Planning ahead when living with cancer – Scotland

About this booklet

This booklet is about ways you can plan ahead for your future care if you live in Scotland.

Planning for your future care is also called anticipatory care planning or advance care planning. It is important in case you ever become unable to make decisions for yourself.

This booklet may help you:

- think about what is important to you and ways you can plan ahead
- talk about your plans with the people close to you, and health and social care professionals
- put your plans into action by writing a will, or making a power of attorney or advance directive.

We hope it helps you deal with some of the questions or feelings you may have.

How to use this booklet

This booklet is split into sections to help you find what you need. You do not have to read it from start to finish. You can use the contents list on page 3 to help you. It is fine to skip parts of the booklet. You can always come back to them when you feel ready.

On pages 82 to 89, there are details of other organisations that can help. We also include and explain some template documents you can use to organise your wishes (pages 69 to 73). There are copies of these documents in the pocket at the back of this booklet, and they are also free to download at **orders.macmillan.org.uk** There is also space to write down questions and notes for your doctor or nurse (pages 90 to 92).

Quotes

In this booklet, we have included quotes from people who have made plans for their future care, which you may find helpful. These are from people who have chosen to share their story with us. To share your experience, visit **macmillan.org.uk/shareyourstory**

For more information

If you have more questions or would like to talk to someone, call the Macmillan Support Line free on **0808 808 00 00**, 7 days a week, 8am to 8pm, or visit **macmillan.org.uk**

If you would prefer to speak to us in another language, interpreters are available. Please tell us, in English, the language you want to use.

If you are deaf or hard of hearing, call us using Relay UK on **18001 0808 808 00 00**, or use the Relay UK app.

We have some information in different languages and formats, including audio, interactive PDFs, easy read, Braille, large print and translations. To order these, visit **macmillan.org.uk/otherformats** or call **0808 808 00 00**.

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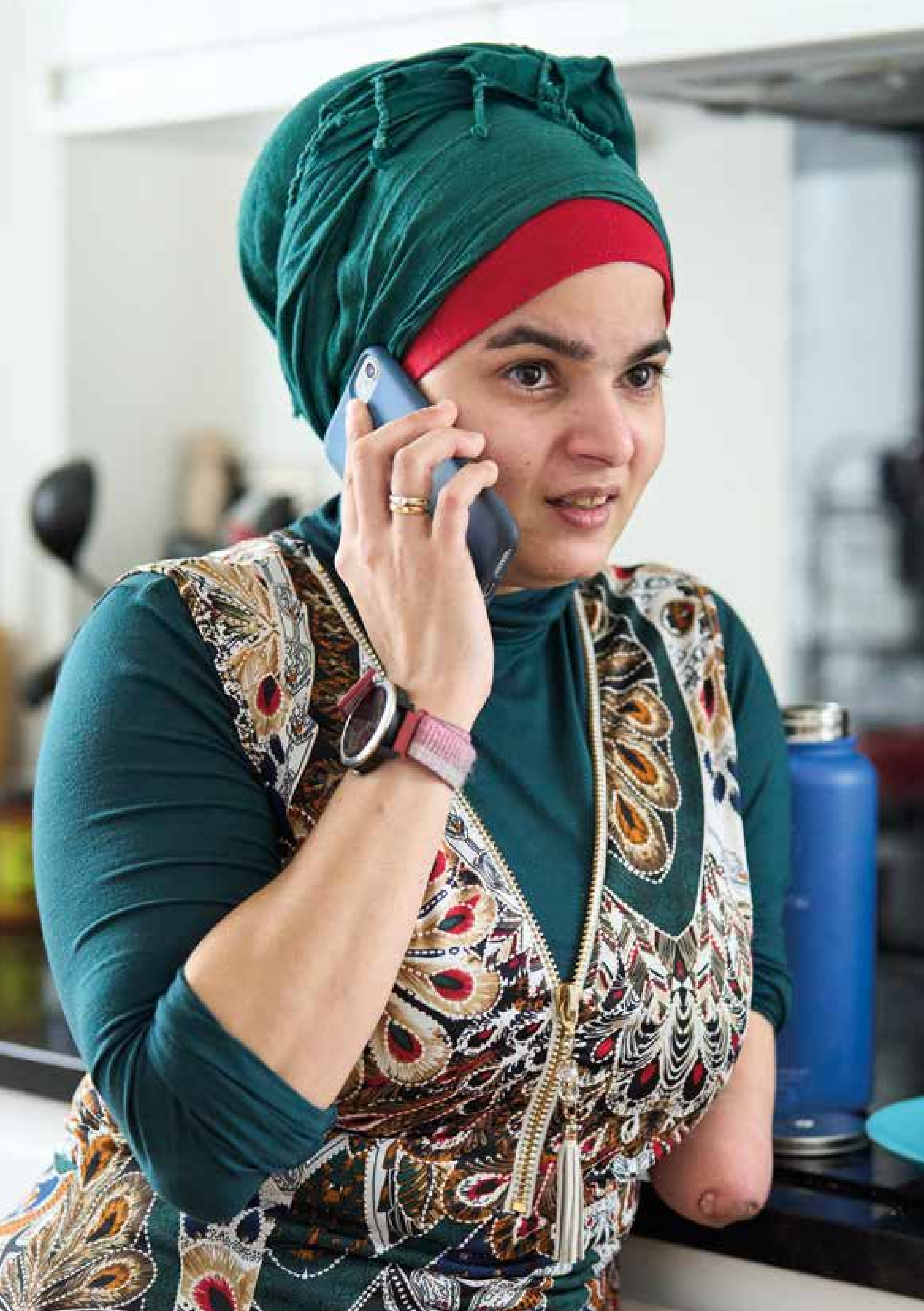


Planning ahead

Why plan ahead?

If you have a serious illness that could shorten your life, such as cancer, you might think about planning ahead for your future care. Even people who do not have a serious illness might want to make decisions about their future care.

Planning ahead means that people will know your wishes, even if you become very unwell and cannot make a decision or communicate.

It can also help people who are important to you, like family or friends, and healthcare professionals make decisions for you. Having a written record of your wishes or an advance care plan helps your healthcare team, family or friends to understand what is most important to you (pages 16 to 21).

For example, if the cancer is very advanced and treatment is not helping, you may not want treatment with antibiotics if you develop an infection. Or you might prefer to be cared for at home or in a nursing home instead of in hospital, if possible. Talking about your options with your healthcare team can help you to plan.

Planning ahead can be hard. But making a plan can help you to talk with your healthcare team, family or friends about what matters to you. It can help everyone understand the care, treatment and support you might need in the future.

You may also want to make practical plans. For example, you may want to arrange for a family member or friend to pay your bills if you are unwell.

How you can plan ahead

There are different things you can do to plan ahead. You do not have to do them all. It may be helpful to start with the ones that are most important to you:

- Write a plan of your wishes for your care. This is sometimes called an anticipatory care plan or an advance care plan. There are different documents that can be used (pages 16 to 21).
- Write down your wishes about any medical care or treatment you would not want if you cannot make or communicate your decision. This is called an advance directive or a living will (pages 38 to 41).
- Choose (appoint) a power of attorney. This needs to be someone you trust to make decisions for you about your health and care or finances (pages 32 to 35).
- Write a will to make sure your loved ones are provided for in the way you want after you die, and that your wishes are followed. It is easier to make a will when you are feeling well (pages 25 to 29).
- Write down any wishes you have about organ and tissue donation or donating your body to research (pages 46 to 47).
- Plan your funeral, and possibly pay for it in advance (pages 50 to 57).

> **"I don't avoid conversations about death and dying, but I will ask, 'If you were to become unwell, how can we best look after you and where would you like to be cared for to make this better for you?'. Families appreciate these conversations, they don't usually get upset. They want to plan ahead."**

Katie, Macmillan Advanced Palliative Care Practitioner

Who can help you plan ahead?

You may already be struggling with fears and uncertainties about the future. It is important that you do not feel alone when planning ahead. Health and social care professionals can help you, as well as family or friends.

To help with these discussions, you could write down your thoughts and feelings. For some people it is a relief to start planning ahead and sharing their plans.

Health and social care professionals

You can talk to your:

- GP or hospital doctors
- specialist nurse or district nurse
- social worker
- other health and social care professional.

Starting a conversation can feel difficult. You could say something like:

"I've been thinking about making plans for my future care, in case I can't make decisions for myself. Could you help me to find out my options and explain what I need to do?"

It may take time to discuss things. It may be months before you feel ready to make plans for your future care or treatment. Your healthcare team will not rush you into making any plans until you are sure.

Solicitor

A solicitor can help you:

- make a will (pages 25 to 29)
- create a power of attorney (pages 32 to 35)
- write an advance directive (pages 38 to 41).

For information on finding a solicitor, you could contact The Law Society of Scotland (page 83).

Family, friends, or people close to you

Try to involve people who:

- you are close to
- you can talk openly to
- could act on your behalf.

They can support you and help you to think about what you need to include. Involving them also helps makes sure your wishes are carried out.

Your plans could mean they make decisions on your behalf or take more responsibility for your care. For example, if you would like to die at home, it's important to discuss this with those close to you. You need to know if they think they will be able to help look after you, and any concerns they might have.

If they find it difficult to talk about

Sometimes family or friends find it hard to talk about a time when you will be very unwell. They may change the subject, or not want to talk about it. Try to explain why it is important for you to plan ahead, and how it would help you to talk about it.

You could try saying something like:

"I know it's difficult, but I want to talk to you about how I would like to be cared for if I became very unwell."

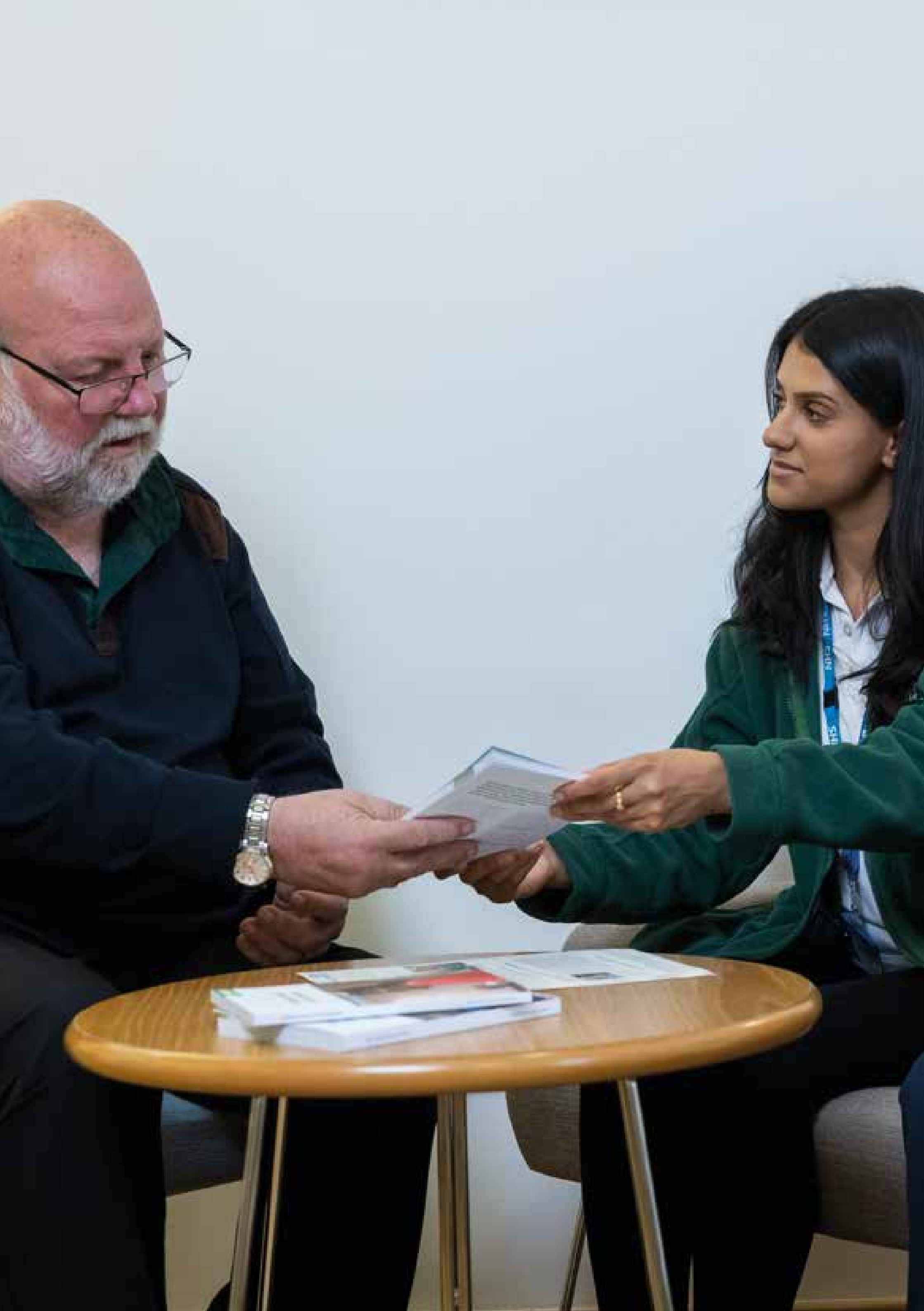
You could also ask them to read this booklet. Or you could write them a letter and ask them to talk to you about it when they feel ready.

Health and social care professionals can also support discussions with family or friends.

Coping with your feelings

Talking to family, friends or people close to you about how you feel can help. Health and social care professionals can also give you support. You might find it helpful to join a support group or talk things through with a support organisation (pages 82 to 89).

If you need more support, ask your healthcare team about finding a counsellor or psychologist. This can be helpful, especially if it you find it hard to talk about your feelings with people close to you.



Other sources of help

Different organisations provide information and support to people planning ahead. Some provide documents or care plans. You can complete these by yourself, or with support from family, friends and healthcare professionals.

These include:

- Age Scotland (page 89)
- Good Life, Good Death, Good Grief (page 82)
- Health Improvement Scotland (page 83)
- Marie Curie (page 84)
- NHS Inform (page 85).

Keep your documents safe

Make sure that family, friends, and health and social care professionals know where important documents are so they can find them easily and quickly. Wills can be recorded at **nationalwillregister.co.uk**

Review your documents regularly

Reviewing your documents is important to make sure they include your most recent wishes. These might change over time, especially if your situation changes.

You can review them with your health and social care professionals as part of your planning conversations. They can help you write down any changes and make sure your documents are up to date. It is also important to talk to the people close to you about any changes in your wishes.

You may find it helpful to use our planning ahead checklist (pages 70 to 73). Make sure someone close to you knows where you keep this checklist.

Key Information Summary (KIS)

This is an electronic record that is created and updated by your GP. It has information about what is important to you, and your wishes for your care. It can include information about an advance directive and the main decisions in it (paged 38 to 41).

If you need urgent medical help when your GP surgery is closed, other NHS staff can get this information from your KIS. Your healthcare team can tell you more about the KIS document.

Your advance care plan

When planning ahead, you can talk to people about your wishes and what matters to you, but it is usually better to write them down (pages 66 to 73).

A written record of your wishes (preferences) for your care and what is most important to you is sometimes called an anticipatory care plan or an advance care plan.

It can be reassuring for family and friends to know that you have recorded your wishes. Make sure they know where you keep your documents.

There are different documents that can be used. These include:

- My Anticipatory Care Plan (My ACP) , from **ihub.scot/myacp**
- What's important to me document (pages 66 to 69).

Your team may also help you to complete a ReSPECT document. It records what you would want to happen in emergency situations. For example, it sets out what treatment should be given if your heart and breathing stop suddenly. For more information visit **resus.org.uk/respect**

You can ask your health and social care professionals if there is a document they use.

These statements about your preferences and wishes are not legally binding. This means they cannot be enforced by law. But healthcare professionals use them to help guide their decisions about your care.

Talking about your advance care plan

Before you write down your wishes, try to talk about your plan with a family member or close friend. This can be helpful if you want them to:

- be involved in your care
- help you make decisions about your treatment and care.

It is also important to talk about your plans with the health and social care professionals looking after you (pages 9 to 11). You may want to ask them about how serious your illness is and what might happen in the future.

You can ask them whether your wishes are realistic. For example, you may hope you can stay at home when you are dying. They can talk to you about whether this might be possible. This may depend on having family or friends who are able to care for you.

> **"It has been empowering to take back responsibility and control in my life. I also feel better having been able to exercise some control and make decisions about my death, while I am still in a position to do so."**
>
> Mandy, diagnosed with breast cancer

What to include in your advance care plan

Try to include what is most important to you. The plan might include the following:

- Where you would most like to be cared for when you cannot look after yourself or when you are dying.
- What kind of care and treatments you would prefer, although you cannot request specific treatments.
- Any tests or treatments you would not want to have if you become more unwell.
- Who you would like to be involved in your care – for example, family members or close friends.
- Who you would like to make decisions about your care if you are unable to make the decisions yourself. You may want to choose a power of attorney so that others can act on your behalf (pages 32 to 35).
- Any spiritual, religious or cultural practices you would like to be included in your care.
- Who should look after anyone you care for.
- Instructions about caring for your pets.

If it is not possible to follow your plan

It may not always be possible to follow your plan or wishes when you become more unwell. For example, you may want to be cared for at home by a family member. But if they become ill or too tired, they may not be able to do this. Or you may have a symptom that cannot easily be managed at home.

Your healthcare team will do their best to help you stay at home. But sometimes the best possible care for you may be in hospital, a hospice or a care home. If you are already in a care home, you may want to stay there.

> **"I'm a very practical person. I've made a will and a list of other things I think should get sorted if I die."**
>
> Samixa, diagnosed with ovarian cancer

Sharing the information

Once you have completed the document, share it with people who are important to you and anyone likely to be involved in your care.

This may include a:

- family member or a close friend
- GP or hospital doctor
- specialist nurse or district nurse
- social worker
- other health and social care professionals.

Your healthcare team will keep a copy of some of the information for their records (page 15).

Where to keep your plan

Keep a copy in a safe place at home along with any other important documents. Tell people involved in your care where it is.

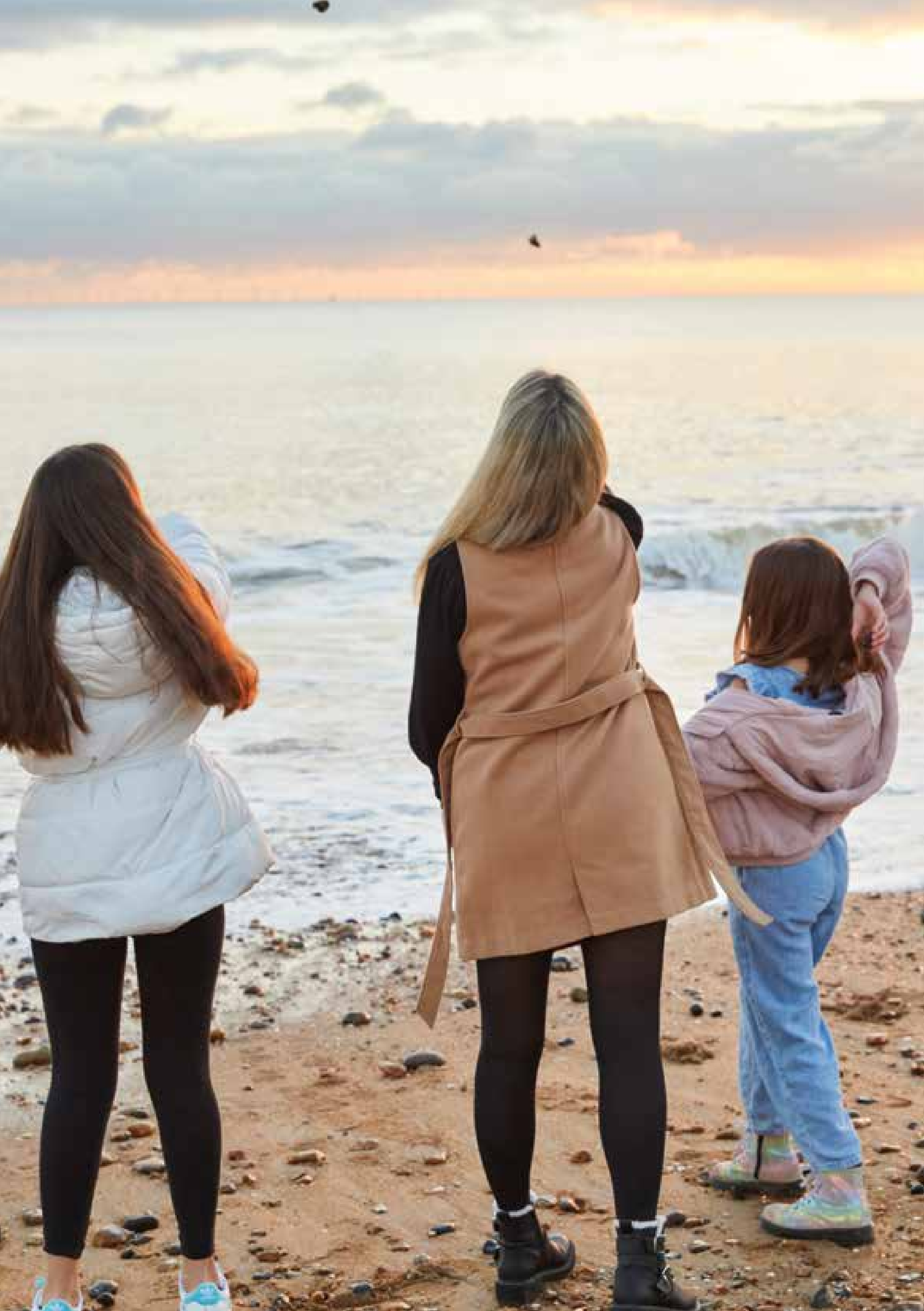
You might have a fridge sticker or note somewhere obvious in your home to tell an emergency doctor or paramedic where you keep your documents. Your family or carers can also help make sure your wishes are followed.

Review your plan regularly

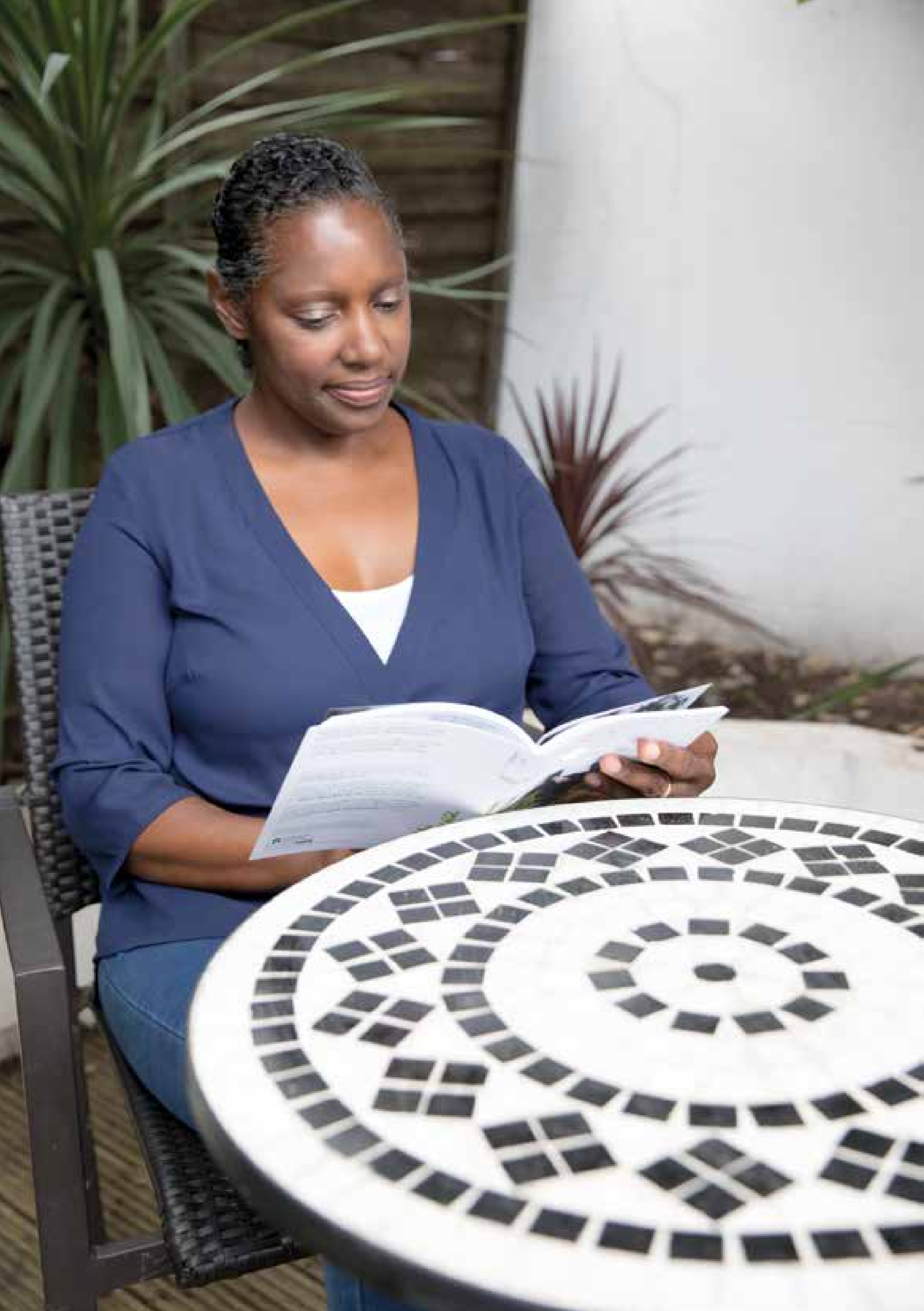
It is important to regularly review your wishes and keep them up to date. You can change your mind at any time, but remember to record your changes. If you make changes to your plan, tell all the people involved and give them an updated copy. You may find it helpful to use our planning ahead checklist (pages 70 to 73).

Here is an example of some of the information included in a What's important to me document (pages 66 to 69).

Your preferences and priorities	
In relation to your health, what has been happening to you?	
My doctors have told me that I am now only receiving care to control my symptoms. It is no longer possible to cure my illness.	
What are your preferences and priorities for your future care?	
If I were to become more unwell, I would like my wife to be involved in making decisions about my care. I would also like to be kept fully informed about what is happening to me.	
Where would you like to be cared for in the future?	
I do not mind where I am cared for, as long as my family are close by.	
Signature and date	



Making a will



Why is making a will important?

A will is a legal document. It gives instructions about who you want to give your money and belongings (possessions) to when you die. What you leave when you die is called your estate. This is made up of:

- everything you own, including money, property and belongings
- your share of anything you own jointly with someone else.

Anything you owe is taken off the value of your estate, after any debts are repaid. For example, the value of a mortgage would be taken off.

If you die without a will, it can take much longer to deal with your estate. It may also mean your money and belongings will not go to the people you would have chosen.

Involving a solicitor

Making a will is not as expensive or difficult as you might think. But it is a legal document and must be prepared properly, so it is best to use a solicitor. They make sure your wishes are clear and are carried out exactly as you want. If you need help finding a local solicitor, you can contact The Law Society of Scotland (page 83). It is a good idea to look around or ask for a few quotes to find the right solicitor for you.

Macmillan has partnered with a panel of trusted providers to offer a free will-writing service. Visit **macmillan.org.uk/willwriting**

Things to think about when making your will

It will help to think about certain things before you meet with a solicitor.

Who to include in your will

Make a list of all the people, charities or organisations you would like to include in your will. Think about what you want to leave them. This may be a specific amount of money, or something with financial or sentimental value.

The value of your estate

You need to find out the value of your estate. Your estate is everything you own when you die. Make a list of everything you own, and how much each thing is worth. These are your assets. They might include your:

- property (house or flat)
- car
- jewellery and watches
- furniture, antiques or collectables
- other possessions
- bank and building society accounts – current balance
- ISAs, savings certificates, Premium Bonds, and stocks and shares
- life insurance policies.

Then make a list of everything you owe. These are your liabilities. They may include:

- how much is left on your mortgage
- any overdrafts
- credit card debts
- bank loans
- other debts.

Add up the value of everything you own and take away the total amount you owe. This will give you the estimated value of your estate. This will need to be updated if anything changes.

Meeting with a solicitor

You can make a will by meeting a solicitor face to face, or over the phone.

When you talk to your solicitor, it will help to have the following information ready:

- names of people you want to carry out the instructions in your will (executors)
- things you want to leave in your will
- names of people you want to include in your will
- if relevant, who you want to be the guardians of children aged under 16
- any instructions you want to leave for your funeral.

When should I update my will or make a new one?

In Scotland, getting married or entering into a civil partnership does not cancel your existing will.

If you get divorced or end a civil partnership, any will you made while married or in a civil partnership is still valid. But if you have left a gift in your will to your spouse or civil partner, they may not receive this. This applies in all parts of the UK.

If you get divorced or end a civil partnership you should review your will, as it may need updating.

You may also need to update your will to include:

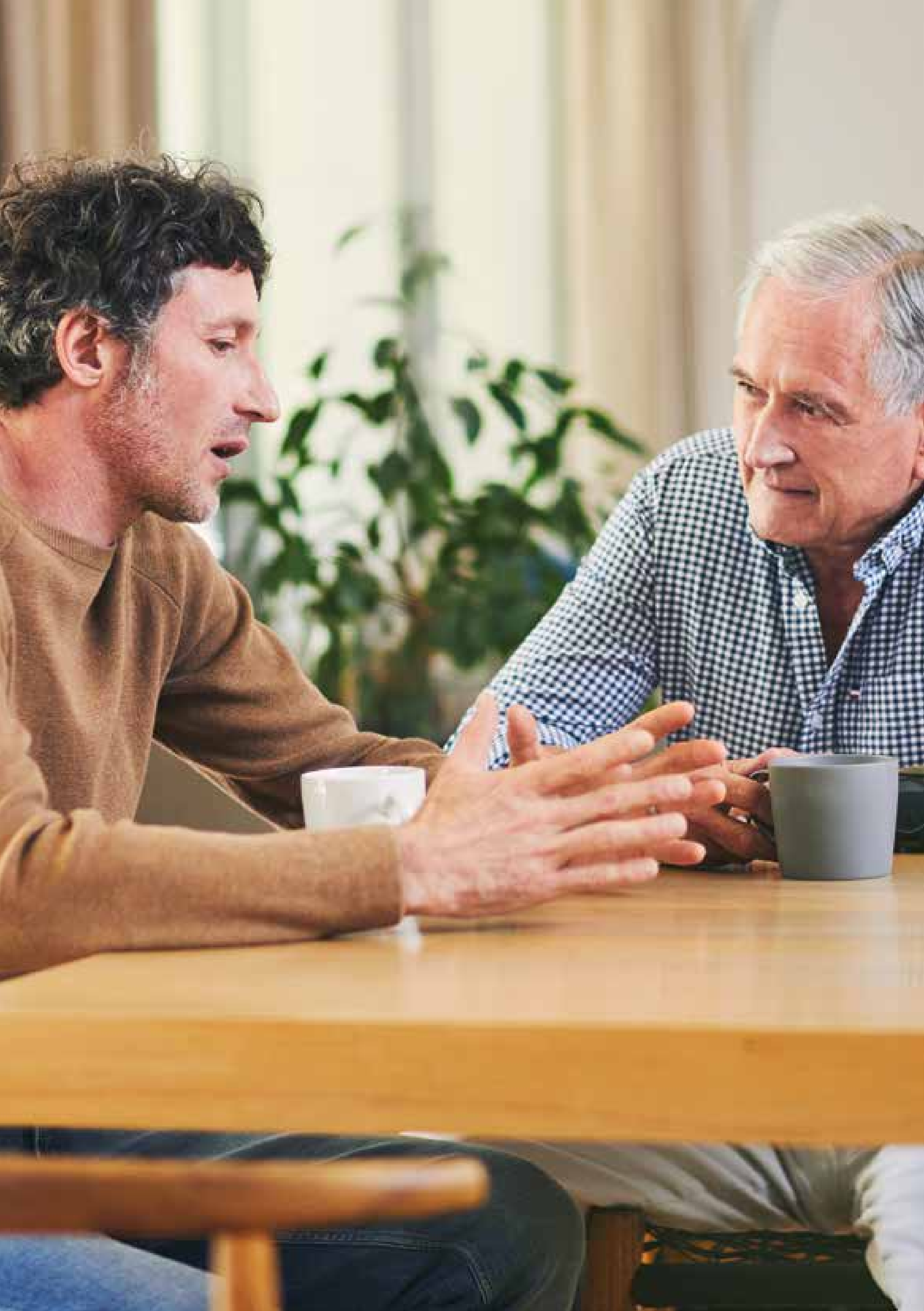
- any new children or grandchildren
- a new partner
- any changes in your finances.

Making an official change to your existing will is called a codicil. If you need to make any major changes, get advice from a solicitor and write a new will.

Our money advisers can give you guidance and information on wills, estate planning and personal finance issues. Contact them on **0808 808 00 00**. But if your will needs updating, it is always a good idea to get help from a solicitor.

We have more information about making a will in our booklets **Your step-by-step guide to making a will** and **Sorting out your financial affairs** (page 76). Citizens Advice (page 82) and Age Scotland (page 89) also provide information and advice on wills.

You can order our booklets and leaflets for free. Visit **be.macmillan.org.uk** or call us on **0808 808 00 00**.



Lasting power of attorney

What is a power of attorney?

A power of attorney is a written legal document. It lets you choose (appoint) someone you trust to make decisions for you, if you become unable to make decisions yourself. The person you appoint is called your attorney.

Who can be an attorney?

Your attorney must be aged over 16 and could be:

- a family member
- your husband, wife, civil partner or partner
- a friend
- a professional, such as a solicitor or accountant.

It is usually a good idea to have more than 1 attorney. You can give them long-term or short-term power of attorney.

What are the types of power of attorney?

In Scotland, there are 3 types of power of attorney:

- Continuing power of attorney is for financial and legal decisions, including paying bills and selling your home. They cannot manage your property or finances after you have died.
- Welfare power of attorney is for health and care decisions, including treatment, care, medication and where you live or are cared for.
- Combined power of attorney combines the first 2. It gives your attorney financial and welfare powers.

Many people choose to make a combined power of attorney. If you appoint more than 1 attorney, you must decide if they will make decisions separately or together.

The power of attorney document includes a certificate that must be signed by a solicitor or medical doctor. This is to confirm that you can make and understand your own decisions. This is called having mental capacity (pages 61 to 63).

How a welfare power of attorney can help

Having a welfare power of attorney can reassure you that someone you trust will make decisions about your health and welfare for you, if you cannot. This should be someone who will:

- understand and respect your wishes
- act in your best interest.

Talk to the person you want to choose about what being an attorney involves, and your wishes for any future care. You may want to make notes about what you discuss, and share them with your attorney. Make sure they understand what is important to you. The law says your attorney must make decisions that will benefit you and are in line with your wishes.

Having an attorney also helps to avoid possible disagreement among family members. It means your healthcare team has a legal duty to consult your attorney if you are no longer able to make a decision for yourself.

If you make an advance directive (living will) your welfare attorney must follow your decisions in the directive – page 38 to 41. But your advance directive has to be up to date, relevant to your situation and known to still reflect your views.

Without a power of attorney, nobody has an automatic right to make decisions on your behalf if you can no longer do so. To act on your behalf, someone would have to apply for a guardianship order through the local Sheriff Court. Find out more at **mygov.scot/guardianship**

Making a power of attorney

You need to be aged over 16 to set up a power of attorney. You can make your own power of attorney document. Some stationery shops sell a specific form. It is a legal document and must be prepared properly, so you might want help from a solicitor. They make sure your wishes are clear and are carried out exactly as you want.

If you do not have a solicitor, you can find one by contacting The Law Society of Scotland (page 83).

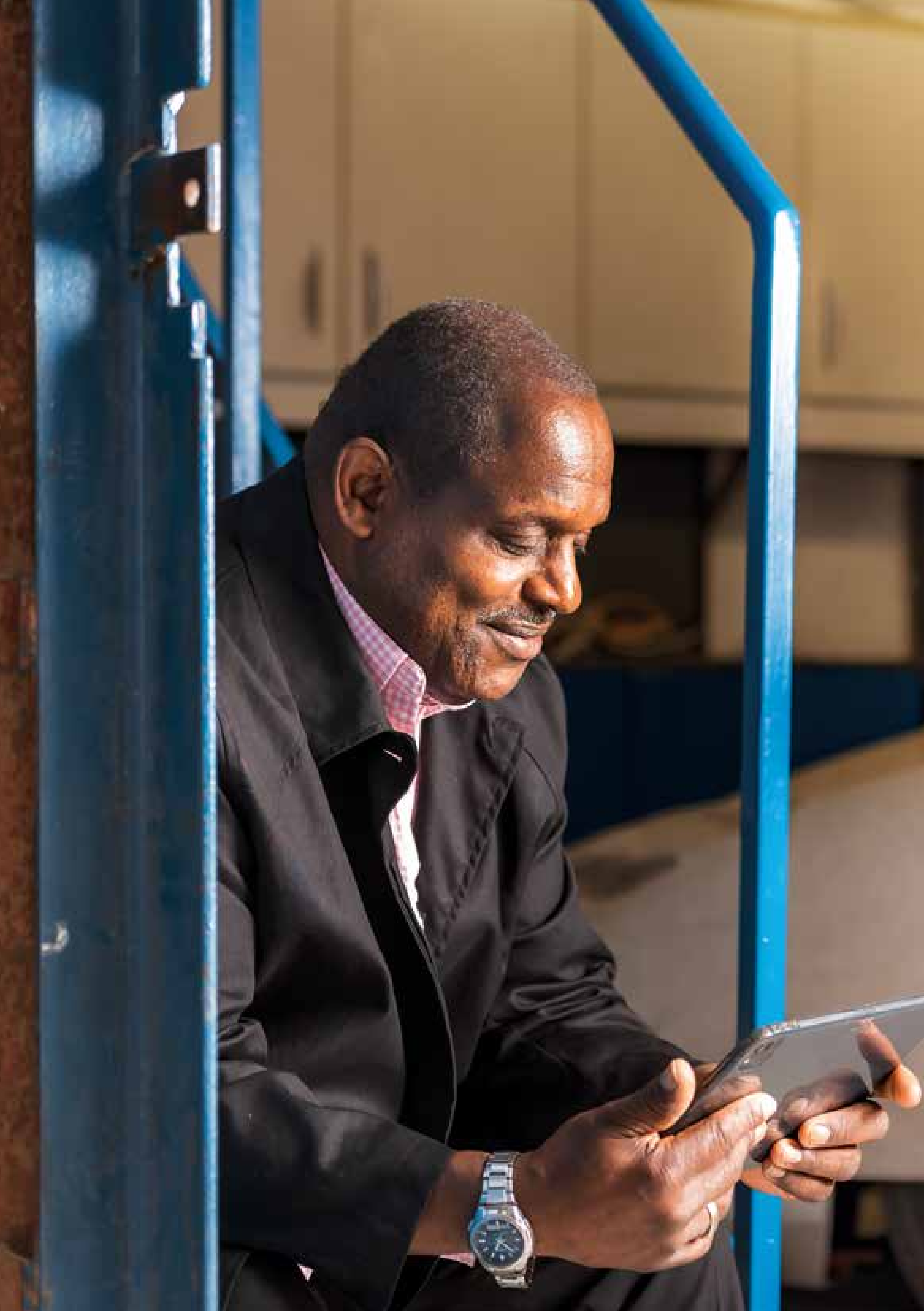
Registering your power of attorney

A power of attorney can only be used when it has been registered with the Office of the Public Guardian (OPG). This can take several weeks.

There is usually a fee to register a power of attorney. If you are on certain benefits, you may not have to pay the fee, or it may be reduced.

To find out more, visit **publicguardian-scotland.gov.uk/power-of-attorney/fees**

If you have made a power of attorney, tell your GP. They can add this to your Key Information Summary (page 15).



Advance directive

What is an advance directive?

An advance directive (or living will) is a written statement of your wishes to refuse certain medical treatments. In England and Wales, it is called an advance decision to refuse treatment (ADRT). We have more information in our booklet **Planning ahead when living with advanced cancer – England and Wales** (page 76).

It is a way of making sure everyone knows what treatments you do not want to have, if you become unable to make decisions on your own (do not have mental capacity). It will only be used if you cannot make or communicate a decision for yourself.

You can make an advance directive if you are aged 16 or over and have mental capacity (pages 61 to 63). Before making it, talk with someone like your cancer doctor, specialist nurse or GP about the decisions you would like to make. They can explain the likely effects of stopping a medical treatment and what your advance directive should include. It is also a good idea to discuss your decisions with close family members or friends, so they understand your wishes.

An advance directive can include the situations in which you wish to refuse the treatment. For example, if:

- you are very ill and you do not want to be given antibiotics for an infection
- you become very unwell after having all possible treatments and you do not want to be kept alive by having a drip or feeding tube
- your condition and quality of life gets worse while you have a feeding tube or drip and you do not want these to continue.

An advance directive can also record whether you want to refuse treatment to re-start your heart and breathing if they have stopped suddenly. This is called cardiopulmonary resuscitation (CPR) – pages 42 to 43.

Your advance directive should be as clear as possible about the:

- treatment you would like to refuse
- situation when you would like your advance directive to apply.

Your advance directive cannot include a request to be given specific treatments, or to have your life ended.

What should be included in an advance directive?

Although you can make an advance directive by speaking to your healthcare team, it is better to write it down. This helps avoid confusion later. If your advance directive states that you refuse treatments that could possibly keep you alive, it must be in writing.

You might also want to contact a solicitor. They can help you to put together an advance directive. They make sure your choices are accurately recorded and meet the legal requirements.

Once you have written your advance directive, it needs to be signed by you and witnessed by someone else. A solicitor can be there while you do this. They usually want to make sure you:

- understand the document
- have not been influenced by another person when writing it.

An advance directive is likely to be treated as legally binding if it is properly prepared. This means your healthcare team will almost certainly follow it. Your healthcare team or solicitor can tell you more about this.

In some cases, it might be better to have a welfare power of attorney instead of, or as well as, an advance directive. You can ask your healthcare team or your solicitor to help you decide which option is best for you.

Who should know about an advance directive?

When you have made your advance directive, it is important to tell the people involved in your care, including your:

- health and social care professionals
- next of kin – usually your closest living family member or members
- other close family members and friends
- welfare power of attorney, if you have one.

You may choose to keep a copy of your advance directive at home. You can also give copies to your:

- welfare power of attorney, if you have one
- GP – you can also ask that your Key Information Summary records that you have an advance directive (page 15)
- specialist nurse at the hospital.

You can ask your health and social care team who else should know about it.

Reviewing your advance directive

You can change your mind and rewrite your advance directive at any time. But this must be clearly recorded. Reviewing it regularly makes sure it is up to date and reflects your current wishes. This is important as your wishes may change if your condition changes.

If you decide to cancel your advance directive, tell your healthcare team and the people close to you.

Cardiopulmonary resuscitation (CPR)

Cardiopulmonary resuscitation (CPR) is a way of trying to restart someone's heart and breathing if they have stopped suddenly.

CPR may be successful in some situations but not in others. Discussing and recording a decision about CPR means it is more likely to be given only when it is useful. And it is less likely to be given to someone who:

- does not want to be resuscitated
- is too ill or frail to benefit from CPR.

This is why you may be asked about CPR. It can leave some people in much poorer health if they have other health conditions. CPR is not suitable for someone who has very advanced cancer and is in their final days. It is very unlikely to work and can cause harm and distress.

Your doctor or nurse may talk to you about this decision. They may give you information about what the best treatment is likely to be if your heart and breathing stop. They may ask what you would prefer.

This can be hard and upsetting to talk about. But it helps your healthcare team understand what is important to you. In an emergency, you may not be able to explain what you want to happen. If they already know what is important to you, this can help them make the best decisions for you. The final decision will be made by a senior doctor. They should also involve your family, unless you have asked them not to.

You may not want to be involved in making decisions about CPR. Your healthcare team will ask you how much information you want.

We have more detailed information about cardiopulmonary resuscitation for people with cancer on our website. Visit **macmillan.org.uk/cpr**

Where is the decision recorded?

You may hear doctors or nurses talk about a 'do not attempt CPR' (DNA CPR) decision or form. They may also use a document called ReSPECT. For more information visit **resus.org.uk/respect**

These are written documents that record the decision not to give CPR if someone's heart or breathing stops. The information is stored in your patient record. It is also usually written on a standard form that you keep with you.

If you go into hospital, take the form with you. If you are at home or in a care home, keep it somewhere safe where it can easily be found. This means emergency services will know your wishes if your Key Information Summary is not available or up to date (page 15).

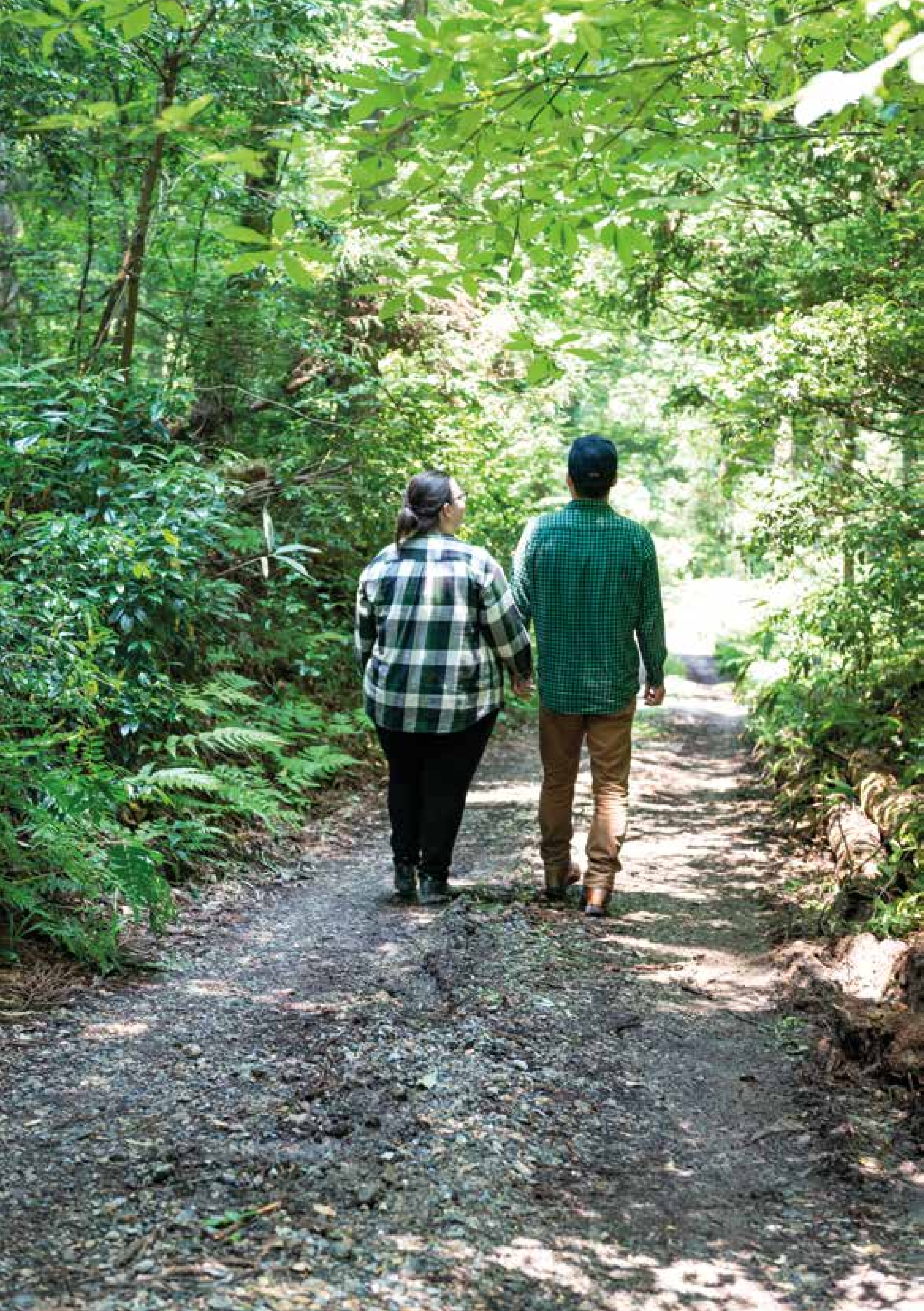
A CPR decision can also be included in an advance directive.

Other helpful information

NHS Scotland has 2 information leaflets you might find useful:

- Decisions about cardiopulmonary resuscitation – visit **nhsinform.scot** and search for 'CPR'
- MyACP – visit **ihub.scot/myacp**

You can also ask someone in your healthcare team for a copy of these leaflets.



Understanding organ and tissue donation

Organ and tissue donation

Only a few people die in a situation where they can donate their organs. Donors are usually people who have died in a hospital intensive care unit or emergency department.

If you have active cancer, you cannot donate organs. You can still usually donate tissue, such as your cornea (the clear tissue at the front of the eye). If the cancer was treated a few years ago and has not come back, it may be possible to donate your organs.

The process of organ or tissue donation is complex. Your healthcare team will be able to give you more information about your situation.

Scotland has an opt-out system for organ and tissue donation. If you have not opted out when you die, the law allows for the donation of certain organs and tissue for transplantation. But there are checks in the system to make sure donation would not go ahead against your views. Your faith, beliefs and culture will always be respected.

Only you can decide if you wish to donate organs or tissue. But it is important to talk to your family or friends about what you want. They can then follow your wishes.

You should record your donation decision on the Organ Donation Scotland Register. You can change your donation decision or preferences at any time at **organdonation.scot**

Donating your body for medical research

Some people want to donate their body to help with medical training or research.

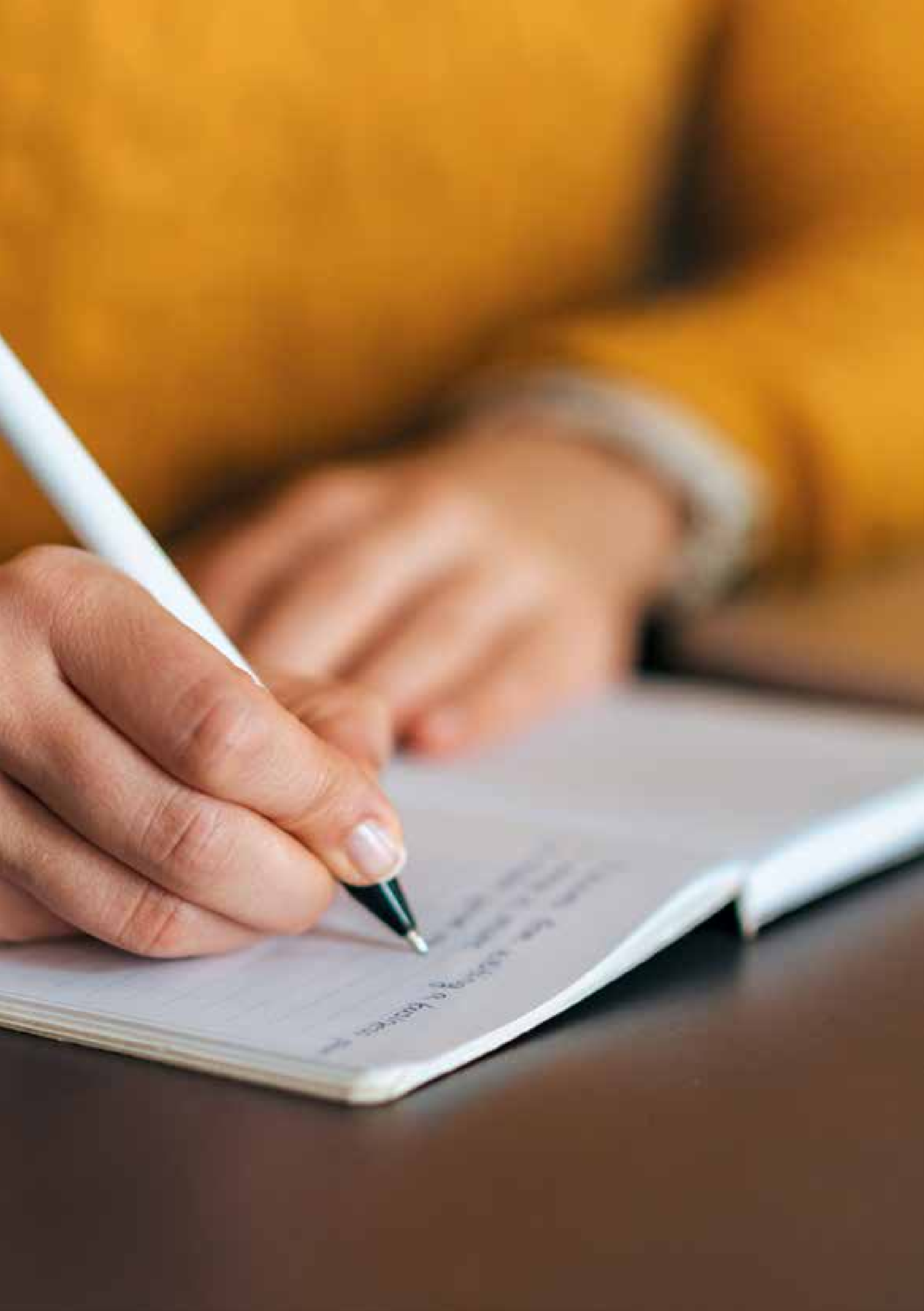
If you are thinking about donating your body, talk about it with your close family or friends so they know what you want. You should also tell your healthcare team. Make sure this is included in any advance care planning document so your wishes can be followed (pages 16 to 21).

In Scotland, you must contact a local university in advance. It is usually best to contact the university closest to you as it reduces transport costs. They will answer any questions and give you the legal papers to sign.

Not everyone who wishes to donate their body for teaching or research will be able to. This may be due to medical reasons. Or the university may not be able to take your body at the time. So you need to make other plans in case the donation is not accepted.

You cannot ask for your body to be used only for research into a certain disease.

The Human Tissue Authority or local university anatomy department can give you more information about donating your body for medical research (page 83). You can also get information from **gov.scot/publications/body-donation-in-scotland-guidance**



Planning a funeral

Funeral planning

Funerals allow family, friends and others to pay their respects to the person who has died. They can help people to:

- express their grief
- acknowledge the person's death
- celebrate the person's life
- say goodbye.

Talking to your family or friends about your funeral can help them celebrate your life in the way you would have wanted. Knowing they are following your wishes can help them avoid worry and possible disagreements.

There are different funeral traditions across different religions, faiths and cultures. You can talk to your religious or faith leader about your funeral and wishes.

Funerals can be expensive, so planning ahead can be helpful. The Scottish Government has a useful booklet called Planning your own funeral which includes a form to set out your wishes. Visit **gov.scot** and search for 'funeral planning'.

What might be included in a funeral plan

Here are some suggestions of what you might want to include in a funeral plan.

A burial or cremation

A burial is usually in a cemetery or other designated burial place. It is also possible to be buried in places such as a garden, on a property you own, or in a place you love. The Natural Death Centre has more information and details about natural burial grounds, including woodlands (page 85).

A cremation happens in a crematorium. A service can also be held there. You can talk to your family or friends about what you want to be done with your ashes. For example, you may choose to have them scattered in a garden of remembrance, a graveyard or a favourite place.

You can scatter ashes anywhere in Scotland if you have the permission of the landowner. People may choose to keep some of the ashes. For example, they can be kept in a piece of jewellery or a small pot.

The funeral service or ceremony

Funeral services can be religious or non-religious (secular).

Some people may decide not to have a funeral service. Or they may only want a simple committal service. This is a brief service at the graveside or in the crematorium.

Not having a funeral service

Some people decide to have a cremation or burial without a funeral. This is called a direct cremation or burial. The body goes to be cremated or buried straightaway without a service. This is a much cheaper option, and there are different reasons you may choose this.

There could still be some form of farewell or remembrance ceremony of your choice. Or family or friends could arrange a ceremony later on. Some people may want the ashes present for this.

A religious or non-religious service

If you have a spiritual or religious faith, you might know who you want to lead your funeral. Even if you do not have a faith, you can contact a local minister, priest, imam, rabbi or other religious leader to talk about your funeral.

Some people choose a multi-faith funeral to reflect their life or the life of their loved one. It could include any combination of religious music, readings, prayers, or traditions. The funeral could be led by 1 or more religious leaders.

A humanist service does not include acts of worship and does not mention any faith. The service focuses on celebrating the life of the person who has died. The Humanist Society Scotland can give you more information about humanist funerals and memorials (page 83).

Other things to include

You may also want to think about whether you want:

- specific music, songs or readings
- flowers
- donations to be given to specific charities
- your body to be dressed in clothes that are significant to you, such as a military uniform.

> **"I love prosecco and parties, that's just who I am. I've planned where I want my funeral to be, who I want to be there, how I want it to be organised. There will be lots of prosecco and a jazz band."**
>
> Alejandra, diagnosed with breast cancer

Recording your funeral plans

You can write your plans for your funeral in your will, or in another document. Leave them in a safe place that your family or friends know about. You can also write your funeral wishes in your advance care plan (pages 16 to 21).

Dying Matters and the National Association of Funeral Directors (NAFD) have produced a form you can use to record your funeral wishes. Download it from **nafd.org.uk/funeral-advice/planning-ahead**

If you do not want to write down your plans, it ca be helpful to tell your family or friends your wishes.

> **“My mum arranged her funeral with me and outlined exactly everything she wanted. She wanted people to wear the brightest colours.”**
>
> Kevin, whose mother was diagnosed with stomach cancer

Paying for a funeral

Funerals can be expensive. If you are able to, you may want to pay for your funeral in advance with a funeral pre-payment plan.

You can find out more from:

- your local funeral director
- the National Association of Funeral Directors (NAFD) – page 84
- the National Society of Allied and Independent Funeral Directors (SAIF) – page 84.

Services that are included in the price can vary, so make sure you know what you are paying for. The Financial Conduct Authority (FCA) regulates firms that provide and arrange pre-paid funeral plans. If you have a funeral plan, or are thinking about buying a new one, check the list of funeral plan providers on the FCA website first. Visit **fca.org.uk/consumers/funeral-plans/providers-list**

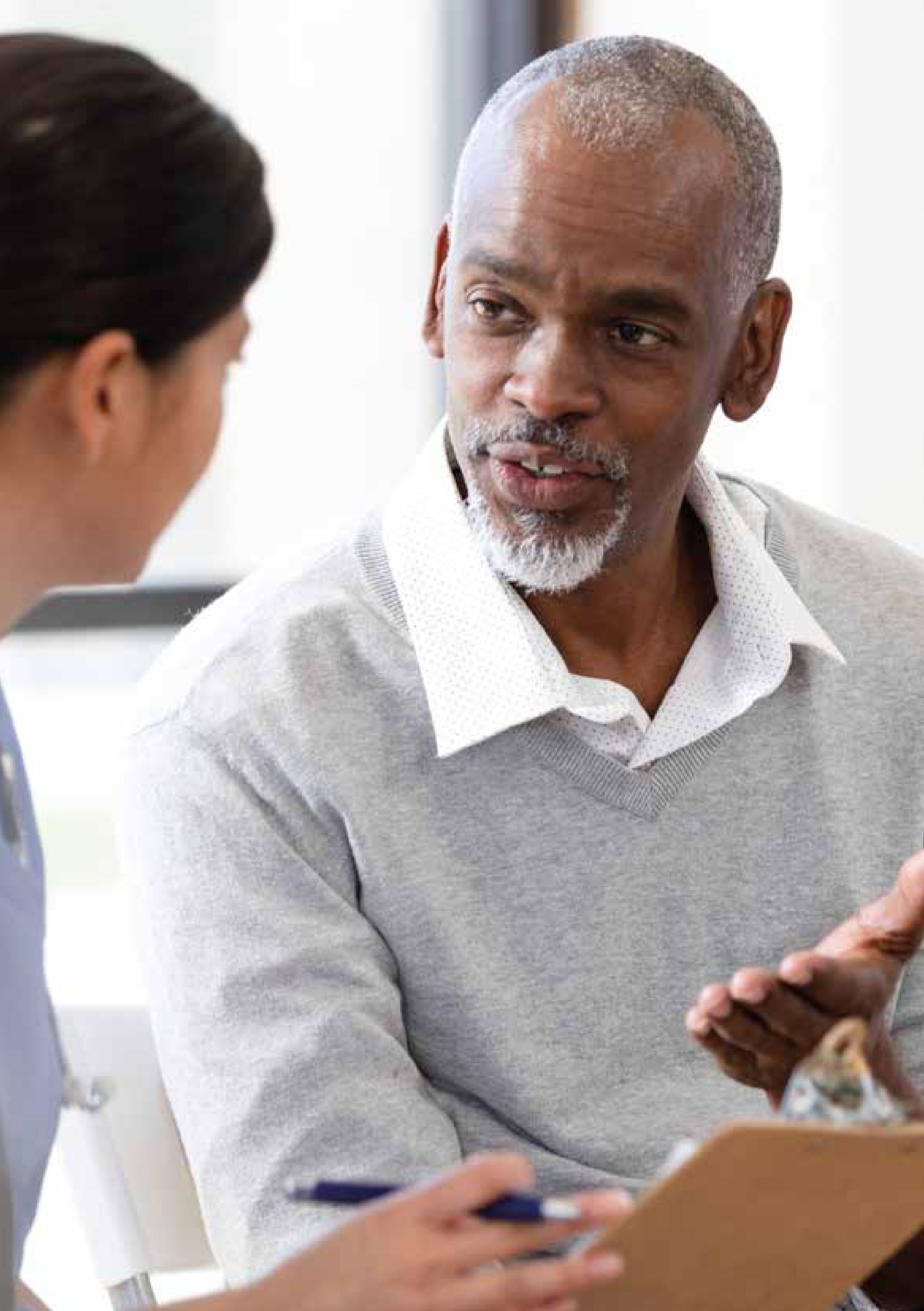
Help with funeral costs

If the person organising the funeral is on low income and getting certain benefits, you may get help with funeral costs from the government. You can find more information at **gov.uk/funeral-payments**

Or Macmillan's money advisers can tell you more (pages 78 to 79).

Charities that can help with funeral costs include:

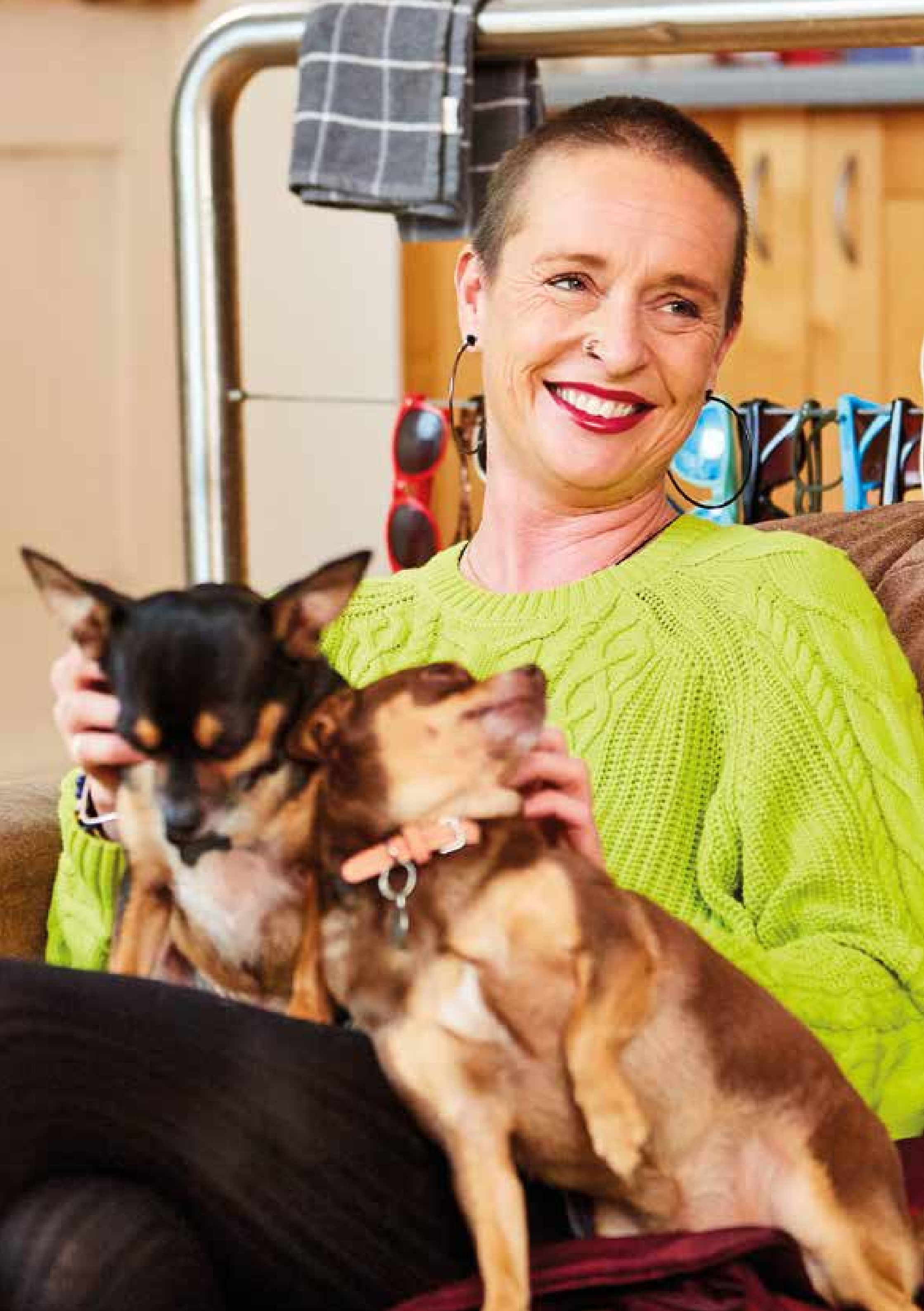
- Turn2us (page 86)
- Down to Earth Quaker Social Action (page 82).



Choosing a funeral director

If you use a funeral director, you may choose one you have used before. Members of the National Association of Funeral Directors (NAFD) or National Society of Allied and Independent Funeral Directors (SAIF) are regularly monitored to make sure their standards are high (page 84). You can contact the NAFD to find out whether a funeral director is a member.

You do not need to use a funeral director. But it can be hard to arrange a funeral at such a distressing time. The Natural Death Centre has information about arranging a funeral without a funeral director (page 85).



Managing your care if you have not planned ahead

If you do not make a plan for your future care

You might want to know how decisions are made, if you are unable to make them, and you have not:

- planned ahead for any medical care
- made a power of attorney (pages 32 to 35)
- made an advance directive (pages 38 to 43).

Who will make decisions about your care?

Usually, you, your family, carers or close friends will be involved in making everyday decisions about your care. But sometimes, an important or difficult decision may need to be made about your medical care or treatment in an emergency.

If you are not able to make and communicate your own decisions, a senior healthcare professional usually decides about your care in an emergency situation.

The Adults with Incapacity (Scotland) Act 2000 gives healthcare professionals a list of things to think about when making their decision – pages 62 to 63. They must do their best to make sure any treatment will be of most benefit to you. They need to think about:

- your wishes, if your healthcare professionals know them or can find them out
- what the people who know you well think you would prefer.

In a non-emergency situation, they still have to think about the same things. But first a doctor checks whether you have the mental capacity to make a decision for yourself. If you are unable to make the decision, the doctor completes a certificate to record this.

They then make the treatment decision for you. If possible, they will talk to people close to you about what your wishes are likely to be.

What is mental capacity?

Mental capacity means being able to make decisions for yourself. In Scotland, the Adults with Incapacity (Scotland) Act 2000 protects people who cannot make a decision for themselves. It means you can plan ahead for this situation (pages 7 to 11).

It allows other trusted people to make decisions for you. This might include decisions about your medical treatment or managing your finances and property.

The Adults with Incapacity (Scotland) Act 2000

The Adults with Incapacity (Scotland) Act 2000 applies to people aged 16 and over. It says a person is unable to make a decision for themselves (does not have capacity) if they cannot:

- act on decisions
- make decisions
- communicate decisions
- understand decisions
- remember making decisions.

The act explains:

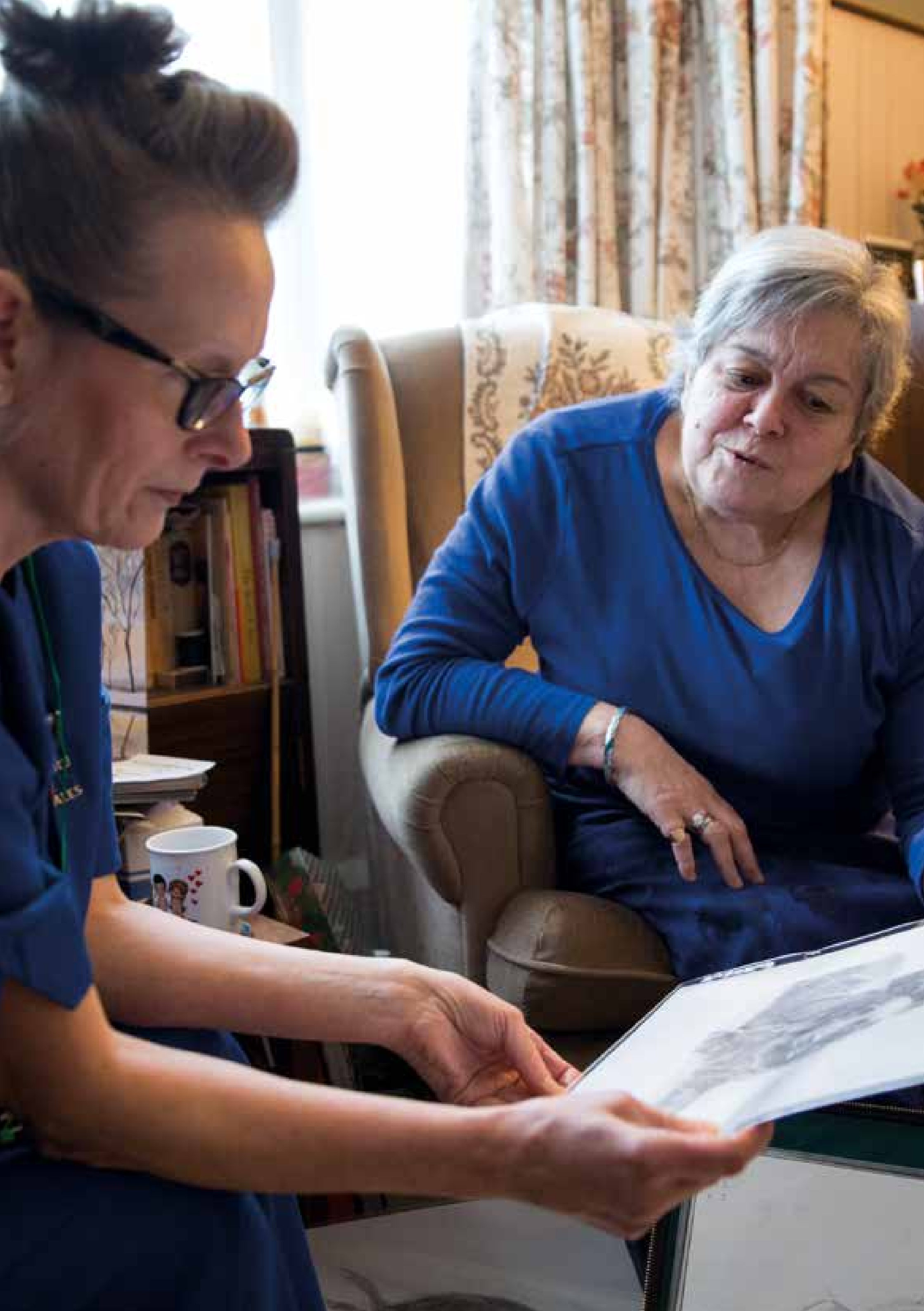
- who can make decisions for them
- in which situations they can make decisions
- the process to follow when making decisions.

Different conditions of the brain and nervous system might affect a person's mental capacity or ability to communicate. This can include dementia, brain injuries, some mental health conditions or being unconscious.

Having one of these conditions does not always mean that you do not have the mental capacity to make certain decisions. Your ability to make decisions can change as your health changes.

If it is not clear whether someone has mental capacity, doctors do a number of tests. They may also get advice from a specialist. This may take a while because it is important to understand how mental capacity changes over time. If the decision is not urgent and you do not have capacity, it may be delayed. This is to see if your condition improves enough for you to be involved in decision-making.

Healthcare professionals will support you and those around you to make decisions about your care and wishes. Even if you do not have capacity to make decisions, your healthcare team try to understand your wishes and involve you as much as possible.



Forms and documents

What's important to me document

This document can help you think about the future. It gives you the chance to talk about and write down your preferences and priorities for care at the end of your life. You do not need to do this unless you want to.

After you have made your notes, you should discuss them with your health and social care professionals. You might have your wishes recorded in a different document.

This document is not for recording specific medical treatments you do not want to have in the future. If you decide that you want to refuse any medical treatments in advance, you should discuss this with your doctors. They will tell you how to record this decision.

What should I include in my What's important to me document?

You should include anything about your future care 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 to happen
- where you would like to be cared for at the end of your life.

Should I talk to other people about this document?

You may find it helpful to talk about your future care with family members or friends. Sometimes this can be emotional, and people might disagree with your decisions. It can also be helpful to talk about any needs your family or friends may have if they will be caring for you. Your health and social care professionals (your doctor, nurse or social worker) can support you and the people close to you with these decisions.

People who should be asked about my care if I become unable to make decisions

If you are unable to make decisions for yourself, is there someone you would like to be asked about your care? If so, please provide their contact details.

My preferences and priorities

This is where you should give details about your health information. For example, what your healthcare team and family or friends need to know about you to give you the best care and treatment.

You may have preferences and priorities for your future care. You could think about what is important to you. Is there anything you would like, or anything you do not want?

Further information

There is an A4 copy of the What's important to me document in the pocket at the back of this booklet. You can also download extra copies from **be.macmillan.org.uk** – search for 'What's important to me'.

There is space on the Your notes and questions pages at the back of this booklet to write any further information you need or questions you might want to ask your health or social care professionals (pages 90 to 92).

What's important to me document

My information	**What's important to me?**
Name	
Address	
Telephone number	
Name of person who I would like to make decisions for me if I am unable to.	
Relationship to me	
Their contact details – address and telephone number	
Health information – what my healthcare team and family or friends need to know about me to give me the best care and treatment.	
Preferences and priorities for my future care – what is important to me? Is there anything I would like, or anything I do not want?	
Signature and date	

Your checklist for planning ahead

You may want to use the following checklist to help you plan your future care. Keep this with any other documents about planning ahead.

1. Your planning ahead checklist

Question		More information
Have you made a will?	☐	Where is it? Who knows where it is?
Have you written down your wishes for your future care?	☐	Where are they kept? Who knows where they are?
Have you made a power of attorney?	☐	Where is your power of attorney document? Who is your attorney?

Question		More information
Have you written an advance directive?	☐	Where is it? Who have you talked to about it?
Have you thought about organ and tissue donation? Have you registered and recorded your decision to be a donor (opt in), or not to be a donor (opt out)?	☐	You can also update a previous decision. Who have you told?
Have you made a funeral plan?	☐	Where is your plan? Who knows about your wishes?

2. Your contacts checklist

Question		More information
Have you spoken to health and social care professionals about your wishes?	☐	Who have you spoken to? What are their contact details?
Have you asked your GP to create a Key Information Summary (KIS)?	☐	Who is your GP? What are their contact details?
Have you spoken to a family member or friend about your wishes?	☐	Who have you spoken to? What are their contact details?
Have you involved a solicitor in your plans? For example, have you involved them in your will or power of attorney?	☐	Who is your solicitor? What are their contact details?
Have you appointed someone to be the executor of your will?	☐	Who is it? What are their contact details?

3. Your important information checklist

It can help for family members or friends to know where to find important documents and information. Make sure you only tell people you trust. It is best not to write on this checklist exactly where these documents are, or your passwords.

Information or document	**Does someone know where it is kept?**	**Who knows where it is?**
Birth certificate	☐	
Marriage or civil partnership certificate	☐	
Bank account details	☐	
NI (National Insurance) number	☐	
Life insurance policy details	☐	
Home insurance policy details	☐	
Car insurance policy details	☐	
Important passwords	☐	

Further information

About our information

We provide expert, up-to-date information about cancer. And all our information is free for everyone.

Order what you need

You may want to order more booklets or leaflets like this one. Visit **be.macmillan.org.uk** or call us on **0808 808 00 00**.

We have booklets about different cancer types, treatments and side effects. We also have information about work, financial issues, diet, life after cancer treatment and information for carers, family and friends.

Online information

All our information is also available online at **macmillan.org.uk/information-and-support** You can also find videos featuring stories from people affected by cancer, and information from health and social care professionals.

Other formats

We also provide information in different languages and formats, including:

- audiobooks
- Braille
- British Sign Language
- easy read booklets
- eBooks
- large print
- translations.

Find out more at **macmillan.org.uk/otherformats**

If you would like us to produce information in a different format for you, email us at **cancerinformationteam@macmillan.org.uk** or call us on **0808 808 00 00**.

The language we use

We want everyone affected by cancer to feel our information is written for them.

We want our information to be as clear as possible. To do this, we try to:

- use plain English
- explain medical words
- use short sentences
- use illustrations to explain text
- structure the information clearly
- make sure important points are clear.

We use gender-inclusive language and talk to our readers as 'you' so that everyone feels included. Where clinically necessary we use the terms 'men' and 'women' or 'male' and 'female'. For example, we do so when talking about parts of the body or mentioning statistics or research about who is affected.

You can read more about how we produce our information at **macmillan.org.uk/ourinfo**

Other ways we can help you

At Macmillan, we know how a cancer diagnosis can affect everything, and we are here to support you.

Talk to us

If you or someone you know is affected by cancer, talking about how you feel and sharing your concerns can really help.

Macmillan Support Line

Our support line is made up of specialist teams who can help you with:

- emotional and practical support if you or someone you know has been diagnosed with cancer
- clinical information from our nurses about things like diagnosis and treatments from our nurse specialists
- welfare rights advice, for information about benefits and general money worries.

To contact any of our teams, call the Macmillan Support Line for free on **0808 808 00 00**. Or visit **macmillan.org.uk/support**-line to chat online and see the options and opening times.

You can also email us, or use the Macmillan Chat Service via our website. You can use the chat service to ask our advisers about anything that is worrying you. Tell them what you would like to talk about so they can direct your chat to the right person. Click on the 'Chat to us' button, which appears on pages across the website. Or go to **macmillan.org.uk/talktous**

If you would like to talk to someone in a language other than English, we also offer an interpreter service for our Macmillan Support Line. Call **0808 808 00 00** and say, in English, the language you want to use. Or send us a web chat message saying you would like an interpreter. Let us know the language you need and we'll arrange for an interpreter to contact you.

Macmillan Information and Support Centres

Our information and support centres are based in hospitals, libraries and mobile centres. Visit one to get the information you need and speak with someone face to face. If you would like a private chat, most centres have a room where you can speak with someone confidentially.

Find your nearest centre at **macmillan.org.uk/informationcentres** or call us on **0808 808 00 00**.

Help with money worries

Having cancer can bring extra costs such as hospital parking, travel fares and higher heating bills. If you have been affected in this way, we can help. Please note the opening times may vary by service.

Financial advice

Our expert money advisers on the Macmillan Support Line can help you deal with money worries and recommend other useful organisations that can help.

Help accessing benefits

You can speak to our money advisers for more information. Call us free on **0808 808 00 00**. Visit **macmillan.org.uk/financialsupport** for more information about benefits.

Grants

You may be able to get some financial help from other charities, for example one-off grants. For further information, contact the Macmillan Support Line.

Help with work and cancer

Whether you are an employee, a carer, an employer or are self-employed, we can provide support and information to help you manage cancer at work. Visit **macmillan.org.uk/work**

Talk to others

No one knows more about the impact cancer can have on your life than those who have been through it themselves. That is why we help bring people together in their communities and online.

Support groups

Whether you are someone living with cancer or a carer, family member or friend, we can help you find support in your local area, so you can speak face to face with people who understand. Find out about support groups in your area by calling us or by visiting **macmillan.org.uk/selfhelpandsupport**

Online Community

Thousands of people use our Online Community to make friends, blog about their experiences and join groups to meet other people going through the same things. You can access it any time of day or night. Share your experiences, ask questions, or just read through people's posts at **macmillan.org.uk/community**

You can also use our Ask an Expert service on the Online Community. You can ask a money adviser, cancer information nurse or an information and support advisor any questions you have.

Macmillan healthcare professionals

Our nurses, doctors and other health and social care professionals give expert care and support to individuals and their families. Call us or ask your GP, consultant, district nurse or hospital ward sister if there are any Macmillan professionals near you.

Other useful organisations

There are lots of other organisations that can give you information or support. Details correct at time of printing.

Planning ahead support organisations

Citizens Advice Scotland

Provides advice on a variety of issues including financial, legal, housing and employment issues. Use its online webchat or find details for your local office by contacting:
Helpline **0800 028 1456**
www.cas.org.uk

Down to Earth Quaker Social Action

Tel **020 8983 5055**
www.quakersocialaction.org.uk
Offers practical support with funeral services.

Good Life, Good Death, Good Grief

www.goodlifedeathgrief.org.uk
Aims to raise awareness of ways of dealing with death, dying and bereavement and promote community involvement.

Health Improvement Scotland

www.healthcareimprovementscotland.org
Produces a range of resources to enable the people of Scotland to experience the best quality health and social care.

Hospice UK

Tel **0207 520 8200**
www.hospiceuk.org
Provides information about living with advanced illness. Also provides free booklets and a directory of hospice services in the UK.

Human Tissue Authority

www.hta.gov.uk
Provides information about tissue and organ donation.

Humanist Society Scotland

Tel **0300 302 0682**
www.humanism.scot
Can help provide humanist ceremonies.

The Law Society of Scotland

Tel **0131 226 7411**
www.lawscot.org.uk/
Represents solicitors in Scotland and can provide details of local solicitors.

Marie Curie

Helpline **0800 090 2309**
www.mariecurie.org.uk
Provides practical information and support on all aspects of life with terminal illness, dying and bereavement. Marie Curie nurses provide free end-of-life care to people in their own homes or in Marie Curie hospices.

Mental Welfare Commission for Scotland

Helpline **0800 389 6809**
www.mwcscot.org.uk
Supports and promotes decision-making for people with mental impairment or disability who would like to plan for their future.

National Association of Funeral Directors (NAFD)

Tel **0121 711 1343**
www.nafd.org.uk
Monitors standards of funeral directors in the UK and gives advice on what to do when someone dies. Also advises on arranging funerals and has information on what you should expect from a funeral director.

National Society of Allied and Independent Funeral Directors (SAIF)

Tel **0345 230 6777**
www.saif.org.uk
An organisation of independent funeral directors across the UK that offer different funeral options. Ensures a high standard of funerals is provided by its members and provides advice about funerals and what to do when someone dies.

Natural Death Centre

Tel **0196 271 2690**
www.naturaldeath.org.uk
Supports those dying at home and their carers. Also helps people to arrange inexpensive, and environmentally-friendly funerals.

NHS Inform

www.nhsinform.scot/about-nhs-inform
Provides the people in Scotland with accurate and relevant information to help them make informed decisions about their own health and the health of the people they care for.

Office of the Public Guardian (Scotland)

Tel **0132 467 8300**
www.publicguardian-scotland.gov.uk
Protects and safeguards the property and finances of people living in Scotland who may not have the mental capacity to make certain decisions for themselves.

Organ Donation Scotland

Tel **0300 123 2323**
www.organdonation.scot
Provides information about organ and tissue donation.

Turn2us

Helpline **0808 802 2000**
www.turn2us.org.uk
Runs a free, confidential and independent helpline, which provides help with benefits, debt, housing and legal issues. Has an online tool to search for funds that may be able to give you a grant. Also offers some grants themselves to people in financial hardship.

General cancer support organisations

Macmillan Cancer Voices

www.macmillan.org.uk/cancervoices
A UK-wide network that enables people who have or have had cancer, and those close to them such as family and carers, to speak out about their experience of cancer.

Maggie's

Tel **0300 123 1801**
www.maggies.org
Has a network of centres in many locations throughout the UK. Provides free information about cancer and financial benefits. Also offers emotional and social support to people with cancer, their family, and friends.

Penny Brohn UK

Helpline **0303 3000 118**
www.pennybrohn.org.uk
Offers physical, emotional and spiritual support across the UK, using complementary therapies and self-help techniques.

Tenovus

Helpline **0808 808 1010**
www.tenovuscancercare.org.uk
Aims to help everyone in the UK get equal access to cancer treatment and support. Funds research and provides support such as mobile cancer support units, a free helpline, benefits advice and an online 'Ask the nurse' service.

Support for carers

Carers Trust

Tel **0300 772 9600**
www.carers.org
Provides support, information, advice and services for people caring at home for a family member or friend. You can find details for UK offices and search for local support on the website.

Carers UK

Helpline **0808 808 7777**
www.carersuk.org
Offers information and support to carers across the UK. Has an online forum and can put people in contact with local support groups.

Bereavement support

Cruse Bereavement Care

Helpline **0808 808 1677**
www.cruse.org.uk
Provides bereavement support to anyone who needs it across the UK. You can find your local branch on the website.

Counselling

British Association for Counselling and Psychotherapy (BACP)

Tel **0145 588 3300**
www.bacp.co.uk
Promotes awareness of counselling and signposts people to appropriate services across the UK. You can also search for a qualified counsellor on the 'How to find a therapist' page.

Emotional and mental health support

Mind

Helpline **0300 123 3393**
www.mind.org.uk
Provides information, advice and support to anyone with a mental health problem through its helpline and website.

Samaritans

Helpline **116 123**
Email **jo@samaritans.org**
www.samaritans.org
Provides confidential and non-judgemental emotional support, 24 hours a day, 365 days a year, for people experiencing feelings of distress or despair.

Support for older people

Age Scotland

Helpline **0800 124 4222**
www.ageuk.org.uk/scotland
Provides information and advice for older people in Scotland via the

website and advice line. Also publishes impartial and informative fact sheets and advice guides.

LGBT-specific support

LGBT Foundation

Tel **0345 330 3030**
www.lgbt.foundation
Provides a range of services to the LGBT community, including a helpline, email advice and counselling. The website has information on various topics including sexual health, relationships, mental health, community groups and events.

Your notes and questions

Your notes and questions

Disclaimer

We make every effort to ensure that the information we provide is accurate and up to date but it should not be relied upon as a substitute for specialist professional advice tailored to your situation. So far as is permitted by law, Macmillan does not accept liability in relation to the use of any information contained in this publication, or third-party information or websites included or referred to in it. Some photos are of models.

Thanks

This booklet has been written, revised and edited by Macmillan Cancer Support's Cancer Information Development team. It has been approved by our Senior Medical Editor, Dr Viv Lucas, Consultant in Palliative Care.

With thanks to: Dr Mairi Finlay, Specialist Registrar Palliative Care; Marion Gaffney, Macmillan Nurse Consultant for Palliative and End of Life Care; Dr Beth Goundry, Specialist Doctor in Palliative Medicine; Susanne Gray, Clinical Nurse Specialist Palliative Symptom Control; Dr Lucy Hetherington, Doctor in Palliative Medicine; Dr Ellie Salter, Specialty Doctor in General and Palliative Medicine; Jacqueline Scott, Clinical Nurse Specialist in Palliative Care; and Kirsteen Shaw, Clinical Nurse Specialist Palliative Symptom Control. Thanks also to Ross Anderson, Solicitor and Fiona Wilson, Solicitor, whose comments on related information contributed to this content.

Thanks to the people affected by cancer who reviewed this edition, and those who shared their stories.

We welcome feedback on our information. If you have any, please contact **informationproductionteam@macmillan.org.uk**

Sources

Below is a sample of the sources used in our information on planning ahead for your future care in Scotland. If you would like more information about the sources we use, please contact us at **informationproductionteam@macmillan.org.uk**

Healthcare Improvement Scotland. Anticipatory Care Planning in Scotland: Supporting people to plan ahead and discuss their wishes for future care. 2020. Available from: www.healthcareimprovementscotland.org [accessed May 2023].

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Can you do something to help?

We hope this booklet has been useful to you. It is just one of our many publications that are available free to anyone affected by cancer. They are produced by our cancer information specialists who, along with our nurses, benefits advisers, campaigners and volunteers, are part of the Macmillan team. When people are facing the toughest fight of their lives, we are here to support them every step of the way.

We want to make sure no one has to go through cancer alone, so we need more people to help us. When the time is right for you, here are some ways in which you can become a part of our team.

5 ways you can help someone with cancer

1. **Share your cancer experience**
   Support people living with cancer by telling your story, online, in the media or face to face.

2. **Campaign for change**
   We need your help to make sure everyone gets the right support. Take an action, big or small, for better cancer care.

3. **Help someone in your community**
   A lift to an appointment. Help with the shopping.
   Or just a cup of tea and a chat. Could you lend a hand?

4. **Raise money**
   Whatever you like doing you can raise money to help.
   Take part in one of our events or create your own.

5. **Give money**
   Big or small, every penny helps.
   To make a one-off donation see over.

Please fill in your personal details

Mr/Mrs/Miss/Other

Name

Surname

Address

Postcode

Phone

Email

Please accept my gift of £
(Please delete as appropriate)

I enclose a cheque / postal order / Charity Voucher made payable to Macmillan Cancer Support
OR debit my:
Visa / MasterCard / CAF Charity Card / Switch / Maestro

Card number
☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Valid from ☐☐ ☐☐

Expiry date ☐☐ ☐☐

Issue no ☐☐☐

Security number ☐☐☐

Signature

Date / /

Do not let the taxman keep your money

Do you pay tax? If so, your gift will be worth 25% more to us – at no extra cost to you. All you have to do is tick the box below, and the tax office will give 25p for every pound you give.

☐ I am a UK tax payer and I would like Macmillan Cancer Support to treat all donations I make or have made to Macmillan Cancer Support in the last 4 years as Gift Aid donations, until I notify you otherwise.

I understand that if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year it is my responsibility to pay any difference. I understand Macmillan Cancer Support will reclaim 25p of tax on every £1 that I give.

Macmillan Cancer Support and our trading companies would like to hold your details in order to contact you about our fundraising, campaigning and services for people affected by cancer. If you would prefer us not to use your details in this way please tick this box. ☐

In order to carry out our work we may need to pass your details to agents or partners who act on our behalf.

If you would rather donate online go to **macmillan.org.uk/donate**

Registered with FUNDRAISING REGULATOR

Please cut out this form and return it in an envelope (no stamp required) to: Supporter Donations, Freepost RUCY-XGCA-XTHU, Macmillan Cancer Support, PO Box 791, York House, York YO1 0NJ

This booklet is about ways you can plan ahead for your future care if you live in Scotland. Planning for your future care is also called anticipatory care planning or advance care planning. It is important in case you ever become unable to make decisions for yourself.

This booklet can help you think about what is important to you and put your plans into action. It also suggests ways to talk about your wishes with the people close to you, and with health and social care professionals.

At Macmillan we know cancer can disrupt your whole life. We'll do whatever it takes to help everyone living with cancer in the UK get the support they need right now, and transform cancer care for the future.

For information, support or just someone to talk to, call **0808 808 00 00** or visit **macmillan.org.uk**

Would you prefer to speak to us in another language? Interpreters are available. Please tell us in English the language you would like to use. Are you deaf or hard of hearing? Call us using Relay UK on **18001 0808 808 00 00**, or use the Relay UK app.

Need information in different languages or formats? We produce information in audio, interactive PDFs, easy read, Braille, large print and translations. To order these, visit **macmillan.org.uk/otherformats** or call our support line.

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