







A witness should sign below if the service user is unable to sign but has indicated his or her consent.

SIGNED

PRINT NAME

DESIGNATION

DATE

**IMPORTANT NOTES** *(Please tick if applicable)*

See Advanced Directive / Living Will (*e.g. Jehovah's Witness Form*)

Service user's relatives have been informed about the treatment. This does not conflict with issues relating to Service User confidentiality. Please document discussions in Service User's notes.

Essex Partnership University Trust