

{cara}

SUPPORTED DECISION MAKING AGREEMENT

Date:
30/1/15

I [REDACTED] choose

Karyn Crease Friend &
(name, relationship)

To be my supporter(s) and support me to make decisions about:

Where I live.

I would like to be involved in the selection of a new housemate, preferably someone without an intellectual disability, [REDACTED] and Debbie to write a letter to DCSI.

I would like someone who would respect my privacy.

I would like the locks to be removed. (no longer necessary)

I do not want my room to be used as a thoroughfare

I would like the grey bath back.

Request for a mediator to help develop new house rules.

Opportunity for a re-shuffle of rooms.

Who I spend time with.

[REDACTED] wishes she could have a holiday in Scotland/England.

[REDACTED] wishes she could reconnect with [REDACTED] [REDACTED] who she met in Scotland, (Cupar Fife Scotland)

I would like a volunteer to take me out for lunch or dinner by the beach / esplanade.

What I do. (work/study/activities)

I would like to go to the library, the museum, the art gallery, reading group, Friend of the Theatre.

I Would love to go on a cruise to New Zealand, I would like an accessible room with a balcony, and for three people.

My health.

I would like to have an assessment with the RSB for my eyes, to access adaptive technology.

I want to know more about my medication, the names, what there for and is there any side effects, I need to make an appointment to talk to Dr Spencer and discuss my medication.

I wish not to have thickener in my alcoholic drinks, I need to make an appointment to see my speech pathologist, to see if I can have a waiver on having thickener in my Red wine and Strongbow.

I would like to have a full reassessment of my Mealtime management plan.

Managing my money.

I want my supporter(s) to support me by: (for example)

- Providing Information in a way that I can understand
- Discussing the good things and the bad things that could happen
- Expressing my wishes to other people

Karyn to write things that have been discussed and leave with [redacted].


Repeat information more than once.

I accept Joan Ledger _____ to be a facilitator who will keep track of how things are going with my supported decision making.


I Karyn Crease _____ agree to be a Supporter and support _____ to make her own decisions when he/ she asks me to.

We will review this agreement by 31/5/2015
(month / year)

Any person in this agreement can stop being involved in the agreement by letting the Supported Decision Making Coordinator know.


 (name)	<u>30/1/2015</u> (date)
<u>K E Crease</u> (supporter)	<u>30/1/2015</u> (date)
_____ (supporter)	_____ (date)
<u>Joan Ledger</u> (facilitator)	<u>30/1/2015</u> (date)

The facilitator will be provided support by Cher Nicholson – Supported Decision Making Project Officer - Office of the Health and Community Services Complaints Commissioner (SA).



2/12/14

(supporter and date)



(facilitator and date)

Cher Nicholson is the Trainer/Co-ordinator and will be monitoring the process.

*The facilitator will be provided with support by Cher Nicholson - Supported Decision Making
Project Officer - Office Of Health and Community Services
Complaints Commissioner (SA)*

Supported Decision Making Agreement Form