

When does an advance care choice come into effect?

Choices expressed through advance care planning come into effect only when an individual is no longer capable of making a specific decision for him or herself. The healthcare provider proposing the treatment assesses the individual's capacity to make a decision and informs him/her of the finding.

Are healthcare providers and substitute decision makers required to follow the expressed wishes of the individual?

Yes. If the expressed wishes are relevant to the situation at hand and were expressed when the individual was capable (meaning the individual understood and appreciated the nature and consequences of the decision) and over the age of 16, they should be followed. This has been established in case law.

Is everyone required to do advance care planning?

No. There is no legal requirement for individuals to complete advance care planning (either to express their choices or to appoint a substitute decision-maker).

Admission to a facility or access to health care cannot be denied based on the absence of advance care planning.

For more information:

If you would like more information about advance care planning, speak to a member of your healthcare team.

Online resources include:

Each of the following websites provides information to assist patients and families in the process of advance care planning.

The Credit Valley Hospital (Ethics)
<http://www.cvh.on.ca>

Ontario Seniors' Secretariat
<http://www.gov.on.ca/mczcr/seniors/>

Office of the Public Guardian and Trustee
<http://www.attorneygeneral.jus.gov.on.ca>

Advocacy Centre for the Elderly
<http://www.advocacycentreelderly.org>

Consent and Capacity Board
<http://www.ccboard.on.ca>

Publications Ontario
<http://www.gov.on.ca> (follow the link for "laws")



A Guide for Patients & Families about Advance Care Planning

Advance Care Planning

Alice has a history of strokes in her family. She has strong opinions about how she would like to be cared for if she were to experience a serious stroke. She does not want to be “hooked up to machines” if she is unlikely to regain the ability to talk or eat or move about.

Mohamed has lived a fiercely independent life. Although he is 90 years old and has recently been diagnosed with Alzheimer’s disease, he lives in his own home and wants to continue to do so, despite concerns raised by his children about his safety.

Lilly is a woman of strong religious convictions and believes that “where there’s life, there’s hope.” If she were to become comatose, she would want to continue receiving life-sustaining treatments.

In each of the above scenarios, the individual has expressed a number of wishes about the kind of health and personal care they wish to receive in a future situation of incapacity.

This guide outlines some key information for individuals to consider when engaged in advance care planning. A list of additional resources is also provided.

What is advance care planning?

Advance care planning is about individuals expressing personal choices about how they wish to be cared for in the future. It may also include appointing someone to make decisions on their behalf.

Why is advance care planning important?

There may come a time when an individual is unable to make decisions for him or herself. The inability to make decisions for oneself may happen suddenly as with a serious stroke or gradually as with Alzheimer’s disease. A substitute decision-maker(s) (as defined by law) will make decisions on behalf of the incapable individual.

Advance care planning can help to ensure that individuals receive the kind of care they want. Having made decisions in advance may also help to reduce the stress for family members and healthcare providers in times of crisis.

What kind of choices can be made?

Individuals can make choices about any personal care matter including healthcare, food, living arrangements, clothing, hygiene, and safety. Individuals can also choose their substitute decision-maker(s) by appointing an Attorney for Personal Care. Advance care planning for personal care does not include financial and property decisions. Financial and property decisions are managed through a different process.

How can these choices be communicated?

An individual can express their wishes verbally, in an audio or videotape, or in any written form. The wishes should be expressed to the individual’s substitute decision-maker. Individuals may also choose to communicate their wishes to other family members, their doctor, close friends, or their lawyer.

If an individual wishes to name someone to be his/her Attorney for Personal Care, this must be done in writing, dated, signed, and appropriately witnessed.

Can individuals change their mind about their choices?

Yes. If individuals change their mind they should inform their substitute decision-maker(s) and healthcare providers. The most recently expressed capable wish (whether verbal or written) is to be followed.

What is the difference between an advance care directive, a living will, and a Power of Attorney for Personal Care?

In an advance care directive or living will, an individual documents their wishes. A Power of Attorney for Personal Care may also be used to do this, but in addition it includes appointment of an individual(s) to be the person’s substitute decision-maker.