

## BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY POLICIES AND PROCEDURES MANUAL

<b>Chapter: 4</b>	<b>Care and Treatment Services</b>		
<b>Section: 5</b>	<b>Person Centered Planning</b>		
<b>Topic: 5</b>	<b>Personal Advocate/Patient Advocate and Advance Directive for Mental Health Care</b>		
Page: 1 of 4	Supersedes Date: Pol: 10-19-06 Proc:	Approval Date: Pol: 6-15-11 Proc: 10-19-06	_____ <i>Board Chairperson Signature</i>
			_____ <i>Chief Executive Officer Signature</i>
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### Policy

Consistent with the organization’s philosophy of providing services to individuals based on recovery including individual choice, self-determination, and Person Centered treatment planning, it is the policy of Bay-Arenac Behavioral Health Authority (BABHA) to assure individuals are offered the opportunity to designate a personal advocate through completion of an Advance Directive for Mental Health Care.

### Purpose

This policy and procedure was established to provide persons served with information on how they can make their wishes for mental health treatment in the future known for them, if they are unable to give informed consent, by having an Advance Directive for Mental Health Care.

### Education Applies to

- All BABHA Staff
- Selected BABHA Staff, as follows: All Clinical and Clinical Management
- All Contracted Providers:  Policy Only  Policy and Procedure
- Selected Contracted Providers, as follows: Primary Care Providers
  - Policy Only  Policy and Procedure
- Other:

### Definitions

Patient Advocate: An individual 18 years or older who has been chosen to make decisions about mental health treatment for another individual when that individual is unable to give informed consent. The decisions are limited to those powers concerning mental health treatment which are expressed in the individual’s advance directive for mental health treatment. The term 'patient

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advocate" is applicable to treatment in a hospital and in the community. The term "patient" is used in the Michigan Department of Health and Human Services (MDHHS) pamphlet and recommended MDHHS sample form.

Advance Directive for Mental Health Care: A document in which a person appoints another individual to make mental health decisions for him/her in the future should he/she lose the ability to make decisions about his/her mental health care (also known as a durable power of attorney for mental health care).

Informed Consent: Consent given by a person who can understand he/she has a condition that needs treatment and the treatment options (including no treatment) for the condition he/she has. A person who is capable of informed consent can consider the possible benefits and drawbacks from each treatment, and can make a reasonable choice among the treatments available.

**Procedure**

During the pre-planning process, persons who are 18 years or older, who do not have a guardian, and are receiving services will receive information about Advance Directive for Mental Health Care. When staff review the crisis plan with the individual, they will provide information about the Advance Directive for Mental Health Care and how it can be established. A form will be available for the individual to use with a brochure explaining the process for appointing a patient advocate. The decision to appoint a patient advocate to make decisions about his/her mental health care (specified in the individual's Advance Directive for Mental Health Care) is completely voluntary. When an individual does choose an Advance Directive for Mental Health Care, he/she will be encouraged to include a copy in his/her medical record and have it available to the BABHA Emergency Services department as well as any other location that would be critical to his/her care.

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**Attachments**

N/A

**Related Forms**

Durable Power of Attorney Form

**Related Materials**

The Michigan Department of Health and Human Services pamphlet “Advance Directive for Mental Health Care; Planning for Mental Health Care in the Event of Loss of Decision-Making Ability”

Person/Family Centered Planning Policy and Procedure C04-S05-T01

**References/Legal Authority:**

Michigan Public Act 386 of 1998, Section 700.5506, effective January 3, 2005

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<b>SUBMISSION FORM</b>				
<b>AUTHOR/ REVIEWER</b>	<b>APPROVING BODY/COMMITTEE/ SUPERVISOR</b>	<b>APPROVAL /REVIEW DATE</b>	<b>ACTION (Deletion, New, No Changes, Replacement or Revision)</b>	<b>REASON FOR ACTION - If replacement list policy to be replaced</b>
P. Baker	P. Baker	06/15/11	Revision	Reviewed – add the term “recovery” to the policy statement
K. Withrow P. Baker	PNLT	11/07/13	Revision	Triennial review – updated with First Person served language. Updated procedure to reflect current practice.
E. Albrechth	C. Pinter	10/1/2015	No changes	Triennial Review
M. Prusi	C. Pinter	3/5/18	Revision	Update terms-unsure if this is within the RR/CS Department’s scope
K. Amon	K. Amon	11/6/18	No Changes	Triennial Review
K. Amon	K. Amon	11/27/19	No Changes	Policy and Triennial Review-Early to start a new Review cycle.
H. Beson	H. Beson	6/1/23	Triennial Review	No changes