

## Advance Directives, Psychiatric Care

### Introduction

The development of advance directives for psychiatric care emerged from the Federal Patient Self-Determination Act, which addressed the rights of health care consumers to stipulate in advance how they would like to be treated by health care providers when they are incapacitated. These wishes can be noted in a specific document called an advance directive. All facilities that receive Medicare or Medicaid funds are required to support policies of the Federal Patient Self-Determination Act.

With psychiatric advance directives, patients who are deemed to be competent identify treatment preferences to be used in the event that an exacerbation of mental illness causes them to lose their ability to make rational decisions and judgments. They can be applied to such items as preference of hospital, treatment choices (for example, psychopharmacology or electroconvulsive therapy), and eligibility for involuntary treatment before requisite legal standards for involuntary treatment are met. A potential benefit of advance directives for psychiatric care is that individuals experiencing exacerbations of their disorders are able to receive treatment (perhaps against their will) at an earlier point than would otherwise be likely.

In lieu of or in addition to establishing an advance directive, a patient may choose a mental health care proxy, an individual who would stand in for the patient when psychiatric issues interfere with the patient's ability to make competent decisions.

Unfortunately, several barriers exist to the use of psychiatric care advance directives, including definitions of competence, dissemination of information to all involved parties, and the document's complex language. Also, the requisite legal language of these documents varies from state to state.

Clearly, not all advance directives for psychiatric care will conform to mental health treatment providers' expectations. However, the patient's wishes should be honored whenever possible.

### Equipment

- Psychiatric advance directive form
- Mental health assessment forms
- Witness or notary public (as required by state law)

### Implementation

1. Confirm the patient's identity using two patient identifiers according to your facility's policy.<sup>2</sup>
2. Review the patient's medical record to see if an advance directive for psychiatric care is in place.

3. If an advance directive for psychiatric care isn't in the medical record, ask the patient whether he has one that isn't accounted for by the facility.
4. Review the patient's medical record or contact his family (if the patient has signed consent for staff to do so) *to determine whether an individual has been delegated the role of psychiatric health care proxy.*

### For patients with an advance directive

1. If the patient is considered competent, review the advance directive with him and confirm that it still reflects his current wishes.
2. Place the advance directive in the medical record *so that it's easily accessible to all health care providers.*<sup>4</sup>
3. Notify the doctor that the patient has an advance directive for psychiatric care.<sup>5</sup>
4. Determine whether the patient's health care proxy (if applicable) has a copy of the advance directive.
5. Encourage the patient to discuss his advance directive with his family and health care proxy *so that they understand the patient's wishes and have the opportunity to ask questions while the patient is competent and can explain his decisions.*
6. Document the procedure.<sup>53</sup>

### For patients without an advance directive

1. Provide the patient with verbal and written information about advance directives *so that he can make an informed decision about developing one.*<sup>5</sup>
2. Answer the patient's questions or have a social worker or patient representative provide additional information.<sup>5</sup>
3. Assist in the assessment of the patient's level of competency *to assure he can make decisions about his care.* Assessment parameters may include the patient's ability to understand information, consider the alternatives, evaluate the alternatives in relation to his own situation, make a decision, and communicate his choice. Depending on facility policy, the patient's capacity for making decisions may be determined by a doctor or advanced practice nurse.
4. Ask the patient his preferences in such matters as medications, seclusion, and ways of decreasing agitation *to identify items to include in the advance directive.*
5. Advocate for the patient's preferences when possible, without interfering with the patient's safety or the safety of others.
6. Ask the patient whether he wants a legal advocate present when developing the advance directive. If so, have him put his request in writing and follow facility policy in notifying appropriate legal personnel of the patient's request.
7. Document the procedure.<sup>53</sup>

### Special Considerations

**Pediatric alert:** Adolescents who are close to reaching the age of majority may be in a special situation *because their parents or family members may have advocated for them previously*. Given the Health Insurance Portability and Accountability Act (HIPAA) requirements, family members typically aren't allowed to participate in the care of an individual who has reached the age of legal adulthood. Nurses can prepare families for these transitions by encouraging family discussions and the completion of legal documents that allow family members to be involved in determining the care of their adult children when appropriate.

## Patient Teaching

Patients and their family members should be informed of the availability of psychiatric advance directives and be encouraged to learn more about them. State-specific information for patients and their families can be obtained from the National Resource Center on Psychiatric Advance Directives at <http://www.nrc-pad.org/content/view/282/83/>. Information on completing forms is available from the Bazelon Center for Mental Health Law at <http://www.bazelon.org/issues/advancedirectives/index.htm>.

## Documentation

Document the presence of an advance directive for psychiatric care, if applicable, and that the doctor was notified of its presence.<sup>5</sup> Include the name of the doctor and the time of notification. Include the name, address, and telephone number of the health care proxy if one has been appointed. If the patient's wishes differ from those of his doctor or family, note the discrepancies.

If the patient doesn't have a psychiatric advance directive, document that he was given written information concerning his rights under state law to make decisions regarding his care. If the patient refuses information on an advance directive, document this refusal using the patient's own words, in quotes, if possible. Document all conversations with the patient regarding his care preferences and decision making. Document that proof of competence was obtained.

## References

1. Campbell, L.A., and Kisely, S.R. "Advance Treatment Directives for People with Severe Mental Illness," *Cochrane Database of System Reviews* 21;(1):CD005963, January 2009.
2. The Joint Commission. *Comprehensive Accreditation Manual for Hospitals: The Official Handbook*. Standard NPSG.01.01.01. Oakbrook Terrace, IL: The Joint Commission, 2010.
3. The Joint Commission. *Comprehensive Accreditation Manual for Hospitals: The Official Handbook*. Standard RC.01.03.01. Oakbrook Terrace, IL: The Joint Commission, 2010.

4. The Joint Commission. *Comprehensive Accreditation Manual for Hospitals: The Official Handbook*. Standard RC.02.01.01. Oakbrook Terrace, IL: The Joint Commission, 2010.
5. The Joint Commission. *Comprehensive Accreditation Manual for Hospitals: The Official Handbook*. Standard RI.01.05.01. Oakbrook Terrace, IL: The Joint Commission, 2010.
6. Van Dorn, R.A., et al. "Reducing Barriers to Completing Psychiatric Advance Directives," *Administration and Policies in Mental Health* 35(6):440-8, November 2008.

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1. Confirm the patient's identity.
2. Review the patient's medical record to see if an advance directive is in place.
3. If an advance directive for psychiatric care isn't in the medical record, ask the patient whether he has one that isn't accounted for by the facility.
4. Review the patient's medical record or contact his family (if the patient has signed consent for staff to do so) to determine whether an individual has been delegated the role of psychiatric health care proxy.

### *For patients with an advance directive*

1. If the patient is competent, review the advance directive with him and confirm that it is current.
2. Place the advance directive in the medical record.
3. Notify the doctor that the patient has an advance directive for psychiatric care.
4. Determine whether the patient's health care proxy (if applicable) has a copy of the advance directive.
5. Encourage the patient to discuss his advance directive with his family and health care proxy.
6. Document the procedure.

### *For patients without an advance directive*

1. Provide the patient with information about advance directives.
2. Answer the patient's questions or have a social worker or patient representative provide additional information.
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