Sometimes it can be hard when the people we care about most want to do something that we feel is not necessarily in their best interest. However some of the most valuable lessons in life are those that we make by discovering what we don’t actually want, even if we originally thought we did. Supporters are there to listen, reflect, respect and empower. If we always try and rescue or take over, then people will never be able to learn how to decide what is best for them and identify their unique life path.

Previous SDM projects in South Australia have found that participants have experienced increased confidence in making decisions and that the capacity of both the person and their support network has been enhanced. Many people around the person with disability were relieved that there was a process in place for a transition to making their own decisions. Those around them felt relief that the responsibility for decision making and consequences of decisions were taken from their shoulders and onto the person with disability.

Safeguards within the SDM model:

- Regular mentoring & supervision.
- Clarity of roles.
- Involving whole support network.
- Maintaining and enhancing relationships.
- Connecting to local community.
- Adhering to services policies and procedures.
- Police checks as warranted.
- With the increased community connection there are more people knowing and caring about outcomes.
- Open and clear communication regarding rights and responsibilities.
- Families, friends and professionals all working together for a common purpose instead of working in isolation and not achieving.
- Less conflict as the facilitator negotiates and helps with problem solving.

This training is also being independently evaluated and has health ethics approval. This supported decision making project is running from September 2014 to June 2015. During the project, the trainee facilitator can only work with one person at a time. It may be that there are several people who want to take part so they will need to wait a little while before they can begin. The focus of the project is to concentrate on the ability and skills of the facilitator to respond to the needs of the Decision Maker’s (person with disability) expressed wishes. Recruitment to the project is not dependant on the ability of the person with disability but on the facilitator’s skill level in delivering this model of Supported Decision Making.

As this is a very innovative project training is at this stage only for a select group of service workers. As the training spreads more people with disabilities will be able to access this model of Supported Decision Making. Service providers will become competent in the facilitation of the SA Supported Decision Making model.

The trainee facilitators are being trained by Cher Nicholson from the Health and Community Services Complaints Commission. Cher will attend the meetings to help everyone learn how it works. Once the project has ended Cher will stop attending, but the team will keep meeting to continue to support the decision making process and uphold and progress the Decision Maker’s expressed wishes into the future.

If you want more information on this project you can contact:

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The United Nations Convention on the Rights of Persons with Disabilities says that all people should be able to make their own decisions and that if they need help to make decisions, they should get the support they need, instead of someone else making the decisions for them.

Office of Health and Community Services Complaints Commissioner
The big change is decisions change to what the person wishes, that is “Expressed Wish/Will and Preference”, as others in the community enjoy, rather than decisions made by others in best interest.

Most people seek support from people they know when they have a decision to make. Thinking things through with people we trust can help us decide what the best option for us to choose is.

This project invites people who would like to make some decisions about their life to choose one or more trusted people to support them to make their own decisions in a way that suits them. The supporter role cannot be taken up by a paid worker currently involved in their support. Once all parties, Decision Maker, Person with a Disability, and chosen supporters agree to take part in this project, the decisions and support strategies are written down as an Agreement and commitment.

- Putting the information into a format that the person can best understand.
- Repeating information more than once to help remember it.
- Going through the good and bad points of each option and thinking about what the consequences might be.
- Helping think about how the different options match up with what else is important to the person.
- Giving time to think about the options and/or setting a deadline if that helps.
- Knowing when it is a bad time and coming back later.
- Regularly checking back in to make sure they are still happy with the decision they made.

A team is then formed around each person consisting of family, friends, service providers and community connections who are co-opted and may be in a position to uphold and make happen the wishes of the Decision Maker.

The Agreement is not intended to last indefinitely but instead to help establish a long term supportive environment in which the decision maker can continue to direct their own life.

It is up to the Decision Maker if they want to exclude any person from joining their team. Decision Makers are counselled about this decision and the final say is with them.

The Supported Decision process happens in phases:
1. Recruitment - Decision Maker then supporters.
2. Agreement / Commitment
3. Establishment and team building
4. Exit strategies and sustainability

The SDM model facilitated by the service provider is seen as a short term strategy to get the Decision Maker and their team started on a longer term process of supported decision making.

Some of the things previous participants have wanted to make decisions about:
- How to spend their free time – doing things they enjoy with people they like.
- Stopping doing some of the things that they do not like.
- Where they spend their days – doing things that they are good at or want to get good at or finding more meaningful things that they want to explore.
- Where they live and who they live with, now or in the future.
- Their health – how they want to stay as fit and healthy as possible as well as decisions that they need to make if they get sick.

Relationships – who, when, where they want to spend special time. They may want to find opportunities to meet someone new or may decide they want to do things by themselves or with others in groups. Some decided to explore if they wanted to spend time with other people with disabilities or venture into mainstream services or community.

Some people wanted to have a holiday or go places or see things they had not experienced. This may be quite scary for those around them.

Everyone is different and will want different types of support; these are a few examples of types of decision making support:-
- Helping find out what options there are by going to places to get information or just checking them out.
- Putting the information into a format that the person can best understand.
- Repeating information more than once to help them remember it.
- Going through the good and bad points of each option and thinking about what the consequences might be.
- Helping think about how the different options match up with what else is important to the person.
- Giving time to think about the options and/or setting a deadline if that helps.
- Knowing when it is a bad time and coming back later.
- Regularly checking back in to make sure they are still happy with the decision they made.

Support may be explaining how the decision may fit into their lives, how it might affect other things and other people and their relationships with those other people. That is weighing up if they still want to go ahead if it affects what already happens in their lives or breaks down relationships.

We all have to do this self-negotiation.