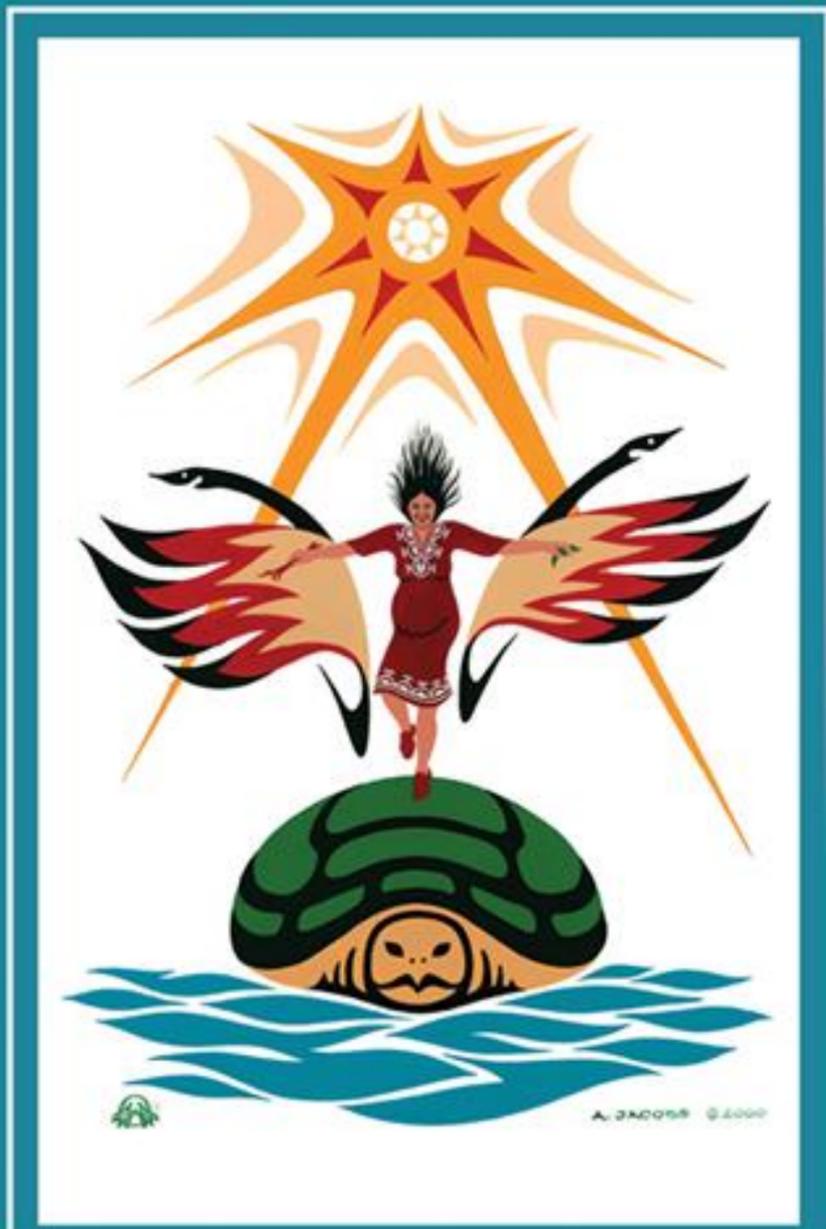




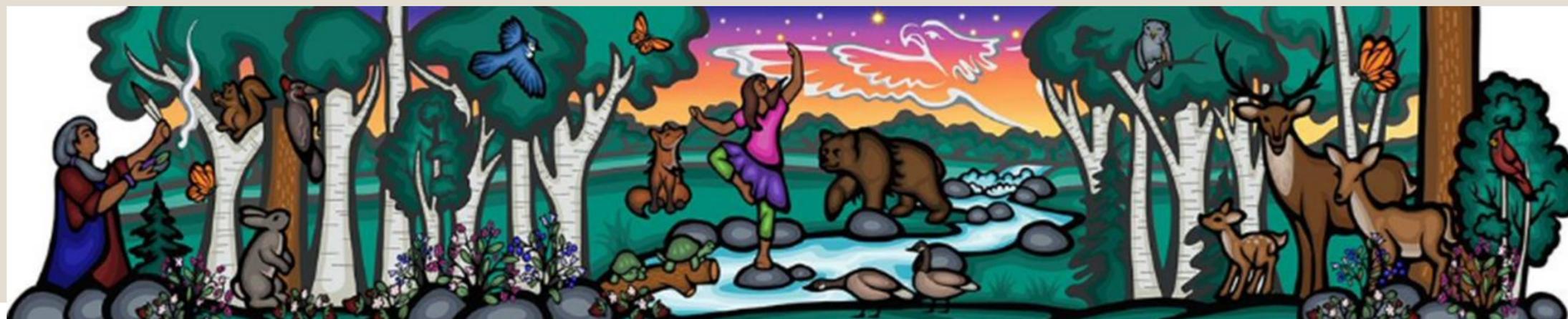
WHO SPEAKS WHEN PATIENTS CAN'T?

Understanding the Role of the
Substitute Decision Maker (SDM)

Presented by Sun Drews, MHSc - HHS Ethics Fellow



We are privileged to provide care on lands that Indigenous peoples have called home for thousands of years.



Webinar Housekeeping

- Everyone will be muted except the host, moderator and panelists
- Ask questions through the Teams chat box or Q&A
- All webinars will be recorded and posted on the internal PEaCE Hub page and on the Regional Ethics Network Website
- Recording will be stopped for Q&A period
- Please take a moment to scan the QR code to complete the evaluation

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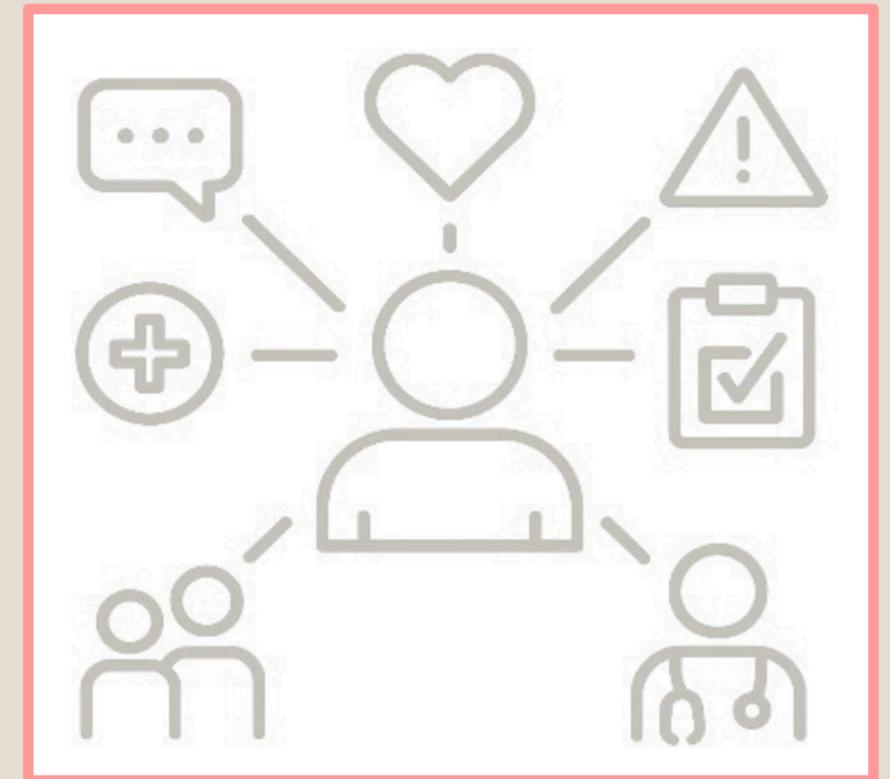
BACK TO BASICS

● Who is a Substitute Decision Maker (SDM)?

The person who is legally authorized to make a healthcare decision for a patient who is not capable of making the decision themselves.

● What Decisions does an SDM make?

- **ONLY** health care decisions requiring consent when the patient is not capable of making the decision themselves.
- Consent decisions include:
 - ✓ Treatment
 - ✓ Admission to Long Term Care
 - ✓ Personal Assistance Services
- Note: Discharge is not a consent decision



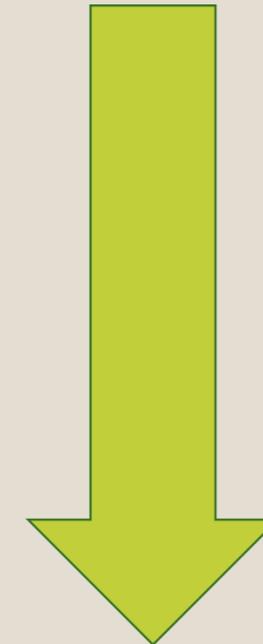
BACK TO BASICS

● Who can be an SDM?

1. **Guardian of the Person** (appointed by court and named in a court order)
2. **Power of Attorney for Personal Care** (named in legal POA-PC document)
3. **Representative** (appointed by Consent and Capacity Board)
4. **Spouse (married or common-law) or Partner**
5. **Child(ren) and Parent(s)** (includes legal adoptive relationships)
6. **Sibling(s)**
7. **Any Other Relative** (e.g., aunt/uncle, niece/nephew, cousin)
8. **Public Guardian & Trustee** (if no one else is available)

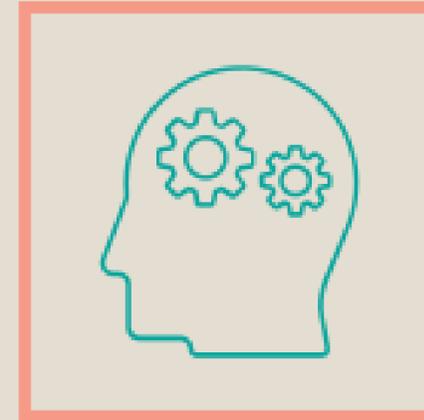
* At least 16 years old (unless they are the parent of the patient)

* Not prohibited by court order or separation agreement



- **AVAILABLE**
- **WILLING**
- **CAPABLE**

AVAILABLE, WILLING & CAPABLE: WHAT DOES THIS LOOK LIKE?



COMMUNICATION

- Responds to calls and messages
- Maintains contact with the team

ENGAGEMENT

- Attends care planning meetings
- Provides informed consent when needed

UNDERSTANDING

- Understands legal role
- Understands treatment options
- Appreciates the consequences of making or not making a decision.

RESPONSIBILITY

- Considers what the patient would want based on their **wishes, values, and beliefs**
- Makes decisions that are in the patient's **best interests**

COMMON CHALLENGES



● Conflict Between the SDM and Healthcare Team

- Disagreement about diagnosis, prognosis, or treatment plan
- Team is unable to get SDM to meet or make decisions

● SDM Disregards the Patient's Prior Expressed Wishes

- SDM is making decisions based on their own needs, wants, or preferences
- SDM is not considering the patient's past decisions, values or beliefs in decision-making

● SDM is Not Making Decisions in the Patient's Best Interests

- Insisting on treatment that will not improve the quality of the patient's life

● Disagreement among SDMs

- When there is more than one equally ranked SDM (e.g., children, parents)

FINDING THE PATH FORWARD

LEGAL & ETHICAL OBLIGATIONS	PATIENT & SDM SUPPORT	RESOURCES
<ul style="list-style-type: none">• SDM Hierarchy• Wishes, Values & Beliefs• Best Interests• Patient Autonomy• Beneficence & Nonmaleficence	<ul style="list-style-type: none">• Open, respectful dialogue• Education• Power of Attorney• Emotional Support• Psychospiritual care	<ul style="list-style-type: none">• Ethics• Social Work• Team & Leadership• Legal & Quality• Public Guardian & Trustee• Consent & Capacity Board

TIPS & TAKEAWAYS

● Clarify Legal Authority

- Confirm the SDM's legal authority early
- Collect contact information for all possible decision-makers
- Copy any legal documents to the patient's medical chart

● Document Patient Wishes

- Record anything a patient shares about what they would want
- Explore the patient's cultural and religious values with curiosity
- Facilitate a Power of Attorney for Personal Care

● Communicate Clearly & Compassionately

- Use plain language and verify understanding to minimize misunderstandings
- Validate emotions and acknowledge how difficult it is to be an SDM
- Emphasize that the SDM is to be the voice of the patient, not for themselves.

● Seek Support

- Internal: Interprofessional team, ethics, legal, psychospiritual care
- External: Public Guardian & Trustee, Consent & Capacity Board, CMPA



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