

Planning Ahead: a guide

Whatever stage of adult life you have reached, it is important to think about planning ahead for your future care, later life, end of life and your estate after death.

Wills

It's important that you make a will, even if you don't think that you have much money or many possessions. If you die without making a will it can cause problems for the people you leave behind.

You don't have to use a solicitor to make your will, but unless you are familiar with legal terms and requirements, it is easy to make a mistake. You can write your own Simple Will using a free template online or at some book and stationery shops. This can be done if your wishes are simple, you don't have any complex finances or family situations and you want to leave everything to your partner and children.

If you and your partner have the same wishes for what happens when you die, you can make a Mirror Will. These are two will documents, one for each person, but the contents of each will mirror the other one.

[Free wills month](#) offer members of the public aged 55 and over the opportunity to have their simple Wills written or updated free of charge. It is held in October each year

For more complex situations you may wish to speak to a professional about Discretionary Trust wills, Flexible Life Interest Trust Wills, Property Trust wills

Read more about [Wills](#)

Trusts

A trust is a legal arrangement where you give cash, property or investments to someone else so they can look after them for the benefit of a third person, such as grandchildren.

Setting up a trust is possible if you have assets like property or savings. This is done by making a legal document that allows someone else to manage your assets according to your wishes. If you're thinking of setting one up you should talk to a legal professional or solicitor to understand more and find out your trust options.

Read more about [Trusts](#)

Mental Capacity and planning

Mental capacity

Mental capacity is your ability to make decisions. Some people have difficulties making some decisions, all or some of the time. This could be due to a learning disability, dementia, a mental health problem, a brain injury or a stroke.

The Mental Capacity Act 2005 explains when people may lack capacity, what happens if they lack capacity, who should be involved in that decision if so.

As there is a chance you could lose mental capacity in the future, planning ahead now can make sure your wishes and preferences are carried out.

Read more on [making decisions and mental capacity](#) or [managing someone else's affairs](#)

Lasting Power of Attorney (LPA)

Whether you're married, in a civil partnership, have a partner or have a next of kin; you might have thought they can handle your bank account, pensions, and make decisions about your healthcare if you're not able to. But that's not always true. A Lasting Power of Attorney allows you to legally appoint someone to make decisions on your behalf should you ever need them to. There are 2 types of LPA:

An LPA for financial decisions which cover buying and selling property, paying a mortgage, investing money, paying bills, arranging repairs to property. You can decide if you want this LPA to be used immediately or only once you have lost mental capacity.

An LPA for health and care decisions which covers care decisions such as your medical care, where you should live, what you should eat, who you should have contact with, what kind of social activities you should take part in, as well as permission to make decisions about life saving treatments. This LPA can only be used once you have lost mental capacity.

You can create an LPA online or you can print out the forms and complete them by hand. It takes up to 20 weeks to make an LPA if there are no mistakes in the application, so completing one as soon as you're ready is a good idea.

You can read more about this in our section on [Power of Attorney](#).

Deputyship

Deputyship is when someone is appointed to legally make decisions on your behalf. It is made when you no longer have mental capacity to make decisions and you have not made a valid LPA (or previously an Enduring Power of Attorney). A deputyship is the only option when you have lost mental capacity to make an LPA

There are 2 types of deputyship

A Personal Welfare deputyship can be used to make decisions about a person's care and medical treatment, if they can no longer do this themselves. Often they are not needed because care and treatment decisions can usually be made on a case-by-case basis by the professionals providing the care.

A Property and Affairs deputyship is used to make decisions about a person's property and financial affairs, if they can no longer do this for themselves.

Deputyship is more expensive than an LPA, does not give you the choice in who your deputy is, takes longer to set up than an LPA and (in the case of a Personal Welfare deputyship) can be difficult to apply for.

A deputy has to provide a deputyship report to the Court of Protection every year. This gives the court information about the decisions that you have made on behalf of the person. Deputies need to keep records of anything related to medical care, financial accounts, and manage a separate bank account for the person.

Appointeeship

An appointeeship allows someone to manage any benefits or entitlements you may get if you have lost mental capacity to do so yourself. It is only for this and does not allow control of other finances.

Advanced Care planning and living arrangements

Advanced statements

An advance statement is a record of your wishes and preferences for your care in the future. This could include:

- how you would like to be looked after
- where you would like to be looked after in the future and in your final days
- any spiritual or religious beliefs you would like taken into account
- who you want to spend time with
- who your doctors or nurses should talk to if you don't have capacity to make decisions
- the name of the person you have appointed to make decisions on your behalf if you're unable to make them (your lasting Power of Attorney)
- how you would like practical matters dealt with, such as the care of a pet
- what you would like to happen to your body after you die.
- your favourite foods, hobbies, music and interests

Advance statements are not legally binding. However if someone makes a decision for you in the future, they should consider any advance statement you have made. You should also tell all the people involved in your care where the statement is kept.

Please note* an advance statement is different from an advance decision to refuse treatment

Advance decision to refuse treatment

An advance decision (to refuse treatment) is a legal document that sets out in advance your decision about medical treatments you don't want to receive in certain situations. Sometimes this is called a 'living will'. Health professionals must follow an advance decision if you're unable to make the decision about the treatment for yourself (this could be due to lacking mental capacity or being in an unconscious state). You should include:

You should include:

- which treatments you don't want
- what circumstances you want to refuse treatment
- if you want to refuse treatment that could potentially keep you alive (known as "life sustaining treatment" or "life prolonging treatment"), such as a mechanical ventilator to help you breathe.
- If you want a DNACPR (do not attempt cardio pulmonary resuscitation) decision if your heart stops or you stop breathing.

Speak to a doctor or nurse who knows your medical history. They can help you write down which treatments you wish to refuse and in what circumstances. You'll need to make sure the decision is written as a document, signed by you, signed by a witness (if you want to refuse life-sustaining treatment) and shared with health and social care professionals

Read more about [Advance decisions](#)

Emergency health care plans

An **Emergency Health Care Plan (EHCP)** or **Recommended Summary Plan for Emergency Care and Treatment (ReSPECT)** may be used across a range of health and care settings, including your own home, an ambulance, a care home, a hospice or a hospital. It is a written plan of important information such as who to contact, medication and health issues. It makes communication easier between services and gives a care plan for nurses or care staff to follow (especially in settings such as residential care) in the event of a healthcare emergency.

You can watch the video '[Joes ReSPECT journey](#)' [a video explanation of how it works here](#)

Emergency Carers card scheme (British Red cross) provides a similar emergency plan if you care for another person and you are unable to care for them in an emergency situation. Read more: [Emergency carers card scheme](#)

The bottle in the fridge scheme helps you store your personal and medical information in your fridge door (chosen as fridges contents often survive house fires). Read more: [Bottle in the Fridge – emergency information scheme](#)

Planning future living arrangements

You may choose to stay living in your home with support, adding some technology and making home adaptations.

Read more about [Home adaptations, equipment and aids](#)

However you may need to consider other living arrangements over time such as:

- Moving to a more appropriate home. – This may be about downsizing the size of your home and garden to make it more manageable, moving to housing to be closer to local amenities and in a safe friendly community; or moving to property that is accessible and can be adapted for mobility or disability.
- sheltered accommodation – Sheltered housing is a group of self-contained flats or bungalows with 1-2 bedrooms you can buy or rent. You have support from a warden and an alarm system, and communal areas where you can choose to socialise with other people living there. Most sheltered housing for rent is provided by councils and housing associations.
- assisted living or extra care housing – a type of housing similar to sheltered accommodation that allows you to live independently, but also helps with tasks such as washing, dressing, going to the toilet or taking medication. If you need a higher level of support, extra care housing could provide that and is regulated by the Care Quality Commission (CQC).
- moving in with family – This may be for beliefs about generational living and family care duties or practical reasons such as shared cost of living and socialising. There are some important points to consider that might have a negative impact on your financial, social and care situations. Read more [about moving in with relatives](#)
- residential care homes – Care homes are staffed 24 hours a day, provide personal care services, meals and social activities. Some care homes provide nursing care or specialist health services. Care homes are an option if you need a higher level of support than can be provided at home. Read more about [choosing a care home](#)

Read more about [considerations when you move home](#) or [Housing for older people](#)

Assisted suicide and euthanasia

Euthanasia (deliberately ending a person's life to stop suffering.) and assisted suicide (helping another person to kill themselves) are illegal under English law.

Assisted suicide and in most cases Euthanasia is legal in countries such as The Netherlands, Switzerland, Canada, Belgium and Luxembourg. Some UK citizens choose to travel to Dignitas assisted dying clinics in Switzerland to carry out their wishes legally.

Difficult conversations

Discussing planning ahead with others

While it can be difficult and feel awkward, talking with a loved one about care wishes, funeral plans and finances is important. If it is difficult to talk openly you could start by

- Writing down some of your wishes, these can be read by others if starting a conversation is hard.
- Ask them to attend an estate planning or financial planning meeting or webinar that considers wills, funeral plans, power of attorney or similar topics

- Attend a [death café](#). These are free events held together to eat cake, drink tea and discuss death in order to raise awareness and reduce stigma about death.

There are trained professionals who can help you with planning ahead, end of life, companionship and emotional support such as [End of Life UK Doula's](#).

Recording memories

a family's history can be lost or incomplete when memories aren't shared and stories are forgotten as they pass from one generation to the next. Recording and writing down things that have value to you and your family now and in the future can be a great gift to give and as a legacy after death. You could think about:

- Researching and creating a Family tree
 - Create personalised family photo albums
 - Doing some [Life story Work](#) (using a [template](#))
 - Creating a legacy video – a filmed informal interview or life story with a parent or grandparent together with family photos, documents, maps and other memorabilia.
 - Write a family recipe book
 - Using a private digital network or App such as the [Peggi App](#)
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Talking about dying

When you're nearing the end of your life, it's important to talk to the people you care about and tell them how you feel. These might be your partner, parents, siblings, children, grandchildren, friends or colleagues.

If it's difficult to have these conversations in person, you can write a letter, make a video, or put together a memory box and note to share with them. If you get too emotional while discussing, you can take a break and resume the conversation later or across several conversations.

you can also talk to someone like a chaplain, doctor, nurse, or counsellor who can help you prepare for these conversations.

Once you have told a trusted person you may wish to ask them to spread the word to others, or hold a meeting with others to discuss.

Hospice UK have a useful article [How to start a conversation about death and dying](#)

Culturally and Spiritually appropriate care

People like to receive support and care in an environment that reflects their culture, traditions and religion, and where health and social care workers, as well as support staff, understand and respect them.

Writing down some information about your cultural values, beliefs, religious needs, etc. can become very important in case you later lose mental capacity, the ability to communicate or

friends, family or others may not be there to talk on your behalf.

Healthcare professionals should be made aware of and be responsive to diverse cultural, spiritual and religious beliefs about health, care and dying. You may want to consider:

- Values on formal care. If you have beliefs that you shouldn't go into a care setting and family will be taking care of you.
- Any traditional healing practices, complementary or alternative medical treatments you are having or want to have. This may need to be discussed alongside NHS treatment plans.
- What chaplaincy services are available that you may wish to use in a hospital.
- Requests about spiritual services before or after an operation
- How health information is communicated. If there are gender roles, family roles or cultural values about discussing sensitive topics with certain people, these should be mentioned.
- Dietary and food preferences. All health providers should try to meet your dietary needs, however the importance of mealtimes, fasting, social meals or the meaning of food to somebody may not be as well understood.
- If same sex staff is needed (however this may not always be possible).
- If you'd like to take part in activities; or have media you can read, listen or watch that are in another language or reflect your culture and community while in care.
- Hygiene and dressing rules based on faith or culture. If your beliefs require cleaning the body after certain activities, jewellery cannot be removed or avoiding use of the left hand for example, this needs to be considered in your care plan.
- Requests to have special items, books or other objects at your bedside or in your possession while in hospital or care.
- Any concerns about drugs or treatments as well as when to reduce or stop treatments. This may be due to animal products, beliefs in palliative care, blood transfusions, spiritual preparation for death or other values.
- Important beliefs on the care of the dying. Such as who should or shouldn't be there, considerations on touch before and at point of death, where you want to die or any other important belief or value.
- Important beliefs on how the body is treated after death

Read more about [Palliative care](#)

If needed, you should include professional interpreters when talking about your health condition, treatment, and getting services. Sometimes, family members can also help with simple everyday interpretation. However family may be uncomfortable or unable to talk and translate some topics.

Find out more about [Interpreting and translation](#)

Funerals and post-life plans

Planning a funeral

You might want to put your preferences in writing to let your relatives or friends know the type of funeral you would like. Information could include:

- Whether you want a religious or humanist service

- whether you want to be buried, cremated or an alternative
- any hymns, songs, music, flowers, donations you would prefer
- who to contact following your death

Eco-friendly and natural burials are alternatives to traditional funerals. Options include using nature-friendly materials for coffins, tree pod burials or bio-degradable cremation urns.

If you want to pay for your own funeral instead of leaving it to your family and friends, you can use a pre-paid funeral plan. You pay a lump sum or monthly amount towards your funeral, there are many companies offering this service however all should be registered with the funeral planning authority.

If you're on a low income and are struggling to pay for a funeral you're arranging, you may be able to get some help from Newcastle City Council.

Find out more about [arranging a funeral](#)

Digital Legacy

Any accounts, online storage or records where your information is shared on the internet should be considered when planning ahead. Now more of our important information and personal possessions are digital, this may include:

- Email
- social media
- documents, photo or media on a device or cloud storage
- online shopping accounts
- TV, film and media streaming or gaming accounts
- digital stocks, shares and cryptocurrencies
- online payment accounts such as Paypal.

Companies have different rules about what happens to your account when you die and whether someone else can have access. You could securely write down your account details and passwords and leave these with someone you trust, however not all companies allow someone else to legally access your accounts.

Some services allow you to give someone you trust access to some or parts of your account after you die, this is called a 'digital executor' however this must be done in advance on each account.

You could add instructions about your social media and online accounts in your will. However it may be best to add these in a separate letter often known as a 'digital will' or 'social media will' rather than in the formal Will. This is because:

- the Will and its contents might be shared with others or become public information after your death so account details could be seen by others.
- Some online companies rules or terms of service mean that these instructions from the will cant be done

A separate digital will isn't legally binding, but it can help your friends and family know what to do and is a written record of your preferences.

Social Media

Unless it has been written in a will or someone acts on behalf of a deceased person, their social media accounts will not simply close when someone dies. Requests to delete the account of a person who has died need to be made to the social media company.

If you don't feel comfortable deleting a loved one's online profile, you could memorialise their profile(s). This makes their profile a space where friends, family and well-wishers can share memories and tributes. Someone will need to manage the memorialised profile and will need to have a secure password to access it. Facebook, Instagram, and LinkedIn have the option to do this.

Online memorial or tribute pages

An online memorial or tribute page is a website for remembering a deceased person's life. The page is a space where you can share memories, thoughts and stories with family and friends. Some memorial pages offer extra features such as:

- Creating an online funeral notice (shareable via email or social media, with information and map directions).
 - An online book of condolences where people can write their memories of a person
 - A way to collect fundraising donations for a charity or project that was important to the person
 - Creating a virtual candle vigil or memorial garden
 - Memorial media such as photos, videos, music
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Digital Memories

It can be a good idea to think ahead about photos, videos, documents, writing and other valued possessions that could be shared digitally after someone has died. Saving these in a secure place that family, friends and others can access could provide comfort, help with remembrance and limit disagreements about who holds possession of these. They could be printed, stored on storage devices such as USB drives, photo cards, a cloud storage account or an online photo or social media account.

Read more about digital legacies on [Digital Legacy Association](#)

Organ donation and donating your body to science

When you die you can donate your body, brain or tissue to a medical school or research establishment.

You may want to donate your body to science:

- as it can become an important resource for training healthcare professionals.
- As it can be used for medical research (for conditions, diseases and genetic sampling).

If you wish to donate your body to science, you should make your wishes known in writing (and witnessed) before you die, and inform your next of kin. You will also need to complete a consent form, which you can get from your local medical school.

Find out more about [Donating your body to science](#)

What happens when someone dies

When someone dies there are many practical issues to complete. If you are the person who was closest to them, a lot of the responsibility may fall to you, which can cause stress and confusion at a difficult time.

When someone dies at home, the first step is to call the GP who will normally visit the house and (if the death was expected), issue a certificate giving the cause of death. If you don't know their GP then you should call an ambulance. When someone dies in hospital or a care home then the body will be kept in the hospital mortuary until their next of kin or appointed executor can make arrangements for taking the body and personal possessions away. A doctor will also need to issue a medical certificate giving the cause of death.

If someone dies abroad their death must be registered under that country's laws, as well as be reported to the British Consul (who may be able to register the death in the U.K. as well).

When someone dies the death needs registering at the Registrar of Births, Deaths and Marriages at the Register Office. This is important as it is the formal record of their death, usually a death should be registered within 5 days. It is a criminal offence not to register a death.

Find out more about [What to do when someone dies](#)

Bereavement support

Bereavement and grief is very personal and how our loved ones may deal with it differs. You may want to think ahead about spiritual, religious, community, peer or professional support for those who will be grieving.

Find out more about [Bereavement and grief](#)

*Please note – The information on this website is for general guidance on your rights and responsibilities and is not legal advice. If you need more details on your rights, or legal advice or about what action to take, please contact an adviser or solicitor.

Useful information and resources

[Independent Age](#) have a national telephone helpline for advice on care, benefits, getting help at home and adapting your home. They can arrange a follow up appointment for more detailed discussions

[The Lifebook](#) from Age UK is a place to record where important personal information, location of documents and possessions, financial account details, how to access them and more.

[All LPA forms and guidance](#) at GOV.UK

[All Deputyship forms and guidance](#) at GOV.UK

[A basic guide to Trusts](#) from Moneyhelper.org.uk

[Housing options guide](#) from Age UK

[Emergency Healthcare Plan form](#) from NHS England

[Easy read guide to EHCP forms](#) by Inclusion North

[DNACPR form](#) from NHS England

[Life Story Work template](#) from Dementia UK

[A guide to cultural and spiritual awareness of patients](#) by Royal College of Nursing

[Instagram Help Centre](#) for a deceased person account

[LinkedIn Help](#) for a deceased person account

[Facebook Help Centre](#) for a deceased person account

[Google / Youtube help centre](#) for a deceased person account

[Social Media Will template](#) from digital legacy association

[Much Loved](#) offer a free online tribute page and free digital funeral notice

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Useful Organisations

Age UK Gateshead in Newcastle

Email: advice@ageukgateshead.org.uk

Website: <https://www.ageuk.org.uk/gateshead/>

Telephone: 0191 477 3559

Address: Age UK Gateshead, NE8 1BX

Digital Legacy Association

Website: <https://digitallegacyassociation.org/>

Telephone: 0203 286 6812

Address: Michael Sobell Hospice, HA6 2RN

Elders Council of Newcastle (Older People's Forum)

Email: info@elderscouncil.org.uk

Website: www.elderscouncil.org.uk

Telephone: 0191 208 2701

Address: The Elders Council of Newcastle, NE4 5PL

Marie Curie Newcastle

Email: newcastle.hospice@mariecurie.org.uk

Website: <https://www.mariecurie.org.uk/help/hospice-care/newcastle>

Telephone: 0191 219 1000

Address: Marie Curie Hospice, NE4 6SS

Independent Age

Email: advice@independentage.org

Website: <https://www.independentage.org/>

Telephone: 0191 731 4000

End of Life Doula UK

Email: referrals@eol-doula.uk

Website: <https://www.eol-doula.uk>

Telephone: 01137 339100

Address: 66 High Street, BN71XG

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