



# Making an advance statement

## Introduction

Making an advance statement will help you tell us what you want to happen should you get unwell. It means we can provide support for you in the way you wish for when you are well, even though you may say something else when you are unwell. We may not always be able to accommodate your wishes but will do so where ever possible.

## Who can make an advance statement?

You must be at least 18 years old and be able to make treatment decisions.

## What can be included in your advance statement?

An advance statement is about your wishes, choices and preferences. You can record anything you would like to happen as long as it is legal.

You could record your medication preferences, what helps you recover, what makes you comfortable if you need to go into hospital or who you would like to be informed or consulted about your care, for example, you could permit a carer or family member to access information about treatment relating to you.

The only exception is if you wish to refuse medical treatment. To do this, you would need to make an advance decision.

Information about this is available on our website:

[www.oxfordhealth.nhs.uk/support-advice/getting-help/advance-decisions/](http://www.oxfordhealth.nhs.uk/support-advice/getting-help/advance-decisions/)

Please complete the form below.

This document is the advance statement for:

Name	
Date of birth	
Address	
Care co-ordinator/clinician	
Consultant	
GP GP's address	
Teams you are involved with	
<p>Send or give a copy of your advance statement to your care co-ordinator or the clinician involved in your care in order that your statement may be placed in your care records.</p>	

## My advance statement

It is my wish that in times of mental disorder this statement below is given full consideration before and during my treatment and a copy should be kept in my electronic record. Please see attached additional sheets if necessary.

I notice I am becoming ill again when I ...	
If I do seem to be becoming ill again I would like ...	

<p>I would like you to contact ...</p>	
<p>I would not want ...</p>	
<p>If I have to be admitted to hospital I would like ...</p>	
<p>SIGNED</p>	<p>DATE</p>

I confirm that this form has been completed by the above named person.

Witness name:

Address:

SIGNED	DATE

This statement has been cancelled/revised.

SIGNED	DATE

Advice for staff:

- You may assist a service user in drawing up their advance statement and may witness that they have done so.
- Upload the completed form into the electronic patient record as document type Advance Directives.

## How do I make an advance statement?

It is helpful if you make your advance statement in writing and we have created the template in this leaflet to help you write it. However, if you just wish to tell your care co-ordinator what you want they can record it directly into your care plan or electronic record.

Try to be clear and specific about your wishes. These should only relate to the care provided to you by Oxford Health NHS Foundation Trust.

## How do I cancel an advance statement?

We will ensure that your advance statement is regularly reviewed with you at your care planning meetings or care reviews. If you would like to cancel your advance statement please discuss this with your care co-ordinator or clinician.

## Confidentiality

For the advance statement to be most effective it needs to go into your confidential care record. It will then be available to staff who come into contact with should you become unwell.

Oxford Health NHS FT recommends that you use the form in this leaflet to record your advance statement as it is our recognised format, but we will accept statements made in another form.

## Concerns and complaints

We aim to provide you with a high quality service at all times. However, if you have any concerns, complaints or comments about your experience of our service then please tell a member of the team or contact the Patient Advice and Liaison Service on freephone 0800 328 7971.

If you would like to have information translated into a different language, please contact the Equality and Diversity Team at: [EqualityandInclusion@oxfordhealth.nhs.uk](mailto:EqualityandInclusion@oxfordhealth.nhs.uk)

**Arabic** يُرجى الاتصال بنا إذا كنتم ترغبون في الحصول على المعلومات بلغة أخرى أو بتسليق مختلف.

আপনি এই তথ্য অন্য ভাষায় বা আলাদা আকারে **Bengali**

পেতে চাইলে অনুগ্রহ করে আমাদের সাথে যোগাযোগ করুন।

**Urdu** اگر آپ یہ معلومات دیگر زبان یا مختلف فارمیٹ میں چاہتے ہیں تو برائے مہربانی ہم سے رابطہ کریں۔

**Chinese** 若要以其他語言或格式提供這些資訊，請與我們聯繫

**Polish** Aby uzyskać informacje w innym języku lub w innym formacie, skontaktuj się z nami.

**Portuguese** Queira contactar-nos se pretender as informações noutra idioma ou num formato diferente.

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