

Older Persons' Tool

Before an appointment

- O What does a good day look like for me
- In an average day, what brings me happiness
- O What are some of the things that matter most to me
- O What are some of the things I want to do in my life
- O How confident am I that I can solve problems I might face
- O What do I want from my health care
- O Do I have an advanced care plan
- Have I got a list of the things I do to stay healthy and well, including my medications
- O Have I written down any questions I want answered
- O I will have someone with me if that's helpful to me



What Matters

- What is my biggest concern today
- Has this stopped me from doing the things I want to do



Medication

- O What medicines do I take and why
- Am I reluctant to take any medicines
- O When were my medicines last reviewed
- Has there been any changes in my life since that review



Mobility

- Do I have any trouble doing things around the house, garden, or neighbourhood
- O Do I have people or aids to support me
- What do I do for exercise



Mental Wellbeing

- O Have I lost weight or not felt like eating
- O Have I had my vision and hearing tested this year
- Have I had any problems with my bladder or bowel (wee or poo)
- Is there anything or anyone that gets in my way of being who I want to be
 - Do I speak with people regularly
- Are there any clubs or activities I am interested
- o in being part of
- Am I worried about my concentration, memory or thinking
- Have I been feeling down or out of sorts lately, or not wanting to get out of bed

At the end of this session

- Have I got an updated, or written, legible list of actions to help me live well
- O Do I know what to do next
- O Do I know what my health provider is going to do next, and by when
- O Do I know how to get information or help