**Talk about my wishes**  ** Ref no**

**Date**

The Talk about project has been designed to support and encourage people across Somerset to share their thoughts and wishes for their care. This document is meant to enable and empower you to have a voice about your future. It aims to share with those you are close to and those who are involved in your care, your wishes and aspirations for your future.

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| Tell me a little about yourself. | |
| My health and in the future | |
| An advance care plan (ACP) is a record of your wishes, feelings and beliefs that can be used if you later become unwell or need medical treatment.  Writing an ACP will give those around you, (your family, friends and healthcare team) a clear idea of what you want if you cannot tell them.  Your ACP is not legally binding. This means that a healthcare professional does not have to follow the instructions that are in it. However, what you write in your ACP is still important because it must be taken into account when someone is making a decision for you.  The following sections offer suggestions for you to think about, you do not need to fill in every section. | |
| Important to me and who I am. The things that are important in my life are: | |
| For example, what do you enjoy doing? Spending time with family or friends, activities like listening to music or reading, where do you like doing these things and how often and who with? | |
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| The things that are important to my identity are: | |
| For example, what do you like to be called, what clothes do you like to wear, how important is your independence, privacy and dignity, what gives you pleasure in your life, friends, family, hobbies, work? | |
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| Important people in my life are: | |
| I have discussed this Advance Statement with the following people, and I want them to be involved in decisions about my care.  Name  Relationship.  Phone number  Name  Relationship.  Phone number | |
| My religious and/or spiritual beliefs are: | |
| For example, do you follow/celebrate a particular religion or faith? What does it mean to you? Are there any prayers, ceremonies or rituals you take part in?  Does your religion or faith affect the way you want to be cared for?  How do you find peace or calm? | |
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| My care - Important information to know when caring for me: | |
| For example, do you have a daily routine you like to stick to? Such as what time you get up and go to bed or if you prefer a bath or shower? | |
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| My food needs and preferences are: | |
| For example, what should people know about your eating habits, are you vegetarian or vegan, do you have any allergies? | |
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| The place I would like to be cared for is: | |
| For example, would you prefer to be cared for in a hospice, a particular hospital or in your own home? Who would you like to be with you? | |
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| The things I do not like are: | |
| For example, do you dislike certain activities, music, or foods? Are you scared of anything, animals, needles or being left alone? | |
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| Additional important matters: | |
| Notes re. will | |
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| Who knows about my personal and financial details? | |
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| My funeral wishes plan | |
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| Social media and online accounts | |
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| What will happen to my pet? | |
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| I also have: | |
| Advance decision to refuse treatment | Yes No |
| Somerset Treatment Escalation Plan / STEP | Yes No |
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| I give my consent for this document to be shared with my GP. | |
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| Would you be interested in other Marie Curie support such as our Helper Service, Information and Support Service or can we support a referral/signpost to another service? | |
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| Do you have any worries or concerns? | |
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| Is there anything else you would like to say? | |
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