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| **SUPPORTED DECISION-MAKING (section 3.2)** | | |
| Supported decision making is a human rights concept that promotes freedom of choice for people using public mental health services. Supported decision making means that people are provided with the support they need in order to be able to make their own decisions. In the context of mental health services, this usually means making medical treatment decisions, but it may include other types of decisions too. This is important to us because under the current act, a psychiatrist in a service can make decisions for you if you are under a compulsory treatment order.  If you would like to learn more about supported decision making you can read [this information](https://www.vmiac.org.au/wp-content/uploads/Supported-Decision-Making.pdf) on the VMIAC website.  The current act has provisions for some supports such as **statements of rights, advance statements, nominated persons** and **second psychiatric opinion** and the commission found that uptake of these supports was not as strong as it could be.  **These are the proposed changes:**  As well as compulsory patients being given a **statement of rights**, all patients will now receive them. There will also be a requirement that the person providing the statements must ensure the consumer understand their rights such as having ongoing conversations and making supports available.  **Advance statements** will still be able to be overridden, however people **must** be provided with a written reason. You will also be able to include more in your advance statement and more people will be able to witness it. They will be stored by Safer Care Victoria.  **Nominated persons** will have to agree to **support the person to make their own decisions** and to help represent the views and preferences of the person. More people will be able to witness the appointment of a nominated person.  There will be more flexibility in how **second opinions can be provided**, and an authorised psychiatrist **will be required to document** their reasons for not accepting the opinion of the second psychiatrist and provide a copy of these reasons to the consumer and any other person requested by the consumer.  **Service providers** will be required to **document** discussions about informed consent, the efforts taken to support a consumer’s decisions and decisions that go against a persons views and preferences including how they considered the consumers views and preferences, alternatives reasonably available and the consumers reasons for those views and preferences. | | |
| **Question** | **What has been said by consumers** | **Your ideas for answering the questions** |
| Question 5:  Do you think the proposals meet the Royal Commission’s recommendations about supported decision making? (Section 3.2 in the paper) | * A definition of supported decision making must be provided and be consistent with international disability standards.   Advance statements:   * must be binding, or they are not a part of supported decision making. * must be read even if the person is a voluntary patient. * Services must document and evidence how they have given all due consideration to an advance statement, in the medical file and in writing to the consumer. * Store advance statements or directives on a centralised database managed by the new Mental Health and Wellbeing Commission.   Nominated persons:   * specify that the role of nominated person is separate from that of carer. * all nominated persons sign a statement on accepting this role that they:   + have an obligation to uphold the consumer’s rights, views and preferences.   + agree to promote the consumer’s personal social wellbeing.   + agree to read and understand any advance statement the consumer makes   + agree to provide consumers with support to make their own decisions.   Second opinions:   * Second opinions must be able to be given by other mental health professionals. * The second psychiatric opinion service must be independent of clinical mental health services. * Must be at no cost * Copies of the second psychiatric opinion are to be given to the consumer within a timely period | Your response to Question 5  If no, why? |
| Question 6:  How do you think the proposals about supported decision making could be improved? (Section 3.2 in the paper) | Your response to Question 6 |