

Advance Care Planning Worksheet

Name _____ Date Completed _____

This worksheet is designed to be used in conjunction with **Advance Care Planning** e-learning. Access this course at <http://www.cdc.gov/aging/advancecareplanning>.

Agency Information

Agency Name	State
City	County

Internet Resources

1	National Association of Chronic Disease Directors http://www.chronicdisease.org	6
2	National Association of Area Agencies on Aging http://www.n5a.org/	7
3	National Association of States United for Aging and Disabilities http://www.nasuad.org/	8
4	Cancer Control P.L.A.N.E.T. http://cancercontrolplanet.cancer.gov/state_plans.jsp	9
5		10

After completing Module 1, fill in the information for Section I.

SECTION I – Making the Case for Advance Care Planning (Module 1)

Current Agency Involvement in Advance Care Planning

What is your agency's mission?

What organizational units of your agency are involved in chronic disease and aging?

What is your agency's current involvement in advance care planning? Include names, positions, and responsibilities.



Agency Contacts Related to Advance Care Planning

Agency	Name	Phone	E-mail
State Health Department			
Local Health Department			
Unit on Aging			
Area Agency on Aging			
Other			

Advance Care Planning Groups

Does your state or county have an advance care planning advisory committee or coalition? Yes No

If yes, who sponsors it and who are the members?

If no, what steps are needed to form one?

Comprehensive Cancer Center Plan

Access a copy of the Comprehensive Cancer Center Plan for your state or county.

How does the Plan address advance care planning issues?

How does your agency's mission fit in with the Plan?

After completing Module 2, fill in the information for Section II.

SECTION II – The Essential Elements (Module 2)

State Policies

What are your state's policies related to the following:

Health care advance directives

Durable powers of attorney

Guardianship or conservatorship

Living wills

Witnesses

Proxies and surrogacy

Client Support and Education

Does your agency offer clients or patients access to your state's advance directive policy and form?

Yes No

If yes, how is access offered?

Does your agency have a protocol for advance care decision making for a client?

Yes No

If yes, what is the protocol?

Does your city or county offer consumer community education around advance care planning?

Yes No

If so, who offers it and what topics does it cover?

After completing Module 3, fill in the information for Section III.

SECTION III – Making a Difference (Module 3)

Collaboration for Advance Care Planning

What could you do to foster collaboration between public health agencies, aging services, health services, and spiritual entities to further advance care planning in your state or community?

Possible Roles

What could your agency, state health department, or state unit on aging do to —

Offer expanded educational opportunities related to advance care planning for professionals?

Encourage advance directives and inclusion of palliative care within benefit packages?

Collect data on advance care planning and track success stories to share with consumer and professional communities?

Leadership

What activities can initiate, expand or strengthen your agency's role in advance care planning?

ADDITIONAL NOTES