

Proposal to the Public Guardian

Please complete this form to submit a proposal to the Public Guardian. Before you complete this form, please read the fact sheet "Submitting a proposal – Information for family and friends". It is important that you speak to the guardian before submitting a proposal.

Important information

- The Public Guardian may use the information provided to make a decision for a person we represent.
- The Public Guardian may discuss the information provided with the person and important people in their life.
- This form is a guide. You may include less or more information. The Public Guardian may request additional information in our consideration of the proposal.

1. Person with a guardianship order (who the proposal is about)

Full name	Date of birth

2. Person(s) making the proposal

Full name	Best contact details
Relationship to the person the proposal is about	

Are you making this proposal with another person?

☐ Yes

☐ No

If yes, please provide their information below.

Full name	Best contact details
Relationship to the person the proposal is about	

3. Proposal

This proposal is about: *(tick the relevant box)*

- | | |
|--|--|
| <input type="checkbox"/> Where the person should live
(accommodation decision) | <input type="checkbox"/> Who the person should be in contact with and the
type of contact (access decision) |
| <input type="checkbox"/> What services the person should receive
(service decision) | <input type="checkbox"/> Other |

Outline what you would like to propose. Include details such as contact information of any proposed providers, and if there is a date by which a decision about the proposal needs to be made.

How is the proposal in the interests of the person it is about? What benefit will it provide for them? Include details of how the proposal will meet the person's current and ongoing care and support needs.

Has the proposal been discussed with the person it is about? If yes, how do they feel about it?

Are there other people in the person's life that have provided a view or input into the proposal? This might include family, friends, support services and health professionals.

If the proposal is agreed to, how will it be implemented? This might include details of how a visit or move to a new accommodation will take place, and who will manage this.

Does the proposal have financial implications? How does the proposal impact any funding arrangements?

What alternative options have been considered? Why are these not used?

Please outline any other information that you feel will help the Public Guardian understand the need for this proposal. Refer to the factsheet "Submitting a proposal – Information for family and friends" for guidance. If you need more space, please submit this form with additional pages attached.

4. Supporting documents

If you have reports or assessments to support the proposal, please select and attach them.

General Practitioner (GP) report

Aged Care Assessment Team report

Occupational Therapy Assessment

Health professional review assessment (psychiatrist, geriatrician, psychologist, behaviour clinician)

Other service provider assessment (accommodation, day program)

Risk assessment

Other

5. Signature

All persons making the proposal must sign and date this form.

Name (please print)	Signature	Date
Name (please print)	Signature	Date
Name (please print)	Signature	Date

**Please send the completed and signed form to your contact at the Public Guardian.
If you don't have a contact, email pg.engagement@opg.nsw.gov.au or post to
Locked Bag 5115 Parramatta NSW 2124.**