

GUARDIANSHIP PLAN

Note: Where this document is completed as part of an application for court appointed guardianship of the person, please insert general heading and court file number.

(Attach additional pages if more space is needed)

Section I - Identifying Information:

A. This plan is for:

Name (in full): _____
*
(Referred to throughout this guardianship plan as 'the person')

Address: _____
* , Mississauga, ON, *

Telephone number: Residence _____*
Business _____

Date of Birth: _____* ,1937

B. (1) As the proposed guardian of the person (or attorney for personal care) for _____,*

I have consulted with the following persons in preparation of this guardianship plan:

- the person identified in A.
- family members of the person
- friends of the person
- care providers to the person
- the person's guardian of property (attorney under a continuing power of attorney)
- others (please specify relationship): Coco Johnson M.S.W. RSW and Dr. Douglas Chute Ph.D C.Psych

Section II - Areas where personal care decision making authority is sought:

A. I am seeking personal care decision making authority in the following areas: *(mark applicable boxes)*

- Health Care
(Including decisions to which the *Health Care Consent Act, 1996* applies)
- Nutrition
- Shelter/Accommodation
- Clothing
- Hygiene
- Safety

B. Powers Requiring Specific Court Authorization (*this section is only to be completed by applicants for court-appointed guardianship of the person*):

1. I am asking the court for an order authorizing me to apprehend the person [Section 59 (3)].

Yes No

2. I am asking the court for an order authorizing me to change existing arrangements in respect of custody of or access to a child, or to give consent on the person’s behalf to the adoption of a child [Section 59(4)].

Yes No

3. a) I am asking the court for an order permitting me to exercise other powers or perform other duties in addition to those set out in the *Substitute Decisions Act, 1992* [Section 59(2)(g)].

Yes No

b) If the answer to 3a is yes, please identify the other powers and duties:

C. Notice Regarding Extraordinary Matters:

The law limits or restricts a guardian’s authority to make decisions in the following areas relating to personal care:

Sterilization

The law prohibits a substitute decision maker from consenting to non-therapeutic sterilization of a person who is mentally incapable of such a decision. Any proposal to consent on behalf of the person to his or her sterilization as medically necessary for the protection of the person’s health must be consistent with the law and should appear in the Guardianship Plan or be the subject of an amendment to the Guardianship Plan prior to consent being given.

Regenerative Tissue Donation

The law restricts the authority of a substitute decision maker regarding decisions to permit regenerative tissue donations by a person who is mentally incapable of such a decision. Any proposal to authorize the removal of regenerative tissue for implantation in another person’s body must be consistent with the law and should appear in the Guardianship Plan or be the subject of an amendment to the Guardianship Plan prior to permission being given.

Section III - The plan for personal decision making:

(Please complete only those sections where decision making authority is sought, and please attach any additional relevant documentation.)

HEALTH CARE (INCLUDING TREATMENT), NUTRITION AND HYGIENE**Background:****(a) Describe the current status of the health, nutrition and hygiene of the person, including all known health conditions for which treatment is being received or is proposed:**

* is my father. He is married to my mother, *. My mother and father have two children, myself and my sister *. My sister lives in the U.K.

My father was diagnosed with Alzheimer's Disease in around 2011. The disease is now in its late stages. My father suffers aphasia, anxiety, short-term memory loss, and is unable to understand or follow directions as a result of his dementia. In October, 2018, I arranged for him to see a geriatric psychiatrist, Dr. *, who continues to oversee the dementia-related aspects of his health care. My father also takes medication daily for an enlarged prostate and is under the care of a urologist, Dr. *. My father's family doctor, Dr. *, is also involved with his overall health care.

Since my father came to live with my husband and I in May, 2018, we have provided a stable and predictable environment. His daily care involves myself, my husband, paid PSWs, and attendance at two day programs for those suffering from dementia. Overall, he has an excellent appetite. He gets tea and a biscuit first thing in the morning, then hot or cold cereal with fruit and yogurt. Lunch is provided by the day programs he attends. Dinner is potatoes or rice or pasta with steak or chicken or shrimp; my husband makes dinner every night because I don't get home from work until about 6pm or later. Dinner is ready around 6:30pm.

(b) Describe any wishes or instructions made by the person while capable that are known by you and that relate to his/her preferences about health care, treatment, nutrition and hygiene and attach a copy of any written wishes or instructions (e.g., a written advance directive, power of attorney for personal care, living will, etc.):

None that I am aware of. A purported Continuing POA for Property was made by my father in 2017 in favour of my mother. As set out below, my mother gave up my father's care in May, 2018.

Plan:**(c) Describe the long-term goals (2-6 years) for decisions under this heading:**

My sister and I are both of the opinion that it would be in my father's best interests for him to reside in a long-term care institution. First, the level of care he requires outstrips the resources available at home; we believe he would be safer and better off in LTC. Second, my father's care at present involves a number of people and occasionally PSWs are unavailable and day programs close. Unpredictability causes changes to my father's schedule which produce anxiety. This would lessen in a LTC facility. Third, my father's access to appropriate stimulation would be better in LTC. Last, caregiver fatigue is a concern. The level of care

required is increasing as his dementia progresses.

(d) Describe the steps you propose to take (within the next 12 months) to achieve the goals under this heading:

Since my father came to live with my husband and I in May, 2018, we have worked closely with our local LHIN and we are moving towards getting my father onto the crisis list for a LTC bed.

Dr. *has assisted us in managing my father's dementia and anxiety; he will continue to do so as we transition to LTC. We have chosen five good LTC facilities; each has shared accommodations with an actual wall between the two residents and a shared bathroom at the Basic level (the level of care we can afford).

(e) Briefly describe your reasons for these plans:

I don't think it can be reasonably questioned that my father's need for ongoing, round the clock personal care can be doubted in view of his presentation of late-stage Alzheimer's Disease. The trajectory of his illness will see his needs become greater in future. In my view, care within a long-term care facility would be optimal.

My father had been living with my mother until May 13, 2018. My mother is presently 81 years old and suffers from her own health-care challenges: advanced rheumatoid arthritis and throat cancer which she was diagnosed with in 2017. The cancer is a concern although it is in remission. The arthritis limits her mobility and agility. She has had both knees replaced and one hip. She walks with a cane and has to negotiate stairs slowly and carefully.

On May 13, 2018 my mother could no longer care for my father safely. I understand the difficulties that are placed on a person caring for a person with dementia at the best of times. At that time, my mother became increasingly frustrated with, and hostile too, my father. She, for want of a better description, threw him out. Since that time she has made occasional comments that she would like him to return home with her. Frankly, I believe that should that occur, it would be dangerous for both of them and is certainly not in my father's best interests. Either he will hurt my mother, injure himself by accident or create a dangerous environment that could result in both of them coming to harm.

In December, 2014 my father was living with my mother. One night he became very agitated and disoriented. When my mother told him she was his wife, he did not believe her. She ended up on the floor of the bedroom and he pulled her by her legs to try to get her out of the room. Keep in mind she has had both knees replaced. She ended up with rug burn and she could not get up. Thinking there was a stranger in his house my father called 911, but hung up. The police were dispatched and came to my mother's aid. My then 77 year old father was arrested for domestic assault, handcuffed and held overnight. I bailed him out in the morning and he came to live with my husband and I from January 2015 until the middle of April 2015. During that time my mother was lonely and tearful and desperately wanted my father back. She promised us and the Court that she would start the process to get him on lists for Long Term Care and that she would communicate with the Waterloo Wellington LHIN and get supports in place to help her with Dad's Alzheimer's disease.

We believed her, but she never followed through and has undermined my efforts to arrange a LTC placement. In my opinion, my father simply cannot go back to my mother's house in Kitchener - but they could see one another every day once he is in Long Term Care.

SHELTERING/LIVING ARRANGEMENTS AND SAFETY**Background:**

- (a) **Describe the current status of the person's living arrangements, including any factors relating to safety:**

My father presently lives with my husband and I in his own bedroom, under our supervision with the assistance of PSWs.

- (b) **Describe any known wishes or instructions made by the person while capable that relate to his or her preferences about living arrangements and safety issues and attach a copy of any written wishes or instructions:**

None that I am aware of.

Plan:

- (c) **Describe the long-term goals (2-6 years) for decisions under this heading:**

As above, my sister and I are both of the opinion that it would be in my father's best interests for him to reside in a long-term care institution. First, the level of care he requires outstrips the resources available at home; we believe he would be safer and better off in LTC. Second, my father's care at present involves a number of people and occasionally PSWs are unavailable and day programs close. Unpredictability causes changes to my father's schedule which produce anxiety. This would lessen in a LTC facility. Third, my father's access to appropriate stimulation would be better in LTC. Last, caregiver fatigue is a concern. The level of care required is increasing as his dementia progresses.

- (d) **Describe the steps you propose to take (within the next 12 months) to achieve the goals under this heading:**

Please see (d) above.

- (e) **Briefly describe your reasons for these plans:**

Please see (e) above.

LEGAL PROCEEDINGS**Background:**

- (a) Describe the current status of any existing or anticipated legal proceedings relating to this person, (including divorce, custody, access, adoption, restraining orders, criminal matters, landlord and tenant matters):

None.

- (b) Describe any known wishes or instructions made by the person while capable that relate to his or her preferences about existing or anticipated legal proceedings and attach a copy of any written wishes or instructions:

n/a

- (c) If legal proceedings are in progress, describe arrangements for legal representation of the person, if known:

n/a

- (d) Where there is a guardian of property or attorney under a continuing power of attorney, is he or she aware of the existing or anticipated legal proceedings described in (a)? If so, please describe his or her involvement:

n/a

- (e) Are you are aware of any existing court orders or judgments against the person? If yes, describe or attach copies:

n/a

- (f) Is the person on probation or are there pending criminal proceedings in which the person is involved? If so, please provide details:

n/a

Plan:

- (g) Describe the long-term goals (2-6 years) for decisions under this heading:

n/a

(h) Briefly describe your reasons for these plans:

n/a

EMPLOYMENT, EDUCATION AND TRAINING

Background:

(a) Is the person employed, or involved in any educational or training programs? If so, please describe current status:

No. My father's dementia is in its late stages and he is unable to participate in programming of this sort, or be employed.

(b) Describe any known wishes or instructions made by the person while capable that relate to his or her preferences about participation in employment, education or training programs:

n/a

Plan:

(c) Describe the long-term goals (2-6 years) for decisions under the heading:

n/a

(d) Describe the steps you propose to take (within the next 12 months) to achieve the goals under this heading:

n/a

(e) Briefly describe your reasons for these plans:

n/a

RECREATIONAL, SOCIAL AND CULTURAL ACTIVITIES**Background:****(a) Describe the activities that the person is involved in (or significant activities that the person was involved in), including hobbies, clubs, affiliations, volunteering:**

My father had his own sailboat for over 15 years in the 70's and 80's and was an accomplished sailor. He was always a leader and when we lived in Thornhill in a townhouse complex he became President of the Home Owner's Board and even named the place: *. He hired a talented Japanese gardener who became a friend and arranged for roofing and other projects to be completed for the benefit of everyone that lived there.

When we lived in * Ontario in the 80's he was a member of the Rotary Club and was involved in their charitable work. He was Vice President of Manufacturing for *and was proudly community oriented. That company employed many people in town and the economic ripple effect went out from families, to local businesses where those people shopped, to a generational impact as those families could afford to send their kids off to University and College. Dad organized an annual 'family day' when the public and loved ones of the employees could come to see their machinist, tow motor driving or punch press operating bread winner do their stuff - and get free hot dogs, hamburgers, pizza and soft drinks. There were games for the kids as well and I particularly remember that he gallantly sat on the dunking chair and was humorously self-effacing when an employees throw landed him in the water.

He is generally good natured and good humoured and enjoys company and chatting.

My Dad has always been artistically talented - we made sure that several of his paintings came to our house and are in his room and he gets quite emotional - pleased, proud and sometimes even tearful - when he shows them off to the PSWs or even to my husband and me. In my mother's home there are several Tiffany style lamps that my father created out of stained glass in the 80's. He always enjoyed going to the Art Gallery of Ontario or the Royal Ontario Museum for mental stimulation and creative ideas. He still goes on occasion and benefits from it.

Now my father enjoys colouring at home and goes to the * Day Centres 5 days a week from 10am to 5:30pm where he socializes with staff and clients and gets some mental and physical exercise by participating in games and crafts in a secure environment. He has a great sense of rhythm and loves to listen to music and to dance. I arranged for an iPod from the Alzheimer's Society to be loaded with quite a bit of Irish Music and all his old favourites. My mother picked it up for him in Kitchener. He will happily listen to that while clapping, singing and dancing to the music.

(b) Describe any known wishes or instructions made by the person while capable that relate to his or preferences about participation in recreational, social and cultural activities:

Dad did continue to paint after he retired when he was 67 years old in 2004, and I believe he planned on continuing his artistic endeavours. Sadly Alzheimer's disease began to take hold in 2010, slowly at first and more rapidly in the last 4 years, until now he really cannot paint at all.

Plan:**(c) Describe the long-term goals (2-6 years) for decisions under this heading:**

It is my hope that suitable programming would be available in a LTC facility; specifically, art therapy.

(d) Describe the steps you propose to take (within the next 12 months) to achieve the goals under this heading:

Described above.

(e) Briefly describe your reasons for these plans:

Described above.

SOCIAL AND SUPPORT SERVICES**Background:****(a) Describe social and support services received by the person within the past year, including any services currently received:**

My father's social life revolves around his time at the two adult community centres he attends. The staff know him well and engage him in stimulating activities all day. They treat him with dignity and respect and are expert at interpreting his needs. He is more talkative than when he first came to live in Mississauga and I attribute this to the laughing, talking and listening that the staff and other clients share with my father during his day, and that my husband and I continue to encourage when he is home.

Previous to his arrival in my home he had the regular type of medical assistance, GP, Dentist, etc. and two specialists, a Urologist for his prostate issues and an Ophthalmologist for glaucoma and cataracts; but he did not have the specialist geriatric or Alzheimer's support that he needs.

Currently my father has PSW's 5 mornings a week to help him shower and dress. This was arranged within a very short time of his arrival in my home. He has a GP here in Mississauga and I had him tested for Diabetes and Hypertension to eliminate any complications. Thankfully he does not suffer from either. I continued to take him to many appointments with his Urologist in Kitchener over the summer of 2018. When my sister came to support me in November of 2018 because of a serious work commitment I had, she arranged for a local Ophthalmologist, so he now has one of those in Mississauga as well. I have arranged for him to continue to see a Geriatric Psychiatrist at Trillium Health Centre in Mississauga to try to deal with his Alzheimer's related sleeping issues.

It was my sister who arranged for PSW's for my parent's home in 2017 very much against my mother's wishes. She also arranged for a Geriatric Dietician to meet with my parents because we were both concerned about my father's weight; at the time of my sister's arrival he weighed 144 lbs. The dietitian considered this below what he should weigh and provided some guidance for meal plans and protein supplements.

(b) Describe any known wishes or instructions made by the person while capable that relate to his or her preferences about receipt of social and support services:

None that I am aware of.

Plan:

(c) Describe the long-term goals (2-6 years) for decisions under this heading:

Described above.

(d) Describe the steps you propose to take (within the next 12 months) to achieve the goals under this heading:

Described above.

(e) Briefly describe your reasons for these plans:

Described above.

Section IV - Additional Information:

(a) I have consulted with the person for whom guardianship is sought in making this plan:

(check one) Yes No

If no, please provide reasons:

(b) I have consulted with the following other people in preparing this plan: (please provide full names, addresses, telephone numbers and relationship to the person, of the people you consulted with)

* and * Ph.D C.Psych
See Capacity Assessment attached hereto.

(c) If consultation did not occur with any of the persons identified in Section I-B (1) above, provide reasons why:

(d) To the best of my knowledge, the person for whom guardianship is sought would not object to any aspect of this guardianship plan: *(check one)*

Yes, would object (No, would not

object If yes, please explain:

(e) **I am aware of my duty as a guardian of the person to foster the person’s independence, to encourage the person’s participation in decisions I make on his or her behalf, and to consult with supportive family and friends and caregivers. My plans to do so are as follows: *(briefly describe)***

I plan to keep my mother and sister fully informed of all issues and facilitate supportive relationships between them and my father.

SUBSECTIONS 66 (15) AND 66 (16) OF THE *SUBSTITUTE DECISIONS ACT, 1992* PROVIDE:

ss.65(15): A GUARDIAN SHALL ACT IN ACCORDANCE WITH THE GUARDIANSHIP PLAN.

ss.66(16): IF THERE IS A GUARDIANSHIP PLAN, IT MAY BE AMENDED FROM TIME TO TIME WITH THE PUBLIC GUARDIAN AND TRUSTEE’S APPROVAL.

SECTION 67 OF THE *SUBSTITUTE DECISIONS ACT, 1992* PROVIDES:

s.67: SECTION 66, EXCEPT SUBSECTION 66(15) AND (16), APPLIES WITH NECESSARY MODIFICATIONS TO AN ATTORNEY WHO ACTS UNDER A POWER OF ATTORNEY FOR PERSONAL CARE.

SUBSECTIONS 89 (5) AND 89 (6) OF THE *SUBSTITUTE DECISIONS ACT, 1992* PROVIDE:

ss.89(5): NO PERSON SHALL, IN A STATEMENT MADE IN A PRESCRIBED FORM, ASSERT SOMETHING THAT HE OR SHE KNOWS TO BE UNTRUE OR PROFESS AN OPINION THAT HE OR SHE DOES NOT HOLD.

ss.89(6): A PERSON WHO CONTRAVENES SUBSECTION (5) IS GUILTY OF AN OFFENCE AND IS LIABLE, ON CONVICTION, TO A FINE NOT EXCEEDING \$10,000.002

Date _____ Signature of proposed Guardian(s)/

Attorney(s) for Personal Care

Name(s): _

Address(es): _

Telephone Number(s): Residence: _____

Business: _____