

RESIDENT/LEGAL DECISION MAKER/FAMILY QUESTIONNAIRE



A Palliative Care Conference has been scheduled for _____ on _____
Name of Resident
Date

This Conference will be facilitated by _____
Name of Facilitator

Please complete this questionnaire and return it to the facilitator before the conference if possible.

Today's date is: _____ My name is: _____

Please select one of the following.

- ☐ I am a resident living in this long-term care home
- ☐ I am the legal decision maker for a resident living in this long-term care home
- ☐ I am a family member/friend of a resident living in this long-term care home but not the legal decision maker

1. What are the **main issues/concerns** for you at the moment?

2. What **questions** would you like answered at the care conference?

3. **How upset/worried are you about these concerns?** Please circle the correct number if '1' is Not at all' and '10' is as worried as I could possibly be'.

1	2	3	4	5	6	7	8	9	10
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Not at all

Neutral

As worried as
I could possibly be

FREQUENTLY ASKED QUESTIONS

What is a palliative approach to care?

- Support of people who are suffering from illness with no cure.
- Aim is to maximize quality of the person's life, manage symptoms and meet complex needs.

Am I dying/or is my family member dying very soon?

- People receiving 'Palliative Care' often live for months and sometimes years.
- 'Terminal phase' of illness may mean persons are expected to die in days or weeks.

What is a Palliative Care Conference?

- Meeting held between a resident and their healthcare team, which ideally (with permission of the resident) includes their future legal decision maker, and their family.
- To provide a safe environment to discuss issues and questions about current, future and end-of-life care.
- To have goals of care conversations while prioritizing your values, beliefs, and wishes about treatments and quality of life.
- To prepare and obtain informed consent for a plan of treatment for the resident.

Common Topics

- Current health (e.g., eating, mobility, recreation, pain, breathing).
- Possible progression of health condition, what to expect over next few months and what care will be provided.
- Goals of care concerning end-of-life care and treatment (e.g., symptom management, music, visitors, rituals).

Who should attend?

- You (the resident) must be present if you have the capacity to make personal decisions and you are able to attend. If you do not have decision making capacity then your legal decision maker must be present.
- Any concerned family member or friend can attend if you/your legal decision maker agree.

Will I/my legal decision maker be asked if we agree with the new treatment plan?

- **YES**, informed consent from you/your legal decision maker is required **BEFORE** a treatment plan begins.
- Know the risks, benefits, side effects, alternatives to the care/treatment proposed, choices if you/your decision maker do not agree to the plan. It is your right to have any questions answered.

May I/my legal decision maker make changes to the treatment plan in the future?

- You/your legal decision maker have the right to make changes at any time even after consent.
- With health changes, the treatment plan may change which will require your consent.