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| |  |  | | --- | --- | |  |  | | **AUTOMATIC REVIEW OF SPECIAL POWERS ORDER** | | **Response form for the Guardian, Substitute-Decision-Maker or Interested Person** |  |  |  | | --- | --- | | **Special Powers for:** |  | | **Case number:** |  | | **Form issued to:**  **Case officer:** |  |   ***Special Powers can only continue if there is a serious risk to the person’s health and safety, or the safety of others.***   1. **Your role**     Guardian or substitute decision-maker  Interested person   1. **Should the current special powers continue?**   Yes, skip to question 3  No  Unsure  **If you answered no or unsure, please provide details about why the current order should be revoked:**     1. **Are special powers still required for the following:** 2. **Residence – deciding where the person lives or who they live with?**   No, skip to part b)  Yes, please explain why the [$ProtectedPersonFullName] needs to be directed where to live and any wishes they have expressed about where they would like to live:     1. **Detention – does the person reside in a secured area or locked ward?**   ☐ No, skip to part c)  ☐ Yes, please explain why [$ProtectedPersonFullName] is at risk and should not leave the locked or secured area:     1. **Medical or dental treatment – Is the use of medical restraint or force to ensure the person receives proper medical and dental care for their wellbeing required?**   No, please proceed to the end  Yes, please explain the circumstances in which [$ProtectedPersonFullName] is resistant to receiving general medical or dental treatment (including medication to manage behaviours,) and the risk to them or others if they were not provided with treatment and care:   |  |  |  |  | | --- | --- | --- | --- | | **Form Issued to:** | | | | | **Your relationship to the person:**  (unless you are the protected person) | | | | | **Email:** | | | | | **Address:** | | | | | **Telephone:** |  | **Mobile:** |  | | **Signature:** |  | **Date:** |  | | **Please return this form to:** | | Email: **sacat@sacat.sa.gov.au**  Post: **GPO Box 2361, ADELAIDE SA 5001** | | |