

Future Care Planning and Vulnerable Adults



Q. How can I support Annie and her future care plan if she does not have family or a POA?

A. The first important distinction is that a Future Care Plan outlines a person's WISHES whereas a POA delegates the power to make DECISIONS. In Ontario a POA-Personal Care assigns a decision maker in case your are unable. It may, or may not, speak to future care plans.

Regardless of whether a Future Care Plan is a separate document, or an integrated part of a POA-PC, it can only be used to provide direction to the person or people making the decisions. It is then up to the SUBSTITUTE DECISION MAKER (SDM) to consider those wishes in order to make a decision.

Doctors, nurses and therapists are not legal decision makers for patients or clients. Therefore handing a doctor or nurse or therapist a Future Care Plan is of no benefit since they are not the ones going to make decisions on behalf of a vulnerable person. The SDM for an incapable adult needs to use the Future Care Plan to help them make a decision and then communicate that decision to the Doctor, nurse or therapist.

If the vulnerable person does not have a guardian/assigned representative/POA/family member the the SDM is likely to become the Public Guardian and Trustee Treatment Decisions Unit (PGT-TDU) - yes that is their primary role!

If a vulnerable person has a future care plan without an SDM other than the PGT-TDU then hopefully they have a friend/worker/advocate who can share that future care plan with the PGT-TDU. The PGT-TDU does not know this vulnerable person. They are a name and a file number and the PGT-TDU will made decisions based on the best interests of the client and the available medical information. If you have information about the vulnerable client's future care plans, please share that with the medical team who can in turn share it with the PGT-TCU to help them make the best decision possible.

