

## Advance Health Care Directives

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SUBJECT:	Advance Directives
EFFECTIVE DATE:	6/2009
REVISION DATE:	7/2012

### POLICY

Davis Behavioral Health (DBH) will provide adult patients with written information about Advance Health Care Directives and will also provide education on the advance directive process. DBH will honor a client's Advance Directive for psychiatric care when those preferences are medically appropriate and in a form consistent with UCA-62A-15-1004. DBH will encourage clients to use Advance Health Care Directives and will provide resource support for consumer advocates by providing training and consultation on Advance Directives.

### PURPOSE

Advance Health Care Directives are a written statement of a client's wishes for treatment in the event that he/she lacks capacity to make a health care decision. The directive is written at a time when the client is competent, as verified by a family member or friend who serves as an "attorney-in-fact." The purpose is to give the client decision-making ability at a time when he/she is competent so that treatment can follow their wishes in the event he/she becomes impaired and is not competent. The Advance Health Care Directive also serves the treatment personnel of DBH who will use the written statement to determine the treatment preferences of the client.

### PROCEDURE

- 1.0 Intake will provide adult patients with written materials and provide a brief explanation of advance directives upon request.
  - 1.1 DBH will also provide education on Advance Health Care Directives on an individual basis or in a group.
  - 1.2 DBH will notify enrollees that there is one form for mental health and medical Advance Directives. Once an enrollee has filled it out, a copy needs to go to all their providers, including physical health care providers and DBH.
  - 1.3 DBH will update written materials to be provided to enrollees and notify all clients with an Advance Directive of any changes in state law as soon as possible, but no later than 90 days after effective date of the change.
- 2.0 DBH staff will request a copy of a client's Advance Health Care Directive when the client indicates that he/she has completed a directive. This directive will be placed in the DBH clinical record.

- 3.0 In the event that the client becomes impaired by a mental illness to a degree that he/she could be termed not competent, the primary service coordinator will verify the existence of a current Advance Health Care Directive. At that time, the primary service coordinator will contact the designated attorney-in-fact.
- 4.0 The attorney-in-fact will make the determination of when the terms of the Advance Health Care Directive should be implemented. The defined psychiatric and environmental interventions specified in the Advance Health Care Directive will be incorporated into the DBH treatment plan *to the extent that resources allow and within standards of reasonable medical care.*
- 5.0 Because of potential conflicts in decision making, and as explicated in Utah statute, DBH personnel will not direct the development of an Advance Health Care Directive, nor will they serve as any client's attorney-in-fact.
- 6.0 If a client is currently competent, the current desires of that client concerning treatment supersede any previously expressed preferences in the Advance Health Care Directive.
- 7.0 The client may revoke an Advance Health Care Directive at any time that he or she is competent to do so. The wish to revoke the directive should be indicated in writing. When this indication is made, the Advance Health Care Directives may be removed from the client's clinical record. At this time, the revocation request and a clinical note indicating the rescission of the Advance Health Care Directive will be placed in the record.