

## What if I, as TSDM, disagree with the team?

If you disagree with the team, they will discuss the person's treatment and care with you. The team will try to develop a care plan that all agree on by:

- communicating respectfully to address your concerns
- arranging for a second opinion. This might support the current plan or suggest a different plan.
- advising you of the care offered and options available

If you still do not agree with the care plan offered, you can always seek help from the Patient Care Quality Office or a health care ethicist (see "Helpful Contacts" at right).

## Where can I, as TSDM, get help and support?

Acting as a TSDM can be difficult and stressful. Ask the team who there is to help you. We have different support people such as ethicists, social workers, and spiritual care practitioners. (See "Helpful Contacts" at right.)

## Helpful contacts

Providence Health Care Ethics Services:  
604-806-8528 [ethics@providencehealth.bc.ca](mailto:ethics@providencehealth.bc.ca)

[www.providencehealthcare.org/ethics\\_services](http://www.providencehealthcare.org/ethics_services)

Providence Health Care Patient Relations:  
604-806-8284 [jsilver@providencehealth.bc.ca](mailto:jsilver@providencehealth.bc.ca)

[www.providencehealthcare.org/about-providence/accountability/patient-relations](http://www.providencehealthcare.org/about-providence/accountability/patient-relations)

Providence Health Care Social Work: 604-806-8221 [www.providencehealthcare.org/health-services/additional-services/health-care-support-services/social-work](http://www.providencehealthcare.org/health-services/additional-services/health-care-support-services/social-work)

Providence Health Care Spiritual Care:  
[www.providencehealthcare.org/health-services/additional-services/pastoral-services](http://www.providencehealthcare.org/health-services/additional-services/pastoral-services)

## For more information about the law in BC

Health Care Consent (Consent) and Care Facility (Admission) Act [RSBC 1996] Chapter 181  
[http://www.bclaws.ca/civix/document/id/complete/statreg/96181\\_01](http://www.bclaws.ca/civix/document/id/complete/statreg/96181_01)

This material has been reviewed and approved by patients, families and staff.



[www.providencehealthcare.org](http://www.providencehealthcare.org)



How you want to be treated.

## How do I make health care decisions for another person?



*Your role and responsibilities as a temporary substitute decision maker*

The information in this brochure will help you understand your role and responsibilities when you are making health care decisions for another person as a **‘temporary substitute decision maker’ (TSDM)**.

In British Columbia, adults make their own health care decisions. When a person cannot do this, the health care team (team) may designate a TSDM. A TSDM makes only health care decisions. A TSDM does not make financial or personal decisions. For example, a TSDM does not decide how to spend a person’s money or decide where they will live.

## **What is the law about health care decisions in British Columbia?**

Laws in British Columbia say who can make health care decisions when a person cannot do this for themselves. Health care teams follow the law when designating a TSDM. For more information about the laws please ask us for the “Consent to Health Care” pamphlet.

## **How do I, as TSDM, make health care decisions for another person?**

As TSDM you make decisions about care options offered by the team. You *do not* make these decisions based on what *you* want. You must follow the law that says that these decisions are based on:

- (1) The person’s **‘prior capable wishes’**,  
or
- (2) The person’s **‘best interests’**.

*See below for what these terms mean.*

Making a health care decision for another person can be difficult. Ask the team for all the information and help you need. You may also want to talk with other important people in the person’s life. Family members and friends may be able to tell you more about what the person would want.

## **What are ‘prior capable wishes’?**

Prior capable wishes are what the person said they would want, when they were able to make health care decisions. They may have talked about their wishes or written them down. When their instructions are clear and relevant to their current health condition, the law says you must follow them.

## **What are ‘best interests’?**

If prior capable wishes are not clear or relevant, or you do not know what they are, then you and the team must make health care decisions in the person’s best interests.

You and the team must, according to the law, consider all of the following:

- what the person wants now and what is important to them
- whether the treatment improves the person’s condition
- whether the person will improve without the treatment
- whether the treatment does more good than harm
- whether there is a different treatment that is equally helpful