

NASAA Senior Issues Committee “Spotlight on Seniors” Panel On Protecting Vulnerable Adults and Understanding Cognitive Decline

Starting the Conversation: What Do You Say to Clients?

Do's

- Start early (but not immediately) in your relationship: “You hired us to help you plan; Part of that involves planning for death and possible disability before death.”
- Start with the general: “We need to help you plan for sudden death, but also for gradual decline.”
- Get more specific: “Let’s talk about the *what-ifs*: What if there’s a sudden emergency? (e.g., heart attack, stroke). What if there is a long illness with a gradual decline? (e.g., heart failure, dementia).”
- Ask: “Have you had any *end-of-life wishes* discussions with loved ones? Who?”
- Ask: “Have you completed any end-of-life paperwork with your wishes for medical treatment and care? (e.g., living wills)”
- Ask: “Have you identified loved ones who you’d want to handle your financial affairs or for your medical treatment if you cannot? (e.g., healthcare power of attorney, durable power of attorney)”
- Ask: “Do you have any current health concerns? If so, what are they? How should we help you handle those concerns now and in the future?”
- Ask: “Do you have any concerns about changes in your thinking or memory? If so, what are they? How should we handle those concerns now and in the future?”
- Ask: “Do any of your loved ones have concerns for you regarding your health, thinking, or memory? If so, what are they? How should we handle those concerns now and in the future?”
- Ask: “If we develop concerns for your medical health, or regarding your thinking or memory, how would you want us to handle that?”

Don'ts

- Don't wait to have the above conversations until a concern arises – you are hired to help plan.
- Don't assume that a client has considered any of the above.
- Don't speak over the client with a loved one, even when there are cognitive concerns.