

New England (HHS Region 1)

 Mental Health Technology Transfer Center Network

 Funded by Substance Abuse and Mental Health Services Administration

## Advance Directives System / Policy Checklist

## **Advance Directive Policy**

щ		NEO.	NO	DON'T
#	ITEM	YES	NO	KNOW
1.	Our organization is aware of state and federal laws, statutes, policies, and guidelines supporting Advance Directives.			
2.	Our organization supports Advance Directives by endorsing state and federal laws, statutes, policies, and guidelines.			
3.	Our organization has internal policies regarding Advance Directives.			
4.	Our organization provides all facilities with Advance Directive Toolkits and Forms in English and Spanish (or other languages dominant in your constituency) that may be used to facilitate the execution and implementation of Advance Directives.			
5.	Upon entry into any program, every client is provided with information and educational materials regarding Advance Directives.			
6.	The clients we serve are informed of their right to create, revise, or revoke Advance Directives during intake and periodically thereafter. If a client does not have the capacity to make health care decisions at the time of admittance, these materials will be provided to the individual at a later date.			
7.	Clients who wish to create, revise, or revoke Advance Directives can be connected with an advocacy organization that can aid in the development, revision, or revocation of Advance Directives, if so desired.			
8.	All programs/facilities have procedures in place for the clear documentation of the steps taken to inform, create, or implement Advance Directives.			
9.	All programs/facilities have procedures in place to ensure Advance Directives are kept in client medical records.			
10.	All programs/facilities have procedures in place to ensure that Advance Directive files contain up-to-date documentation.			
11.	Education and Training are available for providers, clients, and family members on the development and implementation of Advance Directives.			
12.	Every direct care service provider receives specialized training on the development and implementation of Advance Directives as a part of their larger training on recovery-oriented practices and client rights.			
13.	Our service system has a system-wide method of tracking, updating, and accessing information about Advance Directives that is compliant with HIPAA standards and psychiatric privilege laws.			

#	ITEM	YES	NO	DON'T KNOW
1.	Every client is provided with information and educational materials regarding Advance Directives.			
2.	Every client is asked about the existence of or interest in creating Advance Directives.			
3.	If a client's decision-making capacity at the time of admission is in question, a formal evaluation will be conducted by an attending physician prior to the provision of information and education materials regarding Advance Directives. Materials will be offered at a point when the person has regained decision- making capacity.			
4.	Every client is provided with contact information for advocacy organizations that can assist with the creation of Advance Directives.			
5.	Every client is provided with assistance in connecting with advocacy organizations, if so desired.			
6.	Copies of any existing Advance Directives are requested.			
7.	Copies of any Advance Directives are placed in the client's chart.			
8.	The management information system is updated to note the existence of Advance Directives.			

Documentation	n Procedures

#	ITEM	YES	NO	DON'T KNOW
1.	Our organization provides and documents when information is provided to clients about Advance Directives.			
2.	Our organization documents a client's decisions about creating, revising, or revoking Advance Directives.			
3.	Our organization documents when referrals or contact information has been given to a client in regards to an Advance Directive.			
4.	Any execution, implementation, revision, or revocation of Advance Directives is documented in a client's file.			
5.	Any assessments of capacity to make health care decisions are documented and validated by the appropriate professional.			

## **Training Procedures**

Procedures that are in place to ensure that all direct care staff are informed of agency procedures related to the use of Advance Directives.

#	ITEM	YES	NO	DON'T KNOW
1.	Training on Advance Directives and how to integrate it into practice is available to all staff. This training focuses on ways to educate clients, family members, and other staff members about Advance Directives, resources and guidelines available to assist with the creation, maintenance, and implementation of Advance Directives.			
2.	At least one representative from every program is trained on the relevant laws and practices pertaining to the creation and use of Advance Directives.			

## **Advance Directive Creation / Modification Procedures**

#	ITEM	YES	NO	DON'T KNOW
1.	Any client being served by our organization who wishes to create a new Advance Directive may do so in conjunction with care providers, family members and/or friends, independent advocacy organizations, or on their own. People will be encouraged to discuss preferences outlined in Advance Directives with members of the treatment team, family members or significant others, and/or consumer advocates. Special circumstances may apply when a client has a conservator and will be worked with accordingly.			
2.	Staff in our organization are familiar with the process of creating, revising, or revoking Advance Directives.			
3.	Clients being served by our organization have access to information regarding Advance Directives and Advance Directive Toolkits.			
4.	Clients being served by our organization have formal opportunities to create, revise, or revoke Advance Directives upon intake and/or during regular treatment review meetings, given that decision-making capacity is not in question.			
5.	Clients being served by our organization are afforded regular opportunities to discuss Advance Directives with independent advocates who have been trained in the development and implementation of Advance Directives.			
6.	Any new Advance Directives or modifications of Advance Directives are documented appropriately and validated per legal guidelines outlined by our federal and state requirements.			
7.	Assistance is provided to clients with obtaining witnesses and notarizing the document if necessary.			
8.	Staff facilitate a discussion with clients around the distribution of Advance Directives to health care providers and agents.			
9.	If a client being served by our agency has a conservator of person and/or estate, the conservator shall afford the conserved person the opportunity to participate meaningfully in decision-making in accordance with the conserved person's abilities. This includes reasonable conformance with expressed health care preferences and health care instructions, if any, that may have been executed prior to the appointment of the conservator.			

## **Procedures for Maintaining Updated Advance Directives**

Procedures will be in place for maintaining and documenting information about Advance Directives to ensure that...

#	ITEM	YES	NO	DON'T KNOW
1.	At our organization, Advance Directives are stored in a uniform, readily accessible location in client charts, in inverse chronological order.			
2.	It is easy to identify if a client has an Advance Directive in charts and/or the EHR system at our facility.			
3.	We have a management information system that is kept up-to-date with regard to Advance Directives of the people being served at each particular program- including the date of the most recent version of the document, the location of the most recent version of the document, and the name and telephone number of the health care agent representative and the alternate health care representative.			
4.	Clients are provided with a means of documenting the location of their Advance Directive and contact information for their health care representative in a format that is compliant with HIPPA and psychiatric privilege laws.			

#### **Procedures for Implementing an Advance Directive**

All people (being served in inpatient and outpatient settings) are presumed to have capacity to make their own treatment decisions, unless otherwise noted. Procedures will be in place to...

#	ITEM	YES	NO	DON'T KNOW
1.	Refer each client wishing to complete an Advance Directive to an attending physician or to a psychiatrist for the determination of mental capacity, IF decision-making capacity is in question.			
2.	Use accepted standards for assessing decision-making capacity and documenting same.			
3.	Inform clients of their right to request a second opinion.			
4.	All disputes are referred to the medical director of the program.			

## Procedures for When a Person is Deemed Unable to Make Decisions

In the event that a person is deemed unable to make decisions it is standard for providers at our organization to...

#	ITEM	YES	NO	DON'T KNOW
1.	Obtain the most recent Advance Directive immediately.			
2.	Contact the person's Conservator and/or health care representative.			
3.	Ensure that treatment decisions are made in conjunction with the person's Advance Directives until they have regained capacity to make their own health care decisions.			
4.	Arrange for attending physician to review and document the mental status of the client regularly until decision-making capacity is restored.			

	Procedures for Revoking an Advance Directive				
#	ITEM	YES	NO	DON'T KNOW	
1.	Within our organization, Advance Directives may be revoked at any time, either verbally or in writing. This includes times when an attending physician determines that the client is incapable of making treatment decisions. Attending physicians or other health care professionals are required to document revocation of Advance Directives in the client's medical record.				

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