Mental Health Advance Preferences Statement Mapping your preferences in advance

UNIVERSITY Otago



Southern Distric



1. WHAT I WOULD LIKE TO HAVE HAPPEN:

- Strategies that work for me
- Hospitalisation/alternatives to hospitalisation
- Medication that helps
- ECT
- Seclusion or other restraints
- Specific visitors
- · Access to specific mental health team workers
- Rights I would like to have if I'm hospitalised
- Information about what is going to happen
- My recovery options

2. WHAT I DO NOT WANT TO HAVE HAPPEN:

- Things that don't work for me
- What not to do
- Things that increase my anxiety
- Medications that don't help
- Hospitalisation
- ECT
- Seclusion or other restraints
- · Specific visitors

3. WHO SHOULD BE CONTACTED WHEN I AM IN CRISIS:

- Alternative contact person in case your first choice is not available
- Family/whānau/next of kin
- Friends

- Support worker/community group
- Religious or cultural leaders (e.g. Chaplain, kaumātua)

4. WHO I DO / DO I NOT WISH TO HAVE **INCLUDED IN MY CARE:**

- Family/whānau/next of kin
- Friends
- · Specific mental health team workers
- Support worker/community group
- Religious or cultural leaders

5. MANAGING PERSONAL AFFAIRS:

- Home organisation (e.g. Mail, lawn, lights, heating)
- Dependents (e.g. Children, elderly parents)
- Financial matters (e.g. Rent, banking)
- Pets

6. PREFERENCES:

- Cultural
- Spiritual
- Self-management
- · Sensory modulation
- Dietary



7. OTHER RELEVANT INFORMATION:

- · Things about myself
- My physical health
- Early warning signs
- Triggers
- Information about other relevant documents (e.g. WRAP, health passport)
- Power of attorney