

## When you need to make a decision for someone...

If you have to make a decision for another person:

- try to see the choices from the perspective they would have had, and
- try to make the decision the person would have made if they were able to.

It means *'standing in the person's shoes'*.

## Work out if the person is able to make the decision

It is important to consider if the person could make their own decision if they had support. Health professionals may be able to support the person to make the required decision. They can also help to assess how much of the decision the person can make for themselves, and how much you will need to do.

If the person cannot make the decision themselves, they may be able to provide some input. You may be able to get some information from them about their preferences.

## Consider any written or spoken preferences of the person

The person may have written down their wishes. They may have written what they do, or do not, want in an Advance Care Plan or Advance Care Directive. It is important that these are followed when decisions are made.

Preferences may:

- be about specific medical treatments
- be more general, documenting the person's values and what is important to them
- include their goals for care, including their minimal acceptable outcome from treatment.

## 当您需要为他人做决定的时候 .....

您如果必须为他人做决定：

- 要尽量从他们本人的角度审视各个选择，并且
- 尽量作出假设此人有能力的时候也会作出的决定。

这意味着要‘设身处地为他人着想’。

## 弄清楚此人是否有能力做决定

务必要考虑此人如果获得支持，是否可以自行作出决定。医疗专业人员也许能够帮助支持此人作出必要的决定。他们还可以帮助评估此人可以自行作出多少决定，以及您需要为其作出多少决定。

如果此人无法自行作出决定，他们也许能够提供一些意见。您可能可以从他们那里获得有关他们偏好的一些信息。

## 考虑此人以书面或口头方式表达的偏好

此人也许已经写下自己的意愿。他们也许已在预先护理计划或预先护理指示之中，写下他们希望或不希望得到什么。作决定的时候，务必要依循这些偏好。

偏好可能：

- 有关具体的医疗方法
- 较为笼统，记录此人的价值观及重视的事物
- 涵盖他们对于护理的目标，包括他们对于治疗结果最低可接受的结果。

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People often undertake advance care planning to assist family and others who may have to make decisions for them. They also want to ensure they receive care in line with their preferences.

Preferences may not have been written down. They may have been expressed through conversations. Speak with friends, family members or the person's GP. See if the person expressed anything relevant previously.

## Consider what is important to the person

Consider the cultural, spiritual and religious beliefs of the person. These might influence what care is wanted.

If there are no written wishes, consider:

- how the person lived their life
- decisions they made in the past
- what things are important for them
- the likely outcomes and if the person would want these outcomes.

You should refuse health care that is likely to result in outcomes that the person wanted to avoid.

'Remember, you are trying to make the decision the person would have made. Not the decision you want. Nor the decision you would make for yourself in the same situation.'

## Making a health decision

If you need to make a health decision for someone:

- ask questions and listen to the advice
- ask health practitioners about healthcare options and likely outcomes
- follow the person's written or spoken preferences, as far as possible

人们常常订立预先护理计划，以帮助家人以及其他可能要为他们作决定的人。他们也希望确保接受与自己的偏好一致的护理。

偏好不一定是以书面方式记录的，可能是通过对话表达的。与朋友、家人或此人的 GP（全科医师）交谈，看看此人是否表达过任何相关的意愿。

## 考虑对此人来说重要的是什么

考虑此人的文化、精神及宗教信仰。这些也许会影响他们所希望得到的护理。

如果没有书面的意愿，就要考虑：

- 此人之前如何生活
- 他们过去做过的决定
- 什么事情对于他们来说很重要
- 可能发生的结果以及此人是否希望得到这些结果。

如果医疗护理可能导致此人想要避免的结果，您应该拒绝接受这种护理。

'请记住：您在尽量作出此人本来就会作出的决定。而不是您想要的决定。也不是在同样情况下，您会为自己作出的决定。'

## 作出医疗决定

您如果需要为某人做医疗决定：

- 要提问，并倾听意见
- 要向医疗工作者询问有关医疗护理可选择的方案以及可能发生的结果等问题
- 要尽量依循此人以书面或口头方式表达过的偏好

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- make the decision that the person would make if they had the same information and advice that you have.

When there is more than one option the person would accept:

- choose the option that gives the most independence but still provides good care
- aim to maximise their health and wellbeing, as they would see it.

If you cannot work out what the person would have decided, make the decision that you believe is best for them.

'Making decisions for someone else can be difficult and stressful. It may help to talk with a community nurse, hospital social worker, aged care staff or your GP.'

## Making a decision about living arrangements

Living arrangements may depend on the availability of family and someone to provide care and assistance. The abilities and personal circumstances of those providing care should be considered. Most people would prefer to remain at home rather than entering residential care. However, they may also put a high value on their family and would not wish to cause 'burn-out'. They may not want to impose an extended duty of care on those they love.

When making a decision about living arrangements:

- follow the person's written or spoken preferences
- have a discussion with family members and others, especially anyone who will be helping to provide care
- consider costs linked to decisions
- speak to the financial decision-maker
- choose the option that gives the most independence but still provides care and maximises wellbeing.

- 要依照如果此人获得与您一样的信息和意见会做的决定，作出同样的决定。

如果有一个以上此人会接受的可选方案时：

- 选择可给予最多独立能力，同时又提供优质护理的方案
- 旨在最大程度地促进他们的健康和福祉，就好像他们会看到这个结果一样。

如果您无法弄清楚此人会作出什么决定，您就作出自己认为是对他们最好的决定。

‘为他人做决定可能颇为困难，很有压力。与社区护士、医院社工、老年护理人员或您的 GP（全科医师）倾谈，会有所帮助。’

## 作出有关生活安排的决定

生活安排可能取决于是否有家人或其他人提供护理和协助。应该考虑护理提供者的能力和个人情况。大多数人情愿留在家里，而不接受院舍护理。然而，他们可能也很珍视家人，不希望造成他们“身心疲惫”。他们可能不想给他们所爱的人造成长期负担。

当作出有关生活安排的决定时：

- 依循此人以书面或口头方式表达的偏好
- 与家人以及其他人士——特别是帮助提供护理的人士，进行讨论
- 考虑与决定相关的费用问题
- 与财务决策者倾谈
- 选择可给予最多独立能力，又提供护理并最大程度地促进福祉的方案。

## For more information and assistance

If you have someone who can read English ask them to help you. Ask them to access the information and any documents you need. Your local doctor/GP or Chinese association may be able to help. Or ask about arranging an interpreter to assist you.

- Access information and documents for your state or territory at [www.advancecareplanning.org.au](http://www.advancecareplanning.org.au) (Audio-recordings of information spoken in Cantonese and Mandarin are also available).
- Visit your doctor/GP for assistance.
- Alternatively, call the National Dementia Helpline on 1800 100 500.

or

- Advance Care Planning Advisory Service: Phone 1300 208 582. A telephone interpreter is available for this service by calling 13 14 50. State the language you speak. Wait on the phone (for up to 3 minutes). You can then ask the interpreter to call the Advance Care Planning Advisory Service on 1300 208 582.

## 如需更多信息及协助

如果您身边有人读得懂英文，请要求他们帮助您。请他们获取您需要的信息及文件。您当地的医生 /GP（全科医师）或华人社团可提供帮助。或者，您可以要求安排口译员协助您。

- 浏览网站: [www.advancecareplanning.org.au](http://www.advancecareplanning.org.au)，以获取您所在的州或领地的信息及文件（您也可获取普通话和广东话的录音信息）。
- 拜访您的医生 /GP（全科医师），以获得协助。
- 也可以致电 1800 100 500，联系 National Dementia Helpline（全国脑退化症求助热线）。

或联系

- Advance Care Planning Advisory Service（预先护理计划咨询服务）：致电 1300 208 582。该项服务提供电话口译，请拨打 13 14 50。电话接通后，请告知对方您说什么语言。等待接通电话（最长 3 分钟）。然后，您可以要求口译员帮您拨打 1300 208 582，接通 Advance Care Planning Advisory Service。