



Goals of Care conversations guide treatment in the present.

Advance Care Planning acts as an extension of the usual conversations with families but encourages us to think about how goals of care can be applied to future scenarios.

3 GENERAL CATEGORIES OF GOALS OF CARE

Category 1: Prolonging Life

- Children have access to all medical treatments, including resuscitative measures, as long as they are in their best interest.

Category 2: Prioritizing As Much Good Time As Possible

- Life-prolonging treatment is considered in the context of maintaining a quality of life that the family has defined as acceptable. Any care that will not contribute to restoring the patient's quality of life may not be pursued.

Category 3: Focusing On Comfort

- Treatments that prolong an unacceptable quality of life, as defined by the patient or their decision makers, may be discontinued or declined.



Goals of care and advance care planning discussions prioritize the **values and wishes of families!**

ESTABLISHING GOALS OF CARE

Step 1: Ensure understanding

Step 2: Identify "what matters most?"

Step 3: Recommend treatment

While these conversations **can feel challenging**, families often find them to be **valuable and meaningful**, even when the timing is not perfect.

WHO TO INVOLVE IN CONVERSATIONS

*The **primary health care provider** is an integral member of the health care team and should be involved in these discussions as able.

Also consider involvement of **palliative and critical care teams, extended family, spiritual care and language interpreters**

*Consider involvement of the **pediatric patient!** Even if they do not have capacity to make decisions on their own, they can meaningfully participate in decision making through a variety of means, including through their body language.

BARRIERS TO IMPLEMENTATION

Local medical decision-making laws, especially those involving minors, can **differ widely across provinces**.

Providers are encouraged to **understand the legal implications** of documents, such as advance directives, within their areas of practice.

WHEN TO INITIATE DISCUSSIONS

Goals of care and advance care planning conversations should be **encouraged early** in the course of illness in a child living with a serious illness.

This allows time for reflection while the possibility of death seems distant. Goals of care **should be discussed intermittently** throughout the medical journey as wishes, clinical condition, and prognosis can change over time.

Resources:

- CPS Statement:** [Goals of care conversations and advance care planning for paediatric patients living with serious illness](#)
- Conversation Guide:** [Serious Illness Conversation Guide - PEDS](#)

November 2025

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