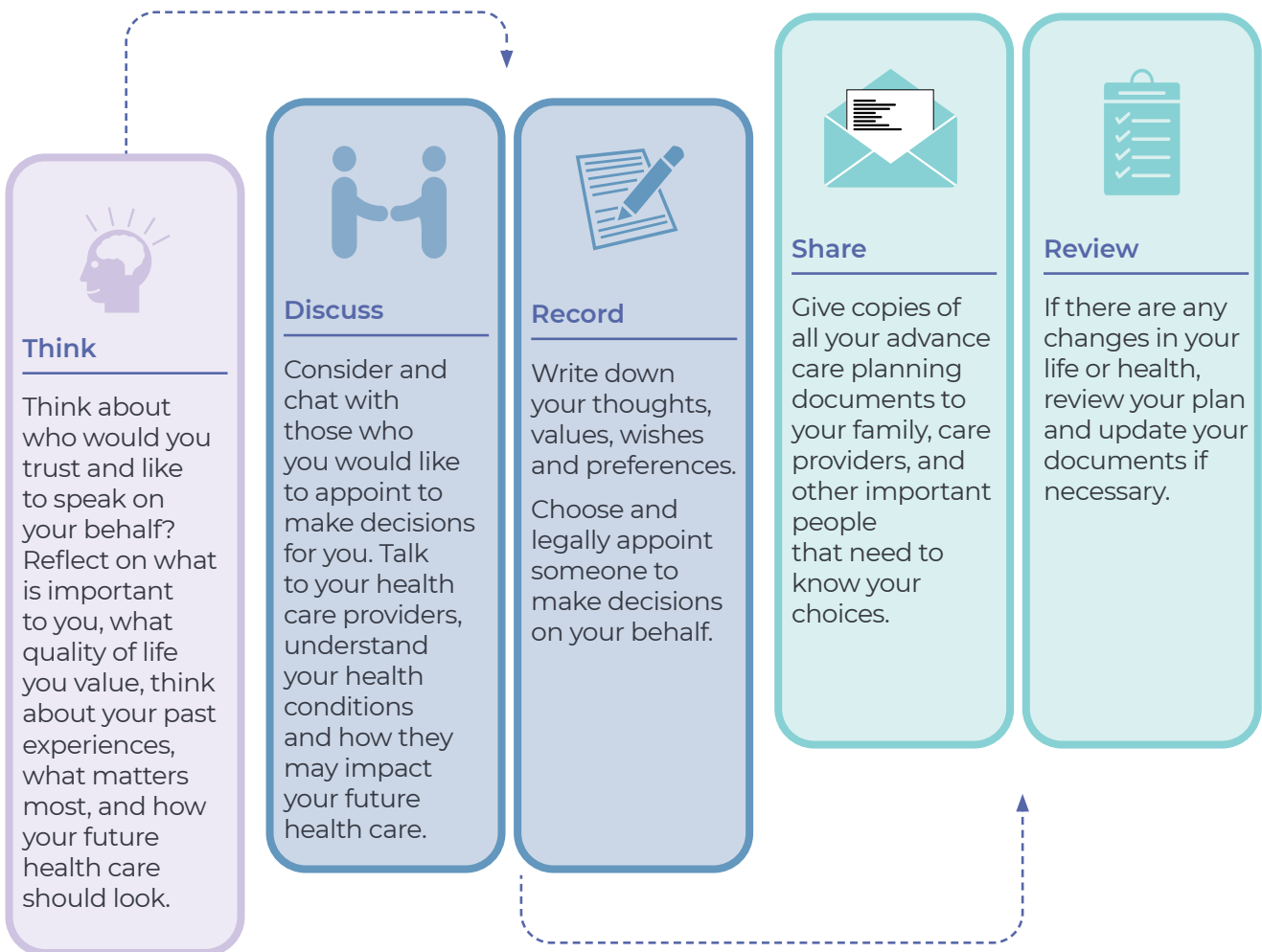
Section One - Frequently Asked Questions

1. What is Advance care planning?

If your choices for future health care are known, they can be respected. Advance care planning (ACP) is based on the principles of autonomy and dignity. You have the right to make decisions about your health care, now and for the future. Medical treatment should only be given with your fully informed consent, and you have the right to refuse treatment.

If you become unable to express your choices for treatment in the future, your doctors and family/friends may not know what you would want. Advance care planning allows you to think about, discuss, and record your choices ahead of time.

ACP is a series of steps you can take to plan for your future healthcare



Think now, plan soon, peace of mind when you need it

2. Why should I plan ahead?

Up to 50% of all Australians will not be able to make or express their own end of life decisions. Everyone should consider advance care planning, regardless of your age or health. Ideally, you should start planning when you're healthy - before there's actually an urgent need for a plan.

Advance care planning is particularly important for people who are older and are frail, or people who have a chronic illness, an early cognitive impairment

such as dementia, or are approaching their end of life. About 85% of people die after chronic illness, not as the result of a sudden event.

If you haven't documented your preferences or identified a substitute decision-maker, and you become seriously ill or injured, doctors will make treatment decisions based on their assessment of your best interests. This may include treatments that you may or may not want.

3. What documents are used in Advance care planning in the ACT?

1	Enduring Power of Attorney (EPOA)	Essential to have someone legally appointed to speak for you.	The EPOA is a legally binding document appointing your chosen decision maker/s with instructions on how they can act and what they can do. It can be completed independently with two authorised witnesses. (see "The Power to Choose" publication on the ACT Public Trustee and Guardian website). NSW residents appoint an Enduring Guardian for medical decision making – this is recognised in the ACT.
2	Statement of Choices	To think about, discuss and record your choices and guide those making decisions for you.	This outlines what matters most to you to live well. You can be specific about your choices for resuscitation and life prolonging or medical treatments and care that may be offered when you can no longer choose for yourself. This is recognised in common law.
3	Health Direction	An option to legally refuse or withdraw medical treatment.	You have the right to stop, or choose not to have, medical treatment now and in the future. A Health Direction is effective immediately. Not everyone has a Health Direction. You can complete one later if you feel you need to. It is best completed with your GP/doctor.



4. When is my Advance Care Plan used?

Advance care planning is ONLY used if/when you lose legal capacity to make decisions and express your wishes and choices about your medical treatment. It is a legal requirement that you are given the necessary support and information to participate in decisions that affect your life to the greatest extent practicable.

5. What is legal capacity?

The ability to make your own decisions is called capacity. You can make a decision if you can understand the situation at hand and the information given. Capacity includes weighing up the options and consequences and retaining and communicating this in some way.

The law presumes every adult has the capacity to make their own decisions about all aspects of their life (such as health, finance, and lifestyle), including who they choose to make decisions for them in the future (appointing an EPOA) and what health care decisions should be made if they were unable to voice these themselves.

6. If advance care planning documents are ONLY used when capacity is lost, how and when, is this decided?

Capacity may be temporarily lost during an acute illness or following an accident, or ongoing poor health and noticeable cognitive decline may be evident. A formal assessment of a person's capacity may be needed if there is concern that their ability to make their own decisions is affected.

A medical professional will usually assess decision-making capacity. Once assessed, the person may either be deemed to have capacity to make decisions, or not have it. If deemed to have capacity at that time, the person can continue to make decisions for themselves. If deemed not to have decision-making capacity, this is documented and the EPOA comes into effect. A substitute decision maker, usually the appointed EPOA, may then make decisions on the person's behalf. A Statement of Choices – no legal capacity format can be completed by the EPOA.

If an EPOA is not in place, the medical team may appoint a suitable person to act as emergency 'Health Attorney' to make urgent healthcare decisions. Ongoing health, financial, or lifestyle decisions may require an application to the Guardianship Tribunal to appoint a permanent Substitute Decision Maker called a Guardian.

7. What are life-prolonging and medical treatments?

Sometimes after a long illness or acute injury, the body's organs and functions require support to work properly. **Life prolonging treatments keep** organs functioning, and the person may die without these treatments. They include but are not limited to breathing tubes and support (intubation and ventilation), resuscitation such as CPR (cardiopulmonary resuscitation), dialysis to support kidney function and nutritional support through tube feeding.

Medical treatments may be considered life-prolonging but are also helpful to keep a person comfortable. They include but are not limited to blood and blood product transfusion, intravenous therapy, surgery, oxygen, medicines to treat infections and imbalances. Medical interventions may also include investigations, observations and tests.

8. What should I know about Cardiopulmonary Resuscitation (CPR)?

CPR is an emergency treatment to attempt to restart a person's heart or breathing if it stops suddenly. The person may have chest compressions (to make the heart pump), a tube put into their lungs to help them breathe (intubation), or an electric shock to their chest (defibrillation). If this is successful, admission to intensive care usually follows.

It is important you have all the information you need before you decide if you want CPR attempted. The success of CPR depends on a person's overall medical condition and age. Please talk with your GP/doctor about this.

In an emergency, the decision to start CPR is urgent and may be commenced without your decision-makers being notified.

9. Can I change my documents?

Yes. Advance care planning documents should be reviewed and changed if your wishes and circumstances change. Most important are the ongoing conversations with those you have chosen to make decisions for you. It is also essential to understand your health conditions and how they can change over time and impact your future health care.

Advance care planning is not always about the end of life; it is a way to let others know how you want to live.

10. Can my family override my choices?

Your family needs to be aware of your treatment preferences so that they can respect and carry out your wishes. They will be making these decisions for you at a stressful time, and the Statement of Choices and the discussions you have had can guide and support them to do this.

11. How and where can I share my advance care planning documents?

Keep your originals safe. You can share your documents with whomever you wish. You can upload or give copies of your documents to:



Your family, chosen family, other important people, appointed Substitute Decision Maker(s)/ Attorney(s).



Canberra Hospital and Calvary Public Hospital and private hospitals on admission



Care Providers (example Residential Aged Care Facilities or home care)



General Practitioner
Treating Specialists



My Health Record- you can upload all ACP documents to this nationally accessible record

[Add an advance care plan | My Health Record](#)

