

Policy Name: Policy Section/ Number:	Created By:	Initial Date:	Current Date:	Pages:
Advance Directives Policy Section ___/# ____	Ana Dutcher, Quality Assurance Manager	12/24/2020	1/8/2021	Page 1 of 4

Approved By: Mohamad Khraizat	Title: Health Operations Manager
Signature: 	Date: 1-11-21

I. POLICY

The policy of the ACCESS CHRC is that behavioral health professionals address and educate all clients on the Medical and Behavioral Advance Directive, and that they provide the information necessary to understand their options of developing an Advance Directive, which is a legal document that documents a person's preferences for future mental health treatment, and allows appointment of a health proxy to interpret those preferences during a crisis.

II. PURPOSE

The purpose of this policy is to delineate and describe program standards and expectations for access and admissions to the various programs available at ACCESS CHRC which will include physical and behavioral healthcare.

III. APPLICATION

This policy applies to all ACCESS CHRC staff, its contractors, and their subcontractors.

IV. PROCEDURES

- A. At Intake, it is the responsibility of the Intake Specialist to provide information on Advance Directive to the client.
- B. Annually, Primary Worker provides information to the client.
- C. Education is provided to the clients
 - a. An Advance Directive a legal document for healthcare decisions
 - b. An Advance Directive is created when client is capable and competent
 - c. The purpose of the document is to allow client to express client wishes in advance about what types of treatment, services, and other assistance client want during a personal behavioral or physical health crisis.
 - d. An Advance Directive provides a clear statement of client medical treatment preferences and other wishes or instructions.
 - e. An Advance Directive can:
 - i. Promote client autonomy and empowerment

Policy Name: Policy Section/ Number:	Created By:	Initial Date:	Current Date:	Pages:
Advance Directives Policy Section __/# ____	Ana Dutcher, Quality Assurance Manager	12/24/2020	1/8/2021	Page 2 of 4

- ii. Enhance communications between client, client doctor, treatment team, and family
 - iii. Protect client from ineffective, unwanted, or harmful treatment or actions
 - iv. Help prevent crisis situations and reduce the use of involuntary treatment or safety interventions, such as restraint or seclusion.
- f. The client does not have to fill out an Advance Directive. The decision to have any type of Advance Directive is completely voluntary.
 - i. No family member, hospital or insurance company can require client to have one or dictate what the document should say if client decide to write one.
 - ii. Also, a hospital cannot deny client service because client have an Advance Directive or because client does not have one
- g. An Advance Directive generally permits client to plan for, consent to, or refuse future treatment at a time that client is not able to communicate client wishes with client treatment team
 - i. Client can plan for such things as hospital admission, administration of medication, post hospital care, Electroconvulsive (ECT)
- h. If client is unable to make decisions, client can choose someone to speak for them.
 - i. This is done through the Durable Power of Attorney for Health Care portion of the Advance Directive
 - ii. The person who is appointed is called a Health Care Agent, Surrogate Decision Maker, or Patient Advocate
 - iii. Client may set up an Advance Directive without appointing a Health Care Agent
- i. The Health Care Agent
 - i. Must be a capable and competent adult who is 18 years or older
 - ii. The person cannot be providing client health care.
 - iii. Makes decisions for the client:
 - 1. When client health care provider determines that client is incapable of making decisions, client's Health Care Agent would be consulted about client's treatment choices and decisions

Policy Name: Policy Section/ Number:	Created By:	Initial Date:	Current Date:	Pages:
Advance Directives Policy Section __/# ____	Ana Dutcher, Quality Assurance Manager	12/24/2020	1/8/2021	Page 3 of 4

2. However, client's preference regarding medication and other aspects of treatment while hospitalized will be considered if client is involuntarily committed
- j. A mental health professional does not have to pre-approve any of the content of Advance Directive. Clients are encouraged to consult a medical and/or mental health care professional when clients are completing an Advance Directive
 - k. If the client already has a guardian, he/she is client's Health Care Agent.
 - i. Client should discuss their medical and/or mental health care treatment preferences with the guardian if client has not done so.
 - ii. After client has completed an Advance Directive, client may cut out the Health Care Agent Card from the Advanced Directive Brochure and place it in their wallet.
 - l. One is "incapable to participate in their care decisions" when:
 - i. Client lacks sufficient understanding or ability to make and communicate medical or mental health treatment decisions.
 - ii. A physician or psychologist determines incapacity.
 - m. The treatment team uses the Advance Directive:
 - i. If client is determined to lack capacity to make own decisions about medical or psychiatric treatment, client's health care providers must make an effort to follow the instructions that are written in client Advance Directive or that are given by client's Health Care Agent.
 - ii. Client's health care provider may also notify all other providers involved in client's care of the instructions in client Advance Directive.
 - n. Advance Directive would not be followed when:
 - i. Conflicts with generally accepted medical and mental health care practice standards
 - ii. Treatment requests are not feasible or available
 - iii. Conflicts with emergency treatment
 - iv. Conflicts with applicable law

Policy Name: Policy Section/ Number:	Created By:	Initial Date:	Current Date:	Pages:
Advance Directives Policy Section __/# ____	Ana Dutcher, Quality Assurance Manager	12/24/2020	1/8/2021	Page 4 of 4

- o. Advance Directive will be followed if client is involuntarily committed to a facility. Involuntary commitment to a treatment facility takes priority over what client's Advance Directive says about hospitalization.
- p. There is no cost for making an Advance Directive or for assigning a Health Care Agent.
- q. Legal court proceedings are not required.
- r. The State of Michigan does not require the use of a notary.
 - i. One must have two adult witnesses sign your Advance Directive.
 - ii. Witnesses cannot be family members, health care team members or beneficiaries of your estate.
- s. Once created, client may change or end the Advance Directive or change your Health Care Agent at any time that you are considered capable.
- t. There is a form that is available through the treatment team, one can write out their own document, search for a form on the internet or purchase a form at an office supply store.
- u. Place the original document in personal file and give copies to other trusted individuals, such as the Health Care Agent, medical doctor, or primary mental health professional.
- v. Client can obtain information from the Michigan Department of Health and Human Services website: <http://www.michigan.gov/mdhhs> or from: Detroit Wayne Integrated Health Network Division of Customer Service Toll Free: 888.490.9698 Local: 313.833.3232 TTY: 888.630.1044

V. QUALITY ASSURANCE & IMPROVEMENT

ACCESS CHRC Management shall review and monitor adherence to this policy and address it in supervision with staff as needed.

VI. COMPLIANCE WITH ALL APPLICABLE LAWS

Agency staff, contractors, and subcontractors are bound by all ACCESS policies, and administrative directives as amended. Employees in violation of this policy will be subject to appropriate disciplinary procedures, up to and including termination of employment, for repeated or egregious violations.

LEGAL AUTHORITY AND REFERENCES

- A. https://www.dwihn.org/members/Advance_Directives_Brochure.pdf
- B. National Resource Center on Psychiatric Advance Directives (NRC-PAD)
- C. Michigan.gov - MDHHS KEEPING MICHIGAN HEALTHY BEHAVIORAL HEALTH & DEVELOPMENTAL DISABILITY MENTAL HEALTH; Advance Directives