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Clark County Regional Support Network Policy Statement

Policy No.: CR04
Policy Title: Advance Directives
Effective Date: September 1, 2001

Policy: Clark County Regional Support Network (CCRSN) and its sub-contracted Community Mental Health Agencies (CMHAs) shall respect and utilize Advance Directives for adults enrolled in Medicaid who have completed a Mental Health and/or Health Care Advance Directive, in the provision of mental health services. CMHAs shall request copies of both Mental Health and Physical Health Advance Directives at the time of intake. Individuals who have not completed a Mental Health Advance Directive shall be informed about their right to complete one, the available resources for doing so, and shall receive general information about Mental and Physical Health Care Advance Directives during the intake process.

CCRSN and its sub-contracted CMHAs shall protect against the provision of mental health services conditioned upon execution of a Mental Health or Health Care Advance Directive and protect against discrimination against an individual based on whether or not the individual has executed an Advance Directive.

Reference: WAC 388-501-0125, WAC 388-865-0430 (3), 42 CFR 422.128, 42 CFR 438.100, 42 CFR 489 Subpart I, 42 CFR 438.10 (g), 42 CFR 438.6 (i), RCW 71.32, RCW 11.94, Washington Mental Health Division RSN Contract, CCRSN Policy and Procedures: CR01 Individual Rights and Responsibilities, QM21 Clinical and Administrative Record Review.

Definitions:

Mental Health Advance Directive

A written document in which the principal makes a declaration of instructions or preferences or appoints an agent to make decisions on behalf of the individual regarding the individual's mental health treatment. This is a legal document that specifies an individual's choice and preferences regarding psychiatric treatment and care in the event the individual becomes incapacitated or incapable of making their own treatment choices. Advance Directives for psychiatric care are intended to be activated throughout the life span of the individual and utilized during "the most severe and disabling episodes of mental illness."

Health Care Advance Directive


A written instruction, such as a living will or durable power of attorney for health care, recognized under State law (whether statutory or as recognized by the courts of the State), relating to the provision of health care when the individual is incapacitated.

Procedure:

1. CCRSN-contracted CMHAs shall ask all adults age 18 and over who are receiving CCRSN funded services whether they have a Mental Health Advance Directive and/or a Health Care Advance Directive at the time of intake. CMHA shall maintain documentation in each adult's medical record about whether or not the individual has executed a Mental Health Advance Directive and/or a Health Care Advance Directive.
2. If an individual is incapacitated at the time of intake and unable to articulate whether or not he or she has completed an Advance Directive, the provider shall make an inquiry about the Advance Directives as soon as the person is able to provide a response. The information shall be documented in the individual's clinical record.
3. If a individual indicates he or she has a Mental Health Advance Directive and/or a Health Care Advance Directive, the intake clinician shall ask for a copy so it can become part of the clinical record. A individual's refusal to provide a copy shall be documented in the clinical record.
4. CCRSN-contracted CMHAs shall offer all adults receiving CCRSN funded services information about Mental Health Advance Directives and Health Care Advance Directives and available resources for completing one that is written in their primary language and in a format that may be easily understood. CMHAs shall also offer a verbal explanation of the procedure. This should be documented in the individual's clinical record along with a signed statement by the individual, indicating his or her choice about completing the Advance Directives.
 - a. CMHAs shall give Advance Directive information to the individual's family or surrogate in the same manner in which other materials about Mental Health Advance Directives and Health Care Advance Directives are issued to a individual.
 - b. If a person is incapacitated at the time of intake, the provider shall ensure that information about Advance Directives is given to the individual at an appropriate time (i.e., once he or she is no longer incapacitated or unable to receive such information).
5. CCRSN-contracted CMHAs must act in accordance with provisions of a individual's Mental Health Advance Directive and Health Care Advance Directive to "the fullest extent possible," unless:
 - a. compliance would violate accepted standards of care;
 - b. the requested treatment is not available;
 - c. compliance would violate applicable law;
 - d. compliance would endanger anyone; or
 - e. compliance is inconsistent with the purpose of a court order relating to commitment (e.g., ITA).
6. CCRSN-contracted CMHAs shall have a written policy to inform individuals that complaints concerning non-compliance with their Advance Directives may be filed with the Washington State Mental Health Division by contacting the Compliance section at 1-888-713-6010.
7. An individual may revoke a Mental Health Advance Directive or a Health Care Advance Directive in writing at any time without a reason, if he or she elected this option when competent and indicated such in an executed Advanced Directive. A copy of the written revocation shall be filed the individual's clinical record.
8. CCRSN-contracted CMHAs shall ensure that all existing and new staff are educated about the CCRSN Advanced Directive policy and procedure, all provisions of Washington laws and rules

concerning Mental Health Advance Directives and Health Care Advance Directives, and resources available to individuals who wish to complete an Advance Directive

9. CCRSN-contracted CMHAs shall review consumer rights with individuals receiving services, including the right to execute a Mental Health Advance Directive and a Health Care Advance Directive, at least annually. The review of rights shall be documented in the individual's clinical record.
10. CCRSN shall provide notice to individuals if state law changes about Advance Directives as soon as possible, but no later than 90 days after the effective date of the change.
11. CCRSN shall review CMHA staff training materials, new service recipient enrollment packet information concerning rights and responsibilities to ensure the written information meets federal, state, and CCRSN requirements.
12. CCRSN shall monitor CMHA compliance with federal, state, and CCRSN requirements through regular site visits and address compliance issues through its quality improvement process.
13. CCRSN shall monitor grievances concerning Advance Directives and report identified trends to the CCRSN Quality Management Committee for review and evaluation of quality improvement opportunities.

Approved By:  _____

Vanessa Gaston, Director
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Date: 2/27/09