

CWSV MAP Outline

The Master Aging Plan (MAP) outline attached is offered to help have the conversations about how we would like to age. Such things as where would I like to live, what is my financial situation, how is my health, and much more that effect one's life plans. This is not a process that needs or should be done all at once. Thinking about the different areas for a while, discussing them with your spouse, a friend or someone else can be helpful in putting together your plan. Whatever plan is finally put into writing would benefit from periodic reviews to add and change things as you and your circumstances change.

We recommend the following four items be done as part of the planning process and reviewed periodically.

1. Complete File of Life, post it on the refrigerator, updated as needed
2. Complete Critical Documents List with instructions and let key people know where to find the list (perhaps put a note in your File of Life as to where someone can find this list)
3. Complete Advanced Directives and let key people know where to find them (See Advanced Directives document)
4. Create a written document which will answer questions regarding your plans as you age; your personal MAP. Revisit this planning every year or so, or when a significant event happens. This plan will help those who will be involved in your life as you age to make decisions and support your decisions. (See attached for possible questions to consider while developing your MAP)

To help with your planning here are some of the suggested areas to cover. The bullet points in each area are merely suggestions of things to cover. This should be more of a conversation than Q&A. Take your time. All things do not need to be covered at once.

The general questions for a Master Aging Plan are:

- ✓ What are my circumstances presently?
 - ✓ What do I see for the future?
 - ✓ What if I am thrown a curveball and my future suddenly changes, then what?
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- Housing – what is your housing preference, what factors are most important to consider in deciding where to live, and what is good enough
 - Think about where you presently live and consider:
 - do you see yourself in the same place in the next 3 – 5 years?
 - what is your plan for any modifications you might need to make - have you assessed your home for safely aging in place?
 - what is your plan for regular maintenance and upkeep?
 - what help do you need now or expect you might need in the near future and how would you get it?
 - Considering moving or planning to move:
 - What do you need and what do you want?
 - What alternatives to your present housing have you or are you considering?
 - What are the must haves and those it would be nice to have as to the home and the neighborhood?
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- Finances – what is your financial situation, what factors are most important to you regarding financial security
 - Might your financial situation change in the next 3 – 5 years? And if so, what do you expect the changes to be and how do you plan to meet them?
 - Do you have the necessary documents for someone of your choosing to manage your finances for you, if you are unable to make those decisions or become incapacitated?
 - Is your budget working for you now? If not, what do you need to change to make it work? How might you go about doing this?
 - Other things to possibly consider:

- What if you had an unexpected expense? Do you have the resources to meet one and if so, up to how much? What is your fallback position for a financial disaster?
 - What if you need either temporary or longer term assistance up to 24 hour care? Could you pay for this and for how long? If not, what alternatives might you have?
- Physical and Emotional Health and Wellness/Medical – What is your present health, optimal health and what is good enough?
 - How would you rate your physical and emotional health and wellness presently; any chronic conditions?
 - Are you satisfied with your present state or do you want or feel a need to improve? If so, what steps can you take to improve your health and wellbeing?
 - What limitations in physical activity, if any, are you experiencing now, how do you manage the limitations, and do you see a path to improving your physical activity or lessening the limitations?
 - What do you plan to do if your limitations become greater?
 - What do you see as the plan if you develop limitations you don't presently have?
 - Do you need to change anything as to your healthcare providers? (did you post provider information in your File of Life)
 - Do you have adequate health coverage, prescription coverage, dental, vision? If not, what is the plan?
 - What would you like to have happen if your health deteriorates either over time or suddenly?
 - How would good care look to you? At home? In a facility?
 - What if you are unable to have your wishes regarding care? What is good enough?
 - Are you a care giver? If so, can you do this alone or do you need help? If not, what would you do if you needed to become a care giver?
 - If you have a partner or spouse, how will you handle the death or incapacitation of that individual?
- Independence – How much independence do you have and what is good enough? (This is an area that impacts each of the other topics in this plan and covers a wide range of things including but not limited to housing, transportation, activities, and relationships. Below are a few things to consider but it is not an all-inclusive list.)
 - Are you presently able to drive without limitations and have access to a vehicle?
 - What would you do if you were unable to continue to drive safely?

- What if you can no longer afford your car or the car insurance?
 - Are you able to live at home independently?
 - What would you do if you are temporarily no longer able to cook meals, get groceries, dress yourself, bathe yourself, or other daily living skills? What if it is permanent?
 - What would you do if you needed some medical/nursing care/assistance? Temporary? Minor issue, e.g. wound care, medication management? Permanently in need?
 - What would you like to do if you develop dementia and are unable to maintain your independence?
 - What if you needed longer term care? Where and how would you like to receive the long term care? What if your first choice is not available, what are the alternatives you can see and how would you rate them?
 - What if your spouse/partner/significant other or another with whom you have a close relationship ~~with~~ needed long term care? What do you see yourself as being able to do if they requested your help? What would you see as helpful alternatives or support necessary for their long-term care?
- Relationships/Socialization – family, friends, pets. What do you have now, what is optimal, and what is good enough?
- How are your present relationships and interactions working for you?
 - Are there any gaps in your relationships you would like to fill and how might you go about doing this?
 - What do you do for fun and to socialize at present?
 - Is it enough?
 - If not, what can you do to increase your fun and/or socializing
 - Is there anything new or different you would like to do?
 - Have you talked with your key person or people about what you would like to see happen should you become ill/incapacitated or as death approaches?
 - Did you share your thoughts from this plan? If not, when and how will you do that?
 - If you are presently living with someone as a partner/spouse/significant other or other family member/friend what, if anything, would you need to do, change, etc. if that person was no longer able to live with you?
 - What alternatives are available to you?
 - Do you own a pet?

- If yes, what would happen if you could no longer care for the pet? Temporarily? Permanently?
- How would you cope with the loss of the pet?
- End of Life – decisions about your care
 - When the time comes what is most important to you?
 - What are your fears/worries?
 - What would you consider important for your quality of life?
 - Pain free?
 - Able to recognize people?
 - Able to think clearly
 - Able to communicate
 - Able to eat and drink
 - Able to control bodily functions
 - Being able to live in my own house
 - What tradeoffs are you willing to make?
 - What about prognosis? Treatment?
 - If you are in a coma? Kept alive? Stop treatment?
 - What is good enough?
 - Would you want to use hospice services?
 - At home?
 - In a facility?
 - In the hospital
 - Would you consider palliative care?
 - Are you or do you want to be an organ donor?
 - Other thoughts about planning for end of life.
- Are there any other topics or bumps in the road you would like to consider?