

Saint John of God Kerry Services

Hospitality – Compassion - Respect

Making a Will Policy and Procedure

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Policy and Procedure

1. Policy Statement

Individuals who avail of Saint John of God Kerry Services are supported to the greatest extent possible to manage their financial/property affairs. There is a general legal presumption that an individual has the mental capacity to make their own decisions. Responsibility, as far as possible, remains with the individual, and their rights must be upheld at all times.

2. Purpose

It is the policy of Saint John of God Kerry Services that staff supporting serviceusers will ensure they have information on the benefits of making a will.

3. Scope

This Policy and Procedure applies to all people who access services from Saint John of God Kerry Services.

- 4. Roles and Responsibilities
 - 4.1 The Regional Director of Services, Senior Management, Unit heads and Coordinators will ensure that all staff are aware of this policy and that it is implemented in all areas of the service.
 - 4.2 It is the responsibility of all key workers to ensure that all service users assets will be dealt with as they wish, that they remain in control and that they may take this opportunity to inform as to what their wishes are in the event of their death.
- 5. Staff will arrange for any service user wishing to make a will to engage the services of an Independent Advocate/ Solicitor to facilitate same and include education on their rights and responsibilities.
- 6. In preparation of meeting with a Solicitor, staff may advise the service-user of information they may need to think about before the meeting e.g.;
 - Details of his/her assets,
 - Any wishes he/she may have,
 - Name of person he/she would like to appoint as Executor if so wished, and
 - Name of person who he/she would like to accompany to the meeting.
- 7. Staff will ensure that any details of the Will made by a service-user, including where it is retained, are recorded in his/her file along with details of the Solicitor involved.



SIGNATURE PAGE

I have read, understand and agree to adhere to the attached Policy and Procedure:

Print Name	Signature	Area of Work	Date
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