Report for AWI Case Conference					
Name of client					
CareFirst ID					
Address					
DoB					
Date of Case conference & time					
Venue/ Microsoft teams					
МНО					
Social Worker/ allocated worker					
RMO/ consultant					
G.P.					
Diagnosis					

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## **Current situation:**

**Medical grounds:** diagnosis, evidence of incapacity, inc views of G.P &/or Consultant (if not attending.)

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<b>Other measures considered:</b> (e.g. suppor SW(S)Act.)	rted decision making, consideration of S13Za				
Welfare grounds: (Consider the principles	s of the AWI Act)				
<ul> <li>How will the proposed action benefit the adult</li> <li>Restrict the adult's freedom as little as possible, while still achieving the desired result</li> <li>Take account of the adults past &amp; present wishes</li> <li>Take into account the views of others with an interest in the welfare of the Adult</li> <li>Encourage the adult to use existing skills, &amp; where possible, develop new ones</li> </ul>					
Advocacy views:					
Financial/ Property issues:					
Summary & Recommendations:					
(consider the powers that may be required to support decision making)					
Date Report Completed:	Signature of Worker Completing Report:				

Risks: