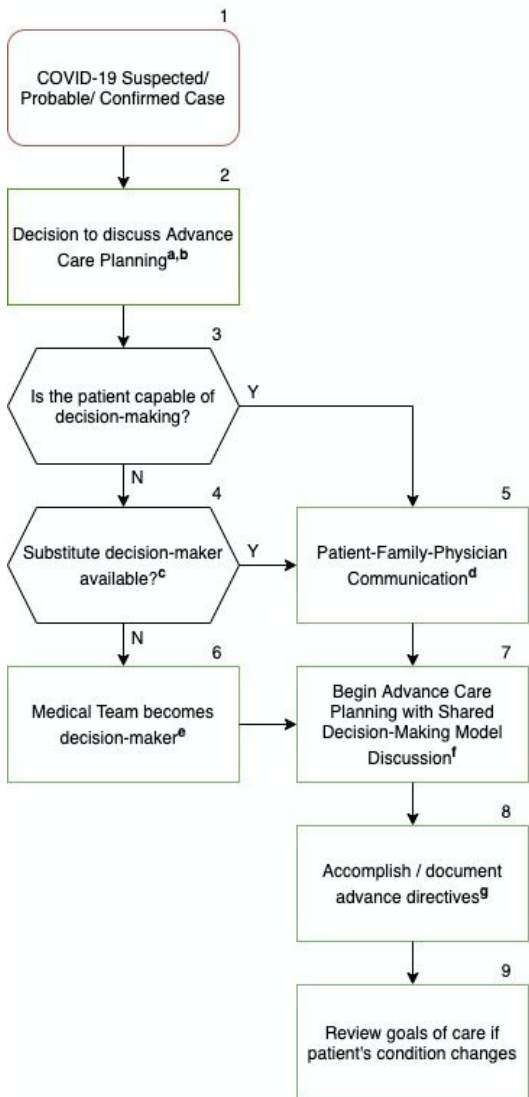


FIGURE 4A. ADVANCE CARE PLANNING

NOVEMBER 7, 2020



Footnotes

^aTiming of ACP Discussion

In a pandemic situation, advanced care planning at the onset of serious acute illness will be beneficial and should be given priority. Proper timing of ACP discussion is important, should be sensitive and will depend on several factors including patient's clinical status and prognosis, patient/family preferences and values, and HCW team/facility capabilities among others. Too early discussion may cause distress and demoralization, while too late may delay patient/family preparation for acute medical crisis, and cause incongruences in patient care.

^bAdvance Care Planning

Advanced Care Planning is making decisions about the healthcare a patient would want to receive if one is facing a medical crisis. This may take time so do not force arriving at a decision abruptly. Advanced Care planning includes :

1. Assessing the patient's / decision-maker's mental capacity to make informed decisions. Look for signs of losing the capacity to understand information, to retain information, to use and weigh information, and to communicate information.
2. Giving the patient / decision-maker information on the types of life-sustaining treatments that are available.
3. Helping the patient / decision-maker decide what types of treatment he/she would or would not want should the patient be diagnosed with a life-limiting illness.
4. Encouraging the patient / decision-maker to share one's personal values with loved ones.
5. Completing Advance Directives to put into writing what types of treatment the patient / decision-maker would or would not want – and who to speak to – should the patient be unable to speak for himself/herself.
6. To ensure that the document reflects the current wishes of the patient, initiate a review of the advance planning decisions if there is a change in the patient's perception of their quality of life; For patients that lack capacity, critical care teams should enquire about the presence of any ACP or advanced statements to better understand the beliefs of the individual; and in a pandemic situation, advanced care planning at the onset of serious acute illness will be beneficial and should be given priority.

^cSubstitute Decision-maker

Appointed according to the following hierarchy:

1. Power of Attorney
2. Spouse (living together in a married or common-law relationship)
3. Parent or child
4. Siblings
5. Other relatives

^dPatient-Family-Physician Communication

The guide includes the following reminders:

1. Ensure Comfort
2. Assess Emotional Temperature
3. Listen to Patient Concerns
4. Reassure
5. Assess Need for Information
6. Deliver Information with Empathy
7. Explore Emotions and Provide Support

^eMedical Team becomes decision-maker

In the premise there is no appointed/surrogate decision-maker, medical team makes a "best interest" decision following consultation with family members and any written statements. This is an attempt to make the same decision the patient would in these circumstances should they have had capacity.

^fShared decision making model

Key component process of patient-centered health care in which clinicians, patients and their families work together to make decisions and select tests, treatments and care plans based on clinical evidence that balances risks and expected outcomes with patient preferences and values.

^gAdvanced Directive definition

An advance directive consists of a person's oral and written instructions about his or her future medical care, in the event he or she becomes unable to communicate, becomes incompetent to make health care decisions or is in a persistent vegetative state. This may vary in different institutions, ensure completeness and attach to patient's records