

# Advance Care Planning Clinician Quick Reference Health Care Planning Legislation

*“What are the legal documents that impact health care decision making?”*

| Document  | Purpose/Intent   | Health Care Application and Legal Standing (Responsibility of HCPs)   |
|---|--|---|
| <b>Advance Care Plan</b>  | Record of expressed values, wishes, beliefs about future health and personal care. Can be audio, video or written.   | Follow if adult incapable. Ensure treatments offered and consent decisions align with ACP plan. Expressed wishes must be honoured by HCPs and SDMs.   |
| <b>Advance Directive (AD)</b><br><a href="#">*HCCFA</a>                                     | Legal written document made by a capable adult consenting or refusing to consent to specific future health care treatments.  | Follow AD if adult incapable, if medically indicated and applies to current treatment decisions. Ensure MOST/No CPR aligns with medically indicated AD.   |
| <b>Rep 7 Agreement (Standard)</b><br><br><a href="#">*Representation Agreement Act</a>      | Legal written document naming representative(s) to make personal, routine financial/legal and some health care decisions. Standard of capability can be lower. <i>Note: forms may contain personalized decisional authority.</i>       | Review document. Follow authority of representative(s) if adult incapable. Decisions are made in accordance with the agreement. Rep 7 not authorized to refuse consent to life supporting treatments necessary to preserve life OR consent to admission to a care facility. |
| <b>Rep 9 Agreement (Enhanced)</b><br><br><a href="#">*Representation Agreement Act</a>      | Legal written document made by a capable adult naming representative(s) to make personal care and health care decisions on their behalf should they become incapable. <i>Note: forms may contain personalized decisional authority</i> | Review document. Follow authority of representative(s) if adult incapable. Decisions are made in accordance with the agreement including refusal of life supporting treatments, and consent to admission to care facility (unless otherwise noted).                         |
| <b>Committee of Person</b><br><br><a href="#">*Patients Property Act</a>                    | Order obtained from B.C. Supreme Court to appoint a person to make personal and medical decisions on behalf of an incapable adult. <i>Note: orders may contain individualized conditions or restrictions</i>                           | Review document. Follow authority of court order and Committee of Person unless contrary to best interests of patient.  |
| <b>Medical Order for Scope of Treatment (MOST)</b><br><br><a href="#">*Fillable FH MOST</a> | Medical order signed by the MRP. Provides direction on CPR and medical treatments following discussion with capable adult or those that matter.  | Valid in all FH care settings and community. Applies to all physicians/nurse practitioners and staff. Honoured by BCEHS. <b>Not a consent form.</b>   |
| <b>Provincial No CPR</b><br><br><a href="#">*MOH No CPR Order</a>                           | Medical order signed by MRP and capable adult and/or substitute decision maker. CPR is not to be performed.  | Valid across British Columbia. Honoured by all health authorities and BCEHS.  |
| <b>Power of Attorney (Enduring)</b><br><br><a href="#">*Power of Attorney Act</a>           | Legal written document made by capable adult giving authority to someone to manage financial/ legal affairs on their behalf. Applies/endures even if adult become incapable.   | None, <b>no application</b> to health care decisions.   |
| <b>Committee of Estate</b><br><br><a href="#">*Patients Property Act</a>                    | Order obtained from B.C. Supreme Court to appoint a person to make financial/legal decisions on behalf of incapable adult.   | None, <b>no application</b> to health care decisions.   |

**Key Notes:**

Providers are not obligated to “offer” care that is not medically or clinically indicated.

HCPs are to ensure compliance with legislation where medically and clinically appropriate to do so.

HCPs are to ask about advance care planning and look for existing documentation.

\*See legislation for more detailed information.

