Future Care Planning – Information for Professionals



What is Future Care Planning?

Future Care Planning is a person-centred, proactive approach to help people to plan ahead and to be more in control and able to manage any changes in their health and wellbeing.

At the heart of this is a conversation between individuals, those people who are important to them, for example a relative or carer, and their health or social care professional.

What is a Future Care Plan?

The decisions made during these conversations are recorded in a Future Care Plan.

The plan should include:

- reflections on an individual's situation and priorities in the context of their health
- information about specific treatments or care that would be appropriate for an individual, when they would consider or accept this care, and where they would like to be cared for
- information on who should be involved in supporting future decisions about treatment and care.

How do I use an Future Care Plan to inform care?

People's wishes and the wishes of those that matter to them, must always be taken into account when deciding on treatment plans. By doing this you will make a plan specific to this individual and based on what is important for them.

An Future Care Plan can help us plan for where treatment should be delivered and this in turn may lead to discussions about the level of treatment which can be provided in these locations. It is important that we come to an understanding with people regarding their health goals so that we can make realistic plans.

What are my responsibilities?

Start the Conversation: It is the responsibility of all staff, in all areas, to start the conversation about the benefits of Future Care Planning. This may involve asking them to think about specific aspects of their care or reflect on their current experience. This could be linked to a recent acute admission, a new diagnosis or a progression of a Long Term Condition. It may also be an introductory conversation about the benefits of future planning and signposting people to further information (www.nhsggc.scot/planningcare)

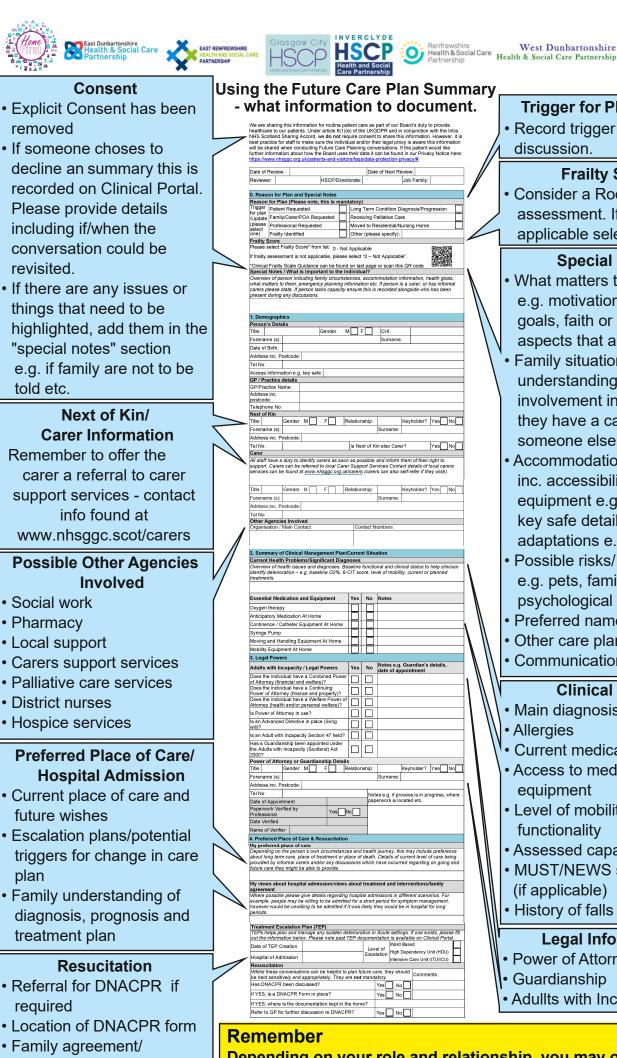
Record the Information: If people give their consent, information should be recorded in the **Future Care Plan Summary** which can be found on Clinical Portal (also available in PDF). By storing information on the system other services can also access and update information as they have further conversations. The Clinical Portal system will automatically inform the GP when new information is added and ask them to update the Key Information Summary (KIS). A guide to using the Future Care Plan Summary can be found on the back of this page.

Revisit the Situation: This process requires ongoing conversations as people's goals and preference may change throughout their life. It is important that staff revisit these topics, particularly if there is any change to diagnosis, prognosis or treatment options.

Where can I find more information?

Visit <u>www.nhsggc.scot/planningcare</u> to find further information about all aspects of future planning including Future Care Plans and Power of Attorney.

You can also find training opportunities including an eModule which all staff should complete (also available on Learnpro GGC028: Future Care Planning).



Record trigger for discussion. Frailty Score Consider a Rockwood frailty assessment. If not applicable select "0" Special Notes What matters to the person e.g. motivations and health goals, faith or cultural aspects that are important Family situation inc. understanding and involvement in decisions, if they have a caring role for someone else etc. Accommodation situation inc. accessibility for equipment e.g. stretcher, key safe details, adaptations e.g. stairlift Possible risks/ difficulties e.g. pets, family dynamics, psychological states Preferred names • Other care plans available Communication needs **Clinical Notes** Main diagnosis/ prognosis Allergies Current medication Access to medication and equipment Level of mobility/ functionality Assessed capacity MUST/NEWS scores (if applicable) History of falls Legal Information

West Dunbartonshire

Yes No

Trigger for Plan/Update

Greater Glasgow and Clyde

- Power of Attorney
- Guardianship
- Adullts with Incapacity

Depending on your role and relationship, you may only know some of this information. Please input as much information as you can. Your colleagues will also be adding to this form.

Future Care Plan Summary Guide V8 - June 25 ggc.HomeFirst@nhs.scot

knowledge of DNACPR