

Supported Decision-Making Plan

My name is _____.

I want to have people I trust help me make decisions. The people who will help me are called **supporters**.

My supporters are not allowed to make decisions for me. I will make my own decisions, with support. I am called the **decision maker**.

This plan can be changed at any time. I can change it by crossing out words and writing my initials next to the changes. Or I can change it by writing new information on another piece of paper, signing that paper, and attaching it to this plan.

Signature of the Decision Maker

I am signing this supported decision-making plan because I want people to help me make decisions. I know that I do not have to sign this plan. I know that I can change this plan at any time.

My printed name: _____

My address: _____

My phone number: _____

My email address: _____

Today's date is: _____

My signature: _____

The following section may be repeated as many times as needed, or separate plans may be made for each supporter.

Who My Supporter Is:

Supporter's printed name: _____

Supporter's address: _____

Supporter's phone number: _____

Supporter's email address: _____

How My Supporter Can Help Me Make Decisions

(check all boxes that apply)

- ☐ Help me understand my values and goals
- ☐ Help me understand the decisions I need to make
- ☐ Help me identify options to choose from
- ☐ Help me learn about my options
- ☐ Help me understand what could happen in each situation
- ☐ Help me weigh my options
- ☐ Help me try out new things or test out my options
- ☐ Help me communicate my decision to others
- ☐ Help me make sure my choices are respected
- ☐ Help me understand my rights to make my own decisions
- ☐ Help me build skills to make decisions
- ☐ Help me record and understand the information I need to make a decision
- ☐ Other: _____

Areas My Supporter Can Help Me Make Decisions In

(check all boxes that apply)

- ☐ Basic needs (including food and clothing)
- ☐ Housing
- ☐ Health (including physical and mental health)
- ☐ Money and finances (including banking, financial planning, tax filing, etc.)
- ☐ Employment and income (including passive income)
- ☐ Education and skill-building
- ☐ Recreation and community connection
- ☐ Family planning
- ☐ Other: _____

Special Directions and Other Information

I can write other information or special directions for my supporters here. I can also write more information on a separate piece of paper and attach it to this plan.

Consent of Supporters

The following section may be repeated as many times as needed, or separate plans may be made for each supporter.

I, _____ consent to act as a supporter for _____ under this plan. I understand that my role as a supporter is to honour and support their wishes. My support might include giving this person information in a way that they can understand, discussing pros and cons of decisions, and helping this person communicate their decision. I know that I may not make decisions for this person. I agree to support this person's decision to the best of my ability, honestly, and in good faith.

Signature of Supporter: _____

Date: _____

Tracking Form

This tool can be used to help you keep track of who has a copy of your Supported Decision-Making Plan. It is important to make sure the same people/organizations receive an updated plan if you make any changes to it.

[illegible]