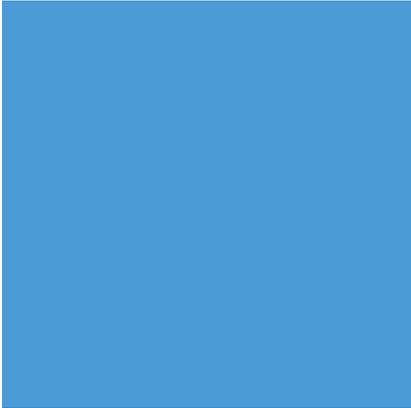


Preferred Priorities for Care

(Easy read)



What is this document for?

The Preferred Priorities for Care (also known as PPC) is for anyone who wishes to plan for their future end of life care.

The PPC gives you a chance to think about, talk about and write down what you would like to happen with the care you want at the end of your life.

You do not have to fill in a PPC unless you want to.



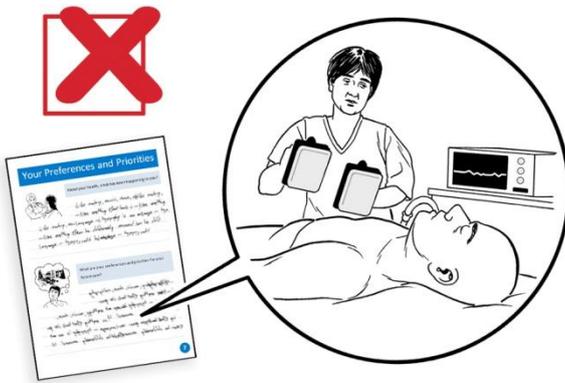


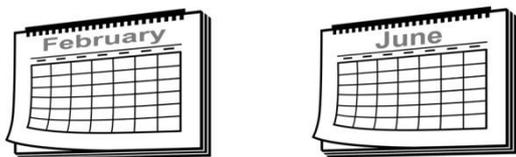
The PPC can help you and your carers (your family, friends and professionals) to understand what is important to you when planning your care.

If you are poorly and you cannot make decisions for yourself, anyone who has to make decisions about your care for you will have to see what you have written in your PPC.

Sometimes people wish to refuse some medical treatments in advance. The PPC is not meant for this reason.

If you decide that you want to refuse any medical treatments, you should discuss this with your doctors.





Your views may change over time. You can change what you have written whenever you want. You should check your PPC regularly to make sure it says what you want.

Should I talk to other people about my PPC?

You may find it helpful to talk about your future care with your family and friends.

Although sometimes this can be hard as people may get upset or might not agree with you.

It can also be useful to talk about any needs your family or friends may have if they are going to help care for you.



Your professional carers (like your doctor, nurse or social worker) can help and support you and your family with this.

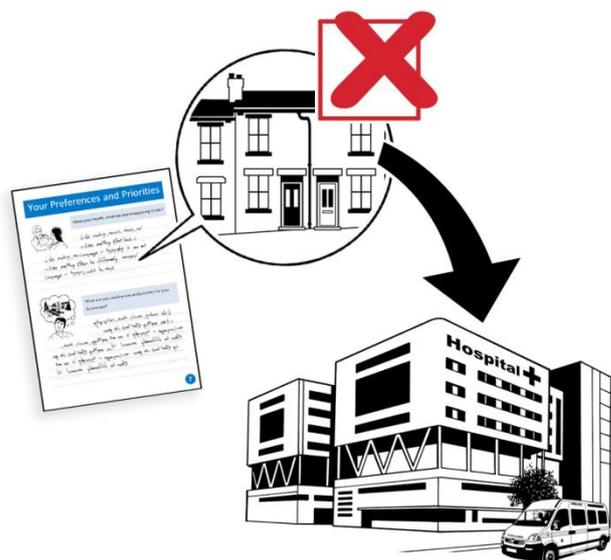


When you have filled in your PPC you should keep it with you and share it with anyone involved in your care. Unless people know what is important to you, they will not know what you want.



Will I get what I have asked for in my PPC?

What you have written in your PPC will always be thought about when planning your care.



Sometimes things can change unexpectedly (like carers becoming over-tired or ill), or services may not be available to meet a particular need.



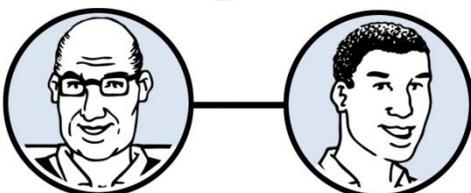
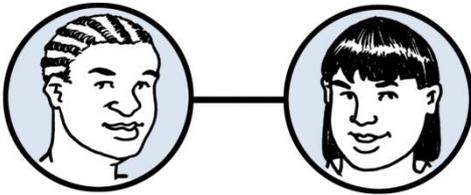
What should I include in my PPC?

You should include anything that is important to you or that you are worried about.

It is a good idea to think about your beliefs and values, what you would and would not like, and where you would like to be cared for at the end of your life.

People who should be asked about your care if you are not able to make a decision for yourself

You may have asked somebody to make decisions for you, using a Lasting Power of Attorney, in case you ever become unable to make a decision for yourself.



If you have registered a Lasting Power of Attorney please provide their contact details below:

Name:	
Address:	
Phone number:	
Relationship to you:	

Even if you do not have a Lasting Power of Attorney, please provide details below of anybody else who you would like to be asked about your care.

Name:	
Address:	
Phone number:	
Relationship to you:	

Your Preferences and Priorities



What has been happening to your health?



What is important to you for your future care?



If you become really unwell and are nearing the end of your life, where would you like to be cared for?

Signature: **Date:**



Please write down any changes about what is important to you for your future care (please sign and date any changes).



Further information

You can use this page to write down any further information you need or questions you might want to ask your professional carers (like your doctor, nurse or social worker).

A series of horizontal dotted lines provided for writing down further information or questions.

This document was given to me by:

Name:	
Organisation:	
Phone number:	
Email:	



More information about PPC is
available at this website:

www.endoflifecareforadults.nhs.uk

Originated by Lancashire & South Cumbria Cancer Network in June 2004
and endorsed by the NHS National End of Life Care Programme.

Revised by the National PPC Review Team in December 2007.

Easy read version produced in September 2011.

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