

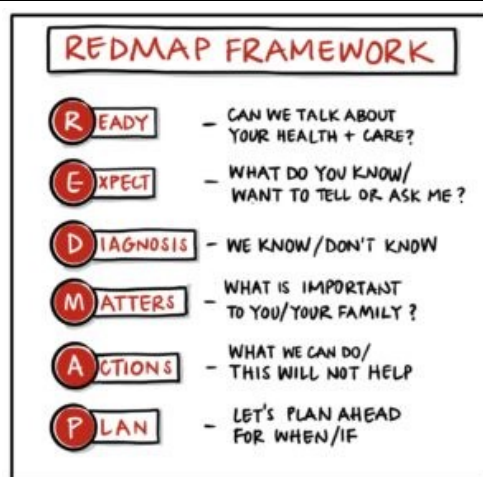
Why use SPICT-LIS™?

SPICT-LIS™ helps us identify people with one or more general indicators of poor or deteriorating health and signs of life shortening conditions for a palliative care review and future care planning. We offer these people the best available, appropriate treatment integrated with holistic palliative care. SPICT-LIS™ looks for changes in health, burden of illness and the needs of people and families. Early identification for palliative care avoids harm and improves treatment and care.

Using SPICT-LIS™ to review holistic care needs and plan care.

- **Poorly controlled symptoms:** Give the best available, appropriate treatments for underlying conditions, stop medicines/tests not of benefit; use effective palliative symptom management.
- **Dependent on others more** due to deteriorating functional ability, physical frailty and/or mental health problems. Look at options for more care and support for the person and their family.
- **Hospital admissions, more clinic visits** or a **decline in health:** Review current care, treatment and medication. Discuss available options if health worsens. Acknowledge uncertainty.
- **Holistic care needs** (physical, emotional, social, spiritual) that are difficult to manage. Consider specialist palliative care review or involve another appropriate specialist or service, if available.
- **Coordinated care at home:** Plan care and support from the primary care team and/or other community services or workers; involve the local community. Support family carers.
- **Decision-making capacity.** Plan ahead if this will get worse. Record details of close family/friends and any legal proxies. Involve them in decision-making if capacity is impaired.
- **Future care plan:** Agree, record, share and plan to review. Include plans for urgent/emergency care and treatment if the person's health (or care at home) deteriorates rapidly or unexpectedly.

Future care planning



Future care planning discussions may include:

- What matters for this person if their health changes.
- Benefits, harms and costs of hospital admission, outpatient visits, tests and treatments (e.g., IV antibiotics/fluids; surgery; cancer treatments, treatments for heart or kidney disease; tube feeding; oxygen or ventilation.
- Treatments/medicines that help, could stop, will not work or have a poor outcome.
- Cardiopulmonary resuscitation (if relevant).
- Choosing legal proxy decision-makers.
- Help and support for family/friends/carers.

Tips on starting conversations about care planning

- “I wish we had a treatment for..., but could we talk about what we can do if that's not possible?”
- “I am glad you feel better and I hope you will stay well, but I am worried that you could get ill again...”
- “Can we talk about how we might manage when we are not sure will happen and when?”
- “If you get less well, what is important for you?” “What would (*name*) say about this? Why is that?”
- “Some people find it helps to talk about whether to go to hospital or not if they get ill...”