

Fact Sheet

Decision-making pathway

How to 'step into the person's shoes'

The pathway below will help you to make a decision that is more likely to be one the person would be making if they were able to make their own decisions. It is suggested that you read through this pathway and use it as a guide when making decisions for the person who has given an Advance Care Directive.

For all decisions

Work out if you think the person is able to make the decision

- > If you are not sure or if it is unclear if the person can make their own decision you can refer to the Assessing decision-making capacity Fact Sheet and/or seek advice from the Office of the Public Advocate.
- > If you think the person will be able to make the decision after a short time, and the decision is not urgent, wait until they are well enough to make it themselves.
- > You can also support the person to make their own decision.

Allow, support or assist the person to make the decision if they are able.

- > Support the person to make the decision if they can. See Supporting a person to make their own decision Fact Sheet.
- > Even if the person cannot make the decision, if they are able, try to determine their current wishes by talking to them about their choices and consequences.

Health care decision

Step 1: Written or spoken wishes of the person

- > Read the ACD to see if the person wrote down any preferred outcomes of care, health care instructions or refusals of health care that are relevant to the decision being made.
- > Have you had any discussions with the person that could help you?
- > Have they ever expressed views to you or others?
- > Remember, if the person has clearly refused health care and intended the refusal to apply to the current situation, you must respect their instruction and wishes and say no to the health care.

Step 2: Consider what is important to the person

Will the information in Part 3 of the ACD help you make a decision?

- > Consider their cultural, spiritual and religious preferences.
- > If there are no written wishes, values or preferences in the ACD that apply to the situation, consider how the person lived their life.
- > Talk with family members and other health practitioners about whether this is what the person would have done when they were able to make their own decisions.
- > How did the person make decisions in the past.
- > Consider the likely outcomes of health care and whether the person would want or tolerate these outcomes. You should refuse health care that is likely to result in outcomes that the person wanted to avoid.



Step 3: Making a health decision

- > Ask questions and listen carefully to the advice of health practitioners about health care options and likely outcomes and
- > If relevant, follow the person's written or spoken wishes or instructions.
- > Make the decision that the person would make if they had the same information and advice that you have.
- > Where there are several options the person would accept, choose the one that gives them the most independence but still provides good care and maximises their health and well-being (as described by them).
- > If you cannot work out what the person would have decided, make the decision that you believe is best for them.

Living arrangements and other personal decisions

Step 1: Written or spoken wishes of the person - What is important to them?

- > Consider the person's ACD (Part 3) and any written preferences
- > Consider the person's cultural, spiritual and religious wishes or instructions.

Step 2: Making a residential or personal decision

- > If possible, follow the person's ACD.
- > If there are no written preferences in the ACD that apply to the situation, think about what is important to the person.
- > Discuss with family members and others if this is what the person would have done.
- > Consider how the person made decisions in the past?
- > Consider costs linked to the decisions - do you need to talk to the person's financial attorney before a decision is made? (For example when determining where they will live)
- > Where there are several options the person would accept, choose the one that gives them the most independence but still provides good care and maximises their health and well-being (as described by them).
- > If you cannot work out what the person would have chosen, you must make the decision that you believe is the best one for them personally.

For more information

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Email: healthpolicylegislation@sa.gov.au
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