



INFORMATION FOR SUBSTITUTE DECISION-MAKERS

Read this information before you agree to be appointed as a Substitute Decision-Maker. Keep this information for future reference.

By signing the Advance Care Directive Form you are agreeing to be the person's Substitute Decision-Maker and understand the responsibilities of this role.

Before you sign, make sure you understand:

- » what types of decisions you will be able to make
- » how the person wants you to make those decisions for them; and
- » whether you are able to be a Substitute Decision-Maker.

People who **cannot** be appointed as a Substitute Decision-Maker include the person's:

- » doctor
- » nurse; or
- » paid professional carer.

Family members or friends who are paid a Carer Allowance by Centrelink **can be** appointed as Substitute Decision-Makers.

After you are appointed, you should keep a certified copy of the completed and signed Advance Care Directive where you can easily find it.

You should try to have regular discussions with the person who appointed you, in case their circumstances change.

What is the role of a Substitute Decision-Maker?

As a Substitute Decision-Maker, you must try to make a decision you believe the person would have made for themselves in the same situation.

As a Substitute Decision-Maker, you can make all the decisions the person wanted you to make, but you cannot:

- » make a decision which would be illegal, such as requesting any illicit drugs.
- » refuse food and water to be given to them by mouth.
- » refuse medicine for pain or distress (for example, palliative care).
- » make legal or financial decisions (unless you have also been appointed as an Enduring Power of Attorney for financial matters).

When contacted and asked to make a decision, you must:

- » Only make a decision when the person who appointed you cannot make their own decision, whether it be temporary or permanent.
- » Support that person to make their own decisions if they are able to.
- » Produce an original or certified copy of the person's Advance Care Directive Form or advise if it can be accessed in an electronic record (e.g., My Health Record).
- » Only make decisions that you have been appointed to make.
- » Try to contact any other Substitute Decision-Maker who has been appointed to make the same types of decisions as you.
- » Only make a decision on your own if no other Substitute Decision-Maker with the same decision-making responsibility as you cannot be contacted, or if the decision is urgent.
- » Inform any other Substitute Decision-Maker/s of the decisions you make.
- » Try to make a decision you believe the person would have made in the same circumstances. For guidance when making decisions, look at the Decision-Making Pathway on the last page of the **Information for Substitute Decision-Makers**, or for more detail visit advancecaredirectives.sa.gov.au

Where to get help, advice and more information

Visit the Advance Care Directives website:
advancecaredirectives.sa.gov.au

You can also call the Legal Services Commission help line on 1300 366 424.

Office of the Public Advocate:

- » Website: opa.sa.gov.au
- » Substitute Decision-Maker Toolkit
- » Information Service: 1800 066 969
- » Dispute Resolution Service website:
opa.sa.gov.au/what_we_do/dispute_resolution_service

Stand in my shoes: a guide to decision making for Substitute Decision-Makers

1

Is the person able to make a decision? As Substitute Decision-Maker, you may want to assess whether the person is able to make their own decision for yourself. Visit the website to learn more about how to assess decision making capacity. If the person is unable to make their own decision (meaning a substitute decision is required), move to Step 2.

2

Check whether the person's preferences are included in their Advance Care Directive. Check whether preferences relevant to the decision have been included in the person's Advance Care Directive or mentioned to you in a previous discussion.

3

Listen to health professionals. For decisions relating to the person's health, listen to the advice given by health professionals about treatment, health care options and likely outcomes. Think about how this advice lines up with the person's wishes, in particular:

- » interventions some people might think are overly burdensome or intrusive
- » 'What is important to me', 'Health care I prefer' and 'Refusals of health care' included in Part 3 and Part 4 of the Form.

4

Comply. Make sure you comply with specific refusals of medical treatments or health care and interventions if they apply to the current circumstances (Part 4 of the Form).

5

Consider other preferences. Consider other preferences and directions in the Advance Care Directive, relevant to your current decision (Part 3 of the Form).

6

Consultation. If there are no other specific relevant preferences or directions, contact other people close to the person to see if there were any relevant, previously expressed views and social or relationship factors to consider in decision making.

7

What do you know about the person? Think about the person's known values, life goals and cultural, linguistic and religious preferences, and make the decision that the person would make if they had access to current information and advice.

8

Consider the options. If you find you have many options that meet the decision-making criteria: (1) uphold the person's wishes, (2) choose the least restrictive option, or (3) choose the option that most reflects the decision the person would have made.

9

Post-decision care. Think about where the person will live once the decision has been made, for example, are there care arrangements in place so that the person can continue to live at home?

10

Decide. If there is no evidence of what the person would have decided, make the decision that would best provide for the person's care and protect their interests.