

# Worksheet 8

## Supported decision-making

Use this Worksheet to organise your supported decision-making choices.

We suggest you fill out the checklist first, and then record the information about your relative's decision-making.

### A. Checklist

#### MEDICAL DECISION-MAKING

- |     |    |   |
|-----|----|---|
| YES | NO | I have discussed issues of medical consent with my relative's doctor.   |
| YES | NO | The doctor accepts consent from my relative for medical treatment.      |
| YES | NO | The doctor accepts my consent for medical care on my relative's behalf. |

#### FINANCIAL DECISION-MAKING

- |     |    |   |
|-----|----|---|
| YES | NO | I have set up a Discretionary Trust.  |
| YES | NO | My relative has a bank account.   |
| YES | NO | Withdrawals from that bank account are protected by:<br>___ joint signature for withdrawals<br>___ my relative is well-known to bank employees<br>___ funds in the account are kept to a minimum<br>___ don't need to be protected. |

---

## PERSONAL CARE DECISION-MAKING

- |     |    |   |
|-----|----|---|
| YES | NO | My relative has an advocate(s).   |
| YES | NO | Staff understand and support the importance of family involvement.  |
| YES | NO | Staff understand and welcome the involvement of family members, friends and members of the circle of support. |
| YES | NO | Service staff recognise the importance of offering and respecting my relative's choices                       |
| YES | NO | The services my relative receives are monitored by an independent agency.                                     |
| YES | NO | Members of the circle of support are familiar with my relative's personal care issues.                        |

## B. Information

### GENERAL

Who does my relative trust? \_\_\_\_\_

Who would I trust to assist my relative with decision-making? \_\_\_\_\_

Who understands my relative's communication style? \_\_\_\_\_

### MEDICAL DECISIONS

Who is my relative's doctor? \_\_\_\_\_

What assistance would my relative need to make medical decisions? \_\_\_\_\_

\_\_\_\_\_

---

Who would my relative accept help from with medical decision-making? \_\_\_\_\_

\_\_\_\_\_

What aspect(s) of their medical care do I think my relative might understand? \_\_\_\_\_

\_\_\_\_\_

What formal arrangements do I need to make to ensure medical care is easily available to my relative? \_\_\_\_\_

\_\_\_\_\_

## FINANCIAL DECISIONS

My relative's trustees are: \_\_\_\_\_

Who would be willing to assist my relative in making financial decisions? \_\_\_\_\_

My relative's bank account is at: \_\_\_\_\_

## PERSONAL CARE DECISIONS

My relative's advocate is: \_\_\_\_\_

Who would be willing to assist my relative make lifestyle and personal care decisions?

\_\_\_\_\_

