

# **Your Conversation Starter Kit**

When it comes to end-of-life care, talking matters.





CREATED BY THE CONVERSATION PROJECT AND THE INSTITUTE FOR HEALTHCARE IMPROVEMENT

**The Conversation Project** is dedicated to helping people talk about their wishes for end-of-life care.

We know that no guide and no single conversation can cover all the decisions that you and your family may face. What a conversation can do is provide a shared understanding of what matters most to you and your loved ones. This can make it easier to make decisions when the time comes.

NAME	
DATE	

### **HOW TO USE THE STARTER KIT**

This Starter Kit doesn't answer every question, but it will help you get your thoughts together, and then have the conversation with your loved ones.

You can use it whether you are getting ready to tell someone else what you want, or you want to help someone else get ready to share their wishes.

Take your time. This kit is not meant to be completed in one sitting. It's meant to be completed as you need it, throughout many conversations.

### **TABLE OF CONTENTS**

_			
Step 1:	Get Ready .	 	 .3
Step 2:	Get Set	 	 . 4
Step 3:	Go	 	 . 7
Step 4:	Keep Going	 	 10

Why talking matters . . . . . 2

This document does not seek to provide legal advice. ©2015 The Conversation Project. All rights reserved.

# Why talking matters

Sharing your wishes for end-of-life care can bring you closer to the people you love. It's critically important. And you can do it. **Consider the facts:** 

**90%** of people say that talking with their loved ones about end-of-life care is important.

27% have actually done so.

Source: The Conversation Project National Survey (2013)

**60%** of people say that making sure their family is not burdened by tough decisions is extremely important.

**56%** have not communicated their end-of life wishes.

Source: Survey of Californians by the California HealthCare Foundation (2012)

**80%** of people say that if seriously ill, they would want to talk to their doctor about wishes for medical treatment toward the end of their life.

**7%** report having had this conversation with their doctor.

Source: Survey of Californians by the California HealthCare Foundation (2012)

**82%** of people say it's important to put their wishes in writing.

**23%** have actually done it.

Source: Survey of Californians by the California HealthCare Foundation (2012)

One conversation can make all the difference.

# Step 1 Get Ready

You will have many questions as you get ready for the conversation. **Here are two to help you get started:** 

?	What do you need to think about or do before you feel ready to have the conversation?
?	<b>Do you have any particular concerns that you want to be sure to talk about?</b> (For example, making sure finances are in order; or making sure a particular family member is taken care of.)

### **REMEMBER:**

- You don't need to have the conversation just yet. It's okay to just start thinking about it.
- You can start out by writing a letter—to yourself, a loved one, or a friend.
- You might consider having a practice conversation with a friend.
- Having the conversation may reveal that you and your loved ones disagree. That's okay. It's important to simply know this, and to continue talking about it now—not during a medical crisis.
- Having the conversation isn't just a one-time thing. It's the first in a series of conversations over time.

# Step 2 Get Set

What's most important to you as you think about how you want to live at the end of your life? What do you value most? Thinking about this will help you get ready to have the conversation.

As doctors t  My doctors t they think is		∏ike ⊝3		<b>5</b> nave a say in ery decision
As doctors t		_	<b>O</b> 4	<b>5</b>
and my treat	reat me, I would	l like		
				• • • • • • • • •
Only the bas	ndition	All the details about my condition and my treatment		
Only the advise	<b>2</b>	<b>3</b>	<b>() 4</b>	<b>5</b>
As a patient	t, I'd like to know	_	O 4	O 5
		•	t your end-of-life ca lings on the given	
WHERE I ST	AND SCALES			
for, and wha		,	1 0	
		•	mmunicate to your s worth pursuing tr	
Sharing your	r "what matters to	me" statement w	ith your loved ones	could be
				ones I love.)

If I had a termin	al illness, I would	prefer to		
O 1	O 2	○ 3	<b>4</b>	<b>5</b>
Not know how quit is progressing	uickly		Know my docto estimation to long I have	for how
? Look at you What kind o	<b>ir answers.</b> f role do you want	to have in the dec	cision-making prod	cess?
		diadasasa		
How long do you  ∩ 1	u want to receive	medical care?	<b>○ 4</b>	<b>○ 5</b>
	<b>O</b> –	03	<b>O</b> 1	
	ndefinitely, no matter Quality of I now uncomfortable more importa reatments are me than qua		rtant to	
What are your o	oncorne about tr		• • • • • • • • • • • • • • • • • • • •	• • • • •
what are your c	oncerns about tr	eatment?	O 4	<b>5</b>
I'm worried that I	<b>O</b> -	03	I'm worried tha	
get enough care			overly aggress	
What are your p	references about	t where you want	t to be?	
O 1	O 2	○ 3	<b>4</b>	<b>5</b>
I wouldn't mind s my last days in a care facility			l want to sp last days a	
? Look at you What do you	<b>ir answers.</b> u notice about the	kind of care you w	ant to receive?	
5				

Ηον	w involved do	o you want your l	oved ones to	be?	
0	1	O 2	○ 3	<b>4</b>	<b>○</b> 5
do e	ant my loved of exactly what I'n if it makes to comfortable	ve said,			
Wh	en it comes t	o your privacy			
0	1	O 2	<b>○</b> 3	<b>4</b>	<b>5</b>
	en the time co ant to be alon			I want to be s by my	surrounded loved ones
\A/b				• • • • • • • • • • • • • • •	• • • • • • • •
Wn		o sharing inform	3 3	<b>O</b> 4	<b>O</b> 5
to k	I don't want my loved ones to know everything about my health  Look at your answers. What role do you want your loved ones to play? Do you think that your				
		know what you wa		<u>,                                      </u>	
?	want your f	u feel are the thr riends, family, ar s and preferences	nd/or doctors	to understand a	-
1.					
2.					
3.					
- [					
					6

## Step 3 Go

Institute for Healthcare Improvement www.ihi.org

When you're ready to have the conversation, think about the basics.

## MARK ALL THAT APPLY: WHO do you want to talk to? Faith leader (Minister, Mom Priest, Rabbi, Imam, etc.) Dad Child/Children Friend Doctor Partner/Spouse Caregiver Sister/Brother Other: WHEN would be a good time to talk? Before the baby arrives ☐ The next holiday ☐ The next time I visit my parents/ ☐ Before my child goes to college adult children Before my next trip ☐ At the next family gathering ☐ Before I get sick again Other: WHERE would you feel comfortable talking? ☐ At the kitchen table Sitting in a park ☐ At a favorite restaurant ☐ At my place of worship In the car Other: On a walk WHAT do you want to be sure to say? If you wrote down your three most important things at the end of Step 2, you can use those here.

www.theconversationproject.org

## How to start

Here are some ways you could break the ice:
"I need your help with something."
"Remember how someone in the family died—was it a 'good' death or a 'hard' death? How will yours be different?"
"I was thinking about what happened to, and it made me realize
"Even though I'm okay right now, I'm worried that, and I want to be prepared."
"I need to think about the future. Will you help me?"
"I just answered some questions about how I want the end of my life to be. I want you to see my answers. And I'm wondering what your answers would be
What to talk about:
When you think about the last phase of your life, what's most important to you? How would you like this phase to be?
Do you have any particular concerns about your health? About the last phase of your life?
What affairs do you need to get in order, or talk to your loved ones about? (Personal finances, property, relationships)
■ Who do you want (or not want) to be involved in your care? Who would you like to make decisions on your behalf if you're not able to? (This person is your health care proxy.)
Would you prefer to be actively involved in decisions about your care? Or would you rather have your doctors do what they think is best?
☐ Are there any disagreements or family tensions that you're concerned about?
☐ Are there important milestones you'd like to be there for, if possible? (The birth of your grandchild, your 80th birthday.)
8

- Where do you want (or not want) to receive care? (Home, nursing facility, hospital)
- ☐ Are there kinds of treatment you would want (or not want)? (Resuscitation if your heart stops, breathing machine, feeding tube)
- ☐ When would it be okay to shift from a focus on curative care to a focus on comfort care alone?

This list doesn't cover everything you may need to think about, but it's a good place to start. Talk to your doctor or nurse if you'd like them to suggest more questions to talk about.

#### **REMEMBER:**

- Be patient. Some people may need a little more time to think.
- You don't have to steer the conversation; just let it happen.
- Don't judge. A "good" death means different things to different people.
- Nothing is set in stone. You and your loved ones can always change your minds as circumstances change.

- Every attempt at the conversation is valuable.
- This is the first of many conversations—you don't have to cover everyone or everything right now.

**Now, just go for it!** Each conversation will empower you and your loved ones. You are getting ready to help each other live and die in a way that you choose.

# Step 4 Keep Going

Congratulations! Now that you have had the conversation, here are some legal and medical documents you should know about. Use them to record your wishes so they can be honored when the time comes.

- Advance Care Planning (ACP) The process of planning for your future care—exactly what you have been working on here.
- Advance Directive (AD) A document that describes your wishes.
- Health Care Proxy (HCP) Identifies your health care agent (often called a "proxy"), the person you trust to act on your behalf if you are unable to make health care decisions or communicate your wishes. In some states, this is called the Durable Power of Attorney for Health Care. This is probably the most important document. Make sure you have many conversations with your proxy.
- Living Will Specifies which medical treatments you want or don't want at the end of your life, or if you are no longer able to make decisions on your own (e.g., in a coma).

You can find more information about these documents from the link in the "Keep Going" section of the website Starter Kit at: www.theconversationproject.org.

Remember, this was the first of many conversations. You can use the questions on the following page to collect your thoughts about how your first talk went, and then look back to them when you prepare for future conversations.

Is there something you need to clarify that you feel was misunderstood or misinterpreted?
Who do you want to talk to next time? Are there people who should hear things at the same time (like siblings who tend to disagree)?
? How did this conversation make you feel? What do you want to remember? What do you want your loved ones to remember?
? What do you want to make sure to ask or talk about next time?

## We hope you will share this Starter Kit with others.

You have helped us get one conversation closer to our goal: that everyone's end-of-life wishes are expressed and respected. Please send us your feedback or request additional information at conversationproject@ihi.org.