
Psychiatric Advance Directives Toolkit *For Consumers*

Drafting a Psychiatric Advance Directive.

North Carolina has a way you can plan ahead for mental health treatment you might want to receive if you are in a crisis and are unable to communicate for yourself or make voluntary decisions of your own free will. An *Advance Directive for Mental Health Treatment* allows you to write down treatment preferences or instructions if you had a crisis in the future and could not make your own mental health treatment decisions. This toolkit will walk you through filling out an *Advance Directive for Mental Health Treatment* document in twelve quick steps.

What are Psychiatric Advance Directives?

On an Advance Directives Document, people can describe the kind of mental health treatment they want to receive if they cannot make decisions for themselves in the future. This can include a person's wishes about medications, ECT, or admission to a hospital. It is important to realize that someone can change these forms at any time if they wish.

How might Psychiatric Advance Directives be of benefit?

One benefit is that people can document what medications they would want or not want in a crisis. Another benefit is that people can say what hospital they would want or not want to be admitted to in a crisis. Psychiatric advance directives, or PADs, can tell clinical staff how people would want to be treated while in the hospital (like being treated with respect). They can also tell clinical staff their personal preferences (not to be bound, etc.) for treatment. Finally, people can choose someone they trust (like a family member) to make treatment decisions for them if they cannot make the decisions themselves.

What are limitations of Psychiatric Advance Directives?

It is important to realize when these forms are used; people may have changed their minds about the treatment they want. Also, their chosen person may not do exactly what they have asked them to do in the PAD. It is also the case that the hospitals people wish to be admitted to may not have beds at the time of a crisis. Finally, doctors can still use involuntary commitment and do not have to provide treatment they believe is inappropriate.

When are Psychiatric Advance Directives especially important?

One especially important use of advance directives is that you may choose to give instructions in advance of a crisis to people taking care of you during a crisis. For example, you may decide that in a crisis you would like a trusted person to make any important decisions for you based on what they think is the

right decision. You could also put in an advance instruction “please call my doctor or clinician and follow his/her instructions”. That way, if you are in an emergency room or in a clinic, if you are unable to speak for yourself or very confused, these instructions can be used as a means to try to help you at vital moments.

How can Psychiatric Advance Directives be filled out?

If you are interested in completing an Advance Directives Document, please print out a blank copy of the *Advance Directives for Mental Health Treatment worksheet* and walk through the following easy steps:

Step 1. Crisis Symptoms. The first thing you may choose to write in the Advance Directives document is the kind of symptoms you have when you get into a crisis. These symptoms would include mental or physical signs indicating your mental health is getting worse. Listing these symptoms could help treatment providers recognize early warning signs you may be experiencing problems. The more specific you can be, the more information you communicate to future providers about the condition.

Step 2. Medications. Next you can describe preferences for medications. If you wish, answer any of the following:

- A. Are there any particular psychiatric medications that you would like to request in a crisis? Which ones?
- B. Are there any medications you do not want to receive in a crisis? If so, which ones? Why?
- C. Are there any medications that you are allergic to or you have had bad reactions to? If so, what are the medications you are allergic to?

Step 3. Facility Preferences. You can also describe preferences for hospitals. If you wish, answer any of the following:

- A. Are there specific hospitals you would prefer to go to in the future? Why?
- B. Are there hospitals you would prefer not to go to in the future? Why?
- C. Do you want to leave this decision to your health care agent? If so, please write this request.

Step 4. Emergency Contacts. Here, you can list the names, addresses, and phone numbers of people you would want contacted in an emergency. You can also include information about your physician/psychiatrist or case manager/therapist.

Step 5. Crisis Precipitants. It may be helpful to write down the sort of things that cause you to experience a mental health crisis. If you cannot think of anything, you can list certain situations that are particularly stressful to you.

Step 6. Protective Factors. It may also be helpful to list things that can help you avoid a hospitalization. Are there things that you feel would save you from having an unwanted hospitalization?

Step 7. Usual Response to Hospital. You have the opportunity to write down how you react to a hospitalization. Thinking back on your hospitalizations, are there specific ways you react? Do certain aspects of being in the hospital make you feel uncomfortable? If so, you can list these here.

Step 8. Preferences for Staff Interactions.

- A. It would be helpful to let the hospital or crisis unit know what they may do to help you in a crisis. Are there specific things staff can do for you to make you more comfortable or relaxed?
- B. It would be helpful to provide instructions in advance for staff to intervene if you were feeling out of control. What things would help to minimize chances of being restrained and/or secluded?

Step 9. Visitation Permission. You may give permission here for people to visit you in the hospital.

Step 10. ECT Preferences. Electro-Convulsive Therapy (ECT), sometimes referred in the past as shock therapy, is a type of treatment that is occasionally used in severe episodes of mental illness, primarily depression. Typically, it is used after multiple trials of medications have failed, but may also be used earlier when a rapid response is urgently needed and/or the patient requests. Here, you can write your preferences for ECT. If you don't have a preference, you can write that you want your doctor to decide for you in the future regarding the need for ECT. You can also ask that your Health Care Agent to be informed before ECT treatment is administered.

Step 11. Other Instructions.

- A. You can list any other instructions you want. Some examples are writing instructions about paying rent or feeding pets while you are in the hospital and listing any other medical conditions you want doctors to be aware of.
- B. In this next part, you are being told that advance directives can be shared with others on your treatment team if necessary. If you have any specific instructions regarding sharing of this information, list it here.

Step 12. Legal Documentation.

- A. As principal, you should read through the entire document to ensure it is accurate. You must have some identification I.D. to show the notary.
- B. Witnesses cannot be family members or anyone working at the mental health center; neighbors or friends are okay but they too must have I.D..
- C. The notary fills out this section and stamps the document.
- D. These two notices are from the North Carolina statute and need to be included on your *Advance Directive for Mental Health Treatment*.