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Tough topics

You'd prefer to avoid the whole subject, but these are the end-of-life planning issues you and your loved ones need to know, writes KELLEY KEEHN

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Forever Young

As an Elder Planning Counselor and faculty member of the Canadian Initiative for Elder Planning Studies, I can bill myself as a trained expert in end-of-life planning issues.

As a human being from an extremely large family that's aging rapidly, I suppose I'm reluctantly a personal expert too.

Death is always a sensitive issue. I've attended seven funerals this year alone and close to a hundred in my lifetime. Each one seems to get more difficult and I, like you, know that end-of-life planning issues are hard. Although death is inevitable, it's never easy. Couple that with the ever-changing family dynamics today -- second, perhaps even third marriages, step- and grandchildren -- and wanting the best for all.

When planning for the end, how can we make it less taxing and ensure the wishes of our loved ones are honoured? The following checklist can assist:

- Dialogue. It's not a simple task to discuss these wishes during times of near death or in post mortem situations. However, a conversation about whether a family member would prefer cremation to burial or their wish or lack thereof for resuscitation is important. If it's too difficult to bring up these sensitive issues yourself, ask a financial or legal professional or pastor to assist.
- Financial and legal documents. Locate all documents such as the will, powers of attorney and living will. Keep copies at home and originals in a safety-deposit box. Consider creating a binder with important documents, listing contact information for all professionals and health-care attendants in the front. Seek legal, tax and financial counsel from a trained professional.
- CPR directives. Most sensitive of all end-of-life issues is that of resuscitation. A physician's duty is to treat. The Code of Ethics of the Canadian Medical Association puts it very succinctly: "In providing medical service, do not discriminate against any patient on such grounds as age ... physical or mental disability." Should your loved one not wish CPR to be administered, they and you must make these wishes known to your family doctor, hospital and long-term care facility. If your loved one lives at home, ensure the "do not resuscitate" directive is on your fridge at all times. Should 911 be called in your absence, the first duty of the responders is to treat as well.
- Post mortem planning. Arranging for funeral services after death is stressful and often filled with uncertainty. Consider pre-paid funeral services. Before a loved one has passed away, we can think more clearly and with less emotion.

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