Wisconsin Public Psychiatry Network Teleconference (WPPNT)

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WPPNT Reminders

How to join the Zoom webinar

- **Online:** https://dhswi.zoomgov.com/j/1606358142
- **Phone:** 669-254-5252
- Enter the Webinar ID: 160 635 8142#.
  - Press # again to join. (There is no participant ID)

Reminders for participants

- Join online or by phone by 11 a.m. Central and wait for the host to start the webinar. Your camera and audio/microphone are disabled.
- Download or view the presentation materials. The evaluation survey opens at 11:59 a.m. the day of the presentation.
- Ask questions to the presenter(s) in the Zoom Q&A window. Each presenter will decide when to address questions. People who join by phone cannot ask questions.
- Use Zoom chat to communicate with the WPPNT coordinator or to share information related to the presentation.

- Participate live to earn continuing education hours (CEHs). Complete the evaluation survey within two weeks of the live presentation and confirmation of your CEH will be returned by email.
- A link to the video recording of the presentation is posted within four business days of the presentation.
- Presentation materials, evaluations, and video recordings are on the WPPNT webpage: https://www.dhs.wisconsin.gov/wppnt/2023.htm

Advance Care Planning:
You Can Have A Say In Your Care

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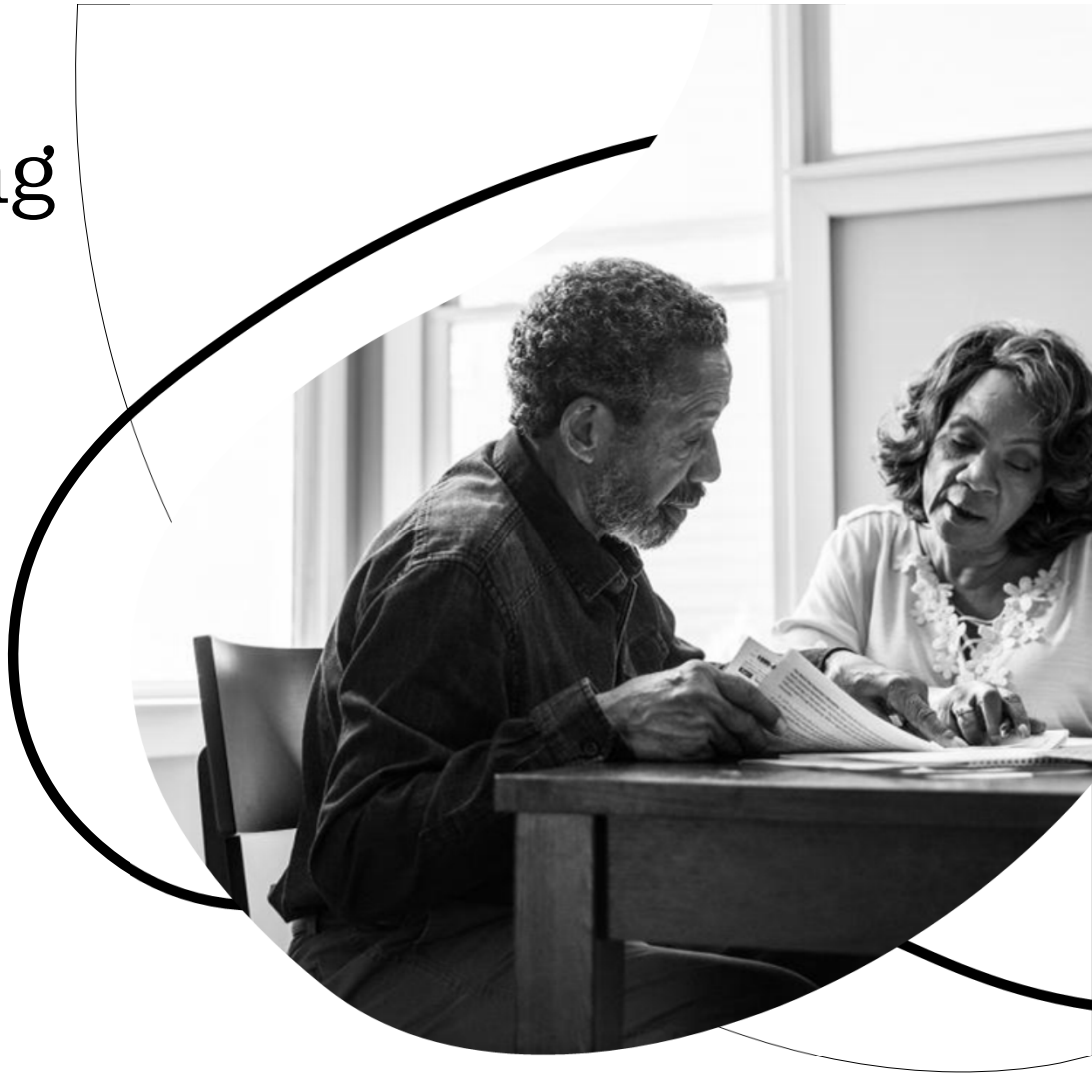
Objectives

- What is Advance Care Planning (ACP)?
- Types of Advance Directives
- Why is ACP Important?
- WI Laws and decision making
- Limitations with Mental Health Treatment
- Psychiatric Advance Directives
- Steps of ACP
- Questions?

Advance Care Planning

Advance care planning is a process that supports adults at any age or stage of health in understanding and sharing their personal values, life goals, and preferences regarding future medical care.

The goal of advance care planning is to help ensure that people receive medical care that is consistent with their values, goals, and preferences during serious and chronic illness.



Sudore R, et al. Defining advance care planning for adults: A consensus definition from a multidisciplinary Delphi panel. Journal of Pain and Symptom Management. 2017. 53(5):821-832

How Are Wishes Documented?

Types of Advance Directives

Living Will or Declaration to Physicians

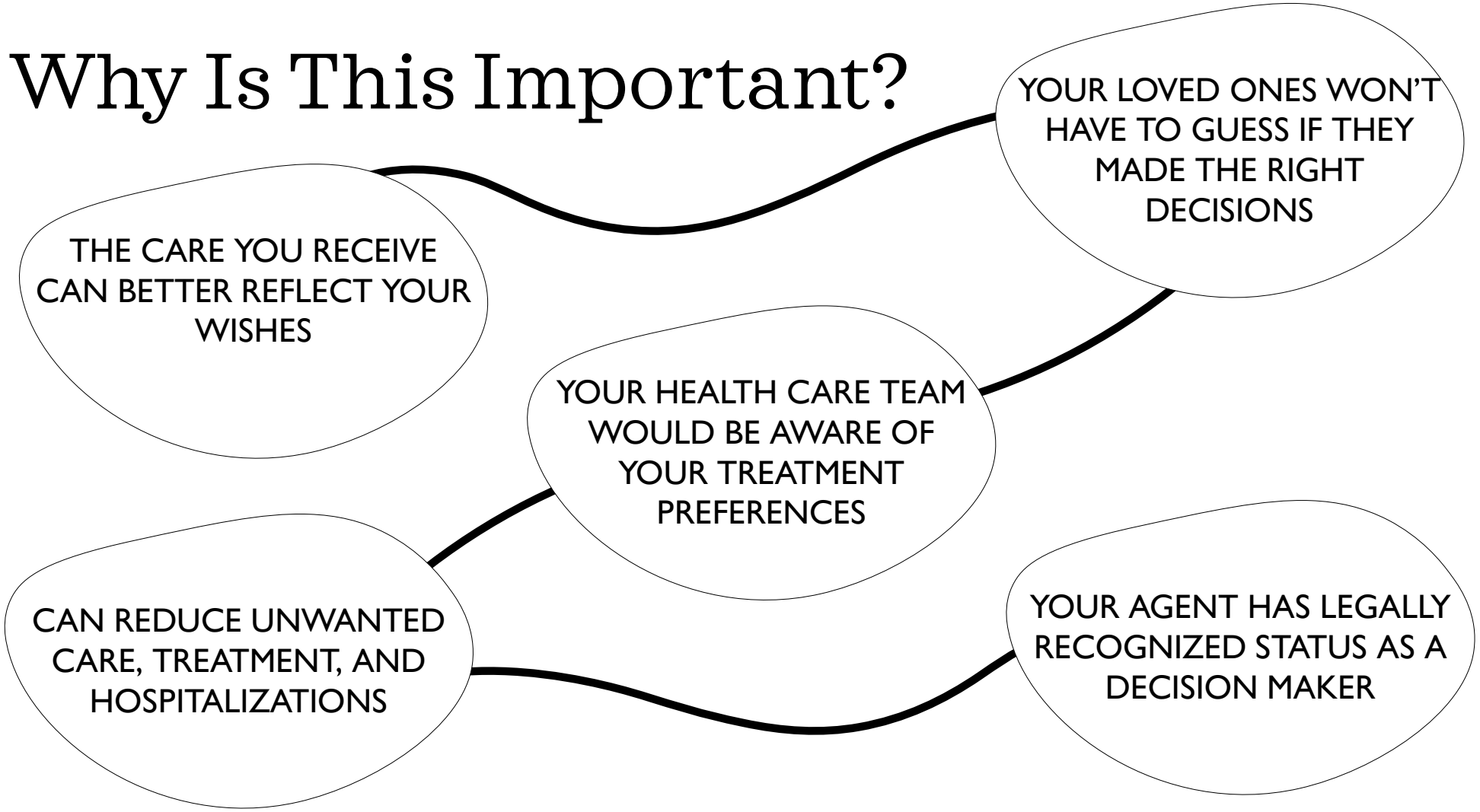
Power of Attorney for Health Care *(POA-HC)*

Power of Attorney for Finance and Property

Who Cannot Witness a Living Will/POA-HC?

- Under the age of 18
- Family members *(related by blood, adoption, marriage or domestic partnership)*
- Health care agents
- Fiscally responsible for the individual's health care
- Employee of a health care facility expect for Social Workers and Chaplains

Why Is This Important?



Monumental Cases

Karen Ann Quinlan (1975): Collapsed at age 21. In 1976 parents got permission from NJ Supreme Court to allow removal of ventilator. She continued to received artificial nutrition/hydration. Died in 1985 from pneumonia. Hers was first state court decision.

Nancy Cruzan (1983): MVA at age 26. State of MO argued for life-sustaining treatment vs. parents wishes to allow for a natural death. In the first U.S. Supreme Court decision, justices agreed with the "right to die" *if a patient's wishes are known.* Family convinced court of her wishes, stopped artificial nutrition and hydration (AN&H), and she died in 1990.

Terri Schiavo (1990): Had a cardiac arrest at age 26. After several years without improvement, her husband and parents argued about her wishes in court from 1994-2005. AN&H was stopped and she died in 2005.

Impacts

Impact of the Cruzan Supreme Court Case

- Prompted a surge in interest for Advance Directives (AD)
- Recognized "right to die" with states setting some standards
- Congress passed the Patient Self-Determination Act of 1991 which requires health care facilities to:
  - Provide patients written information about AD
  - Ask patients if they have an AD and document in medical record
  - Educate staff and community about AD
  - Never require patients to have, or not have, an AD

Wisconsin (WI) Laws and Decision Making

WI law does not authorize next of kin to make decisions for incapacitated adult family members.

- In a hospital situation, if quick decisions need to made, staff will look to next of kin.

Wisconsin law regulates who has the authority to consent to an individual's admission to nursing homes and certain other facilities.

- If a person is unable to make health care decisions for themselves, and has not completed a POA-HC, a guardianship order would need to be filed in order to be admitted into the care facility.

Case Scenario

Jamie suffered a major stroke and has extensive care needs

- After several weeks in the ICU, Jamie is ready to transfer to a rehabilitation unit
- Jamie never completed a POA-HC and does not have decision making capacity
- The rehabilitation unit cannot accept Jamie until a legal decision maker is appointed
- Jamie's loved ones need to petition for legal guardianship through the courts:
  - More days in the hospital
  - Delay in starting rehabilitation
  - Costs to patient/loved ones
  - Increased stress on loved ones
- Once the guardianship petition is filed, Jamie can transfer to the rehabilitation unit

Limitations with Mental Health Treatment (Chapter 155.20)

A health care agent may not consent to experimental mental health research or to psychosurgery, electroconvulsive treatment or drastic mental health treatment procedures for the principal.

LIMITATIONS ON MENTAL HEALTH TREATMENT

My health care agent may not admit or commit me on an inpatient basis to an institution for mental diseases, an intermediate care facility for the persons with intellectual disability, a state treatment facility, or a treatment facility. My health care agent may not consent to experimental mental health research or psychosurgery, electroconvulsive treatment or drastic mental health treatment procedures for me.

Psychiatric Advance Directives (PAD)

- Legal document that states a person's preferences for future mental health treatment and allows appointment of a health care proxy to interpret those preferences during a crisis.
- Used when a person becomes unable to make decisions during a mental health crisis.
- Wisconsin does not currently have a specific statute for a psychiatric advance directive.
    - If client is interested in drafting a Psychiatric Advance Directive in WI consider working with an attorney.

Five commonly asked questions about PAD's in Wisconsin

1. Can I write a legally-binding psychiatric advance directive (PAD)?

Yes, Wisconsin's Power of Attorney for Health Care statute allows you to appoint an agent (called an "health care agent") to make healthcare decisions for you if you become incompetent to make those decisions yourself. "Health care" may include mental health care.

You must use the state's standard form. Further information is available from Disability Rights Wisconsin.

2. Can I write advance instructions regarding psychiatric medications and/or hospitalization?

The Wisconsin statute does NOT allow you to write advance instructions for your psychiatric care in a freestanding document. However, if you fill out a Power of Attorney for Health Care (POA-HC), you may wish to specify how you would like your Agent to make decisions for you.

If there are particular matters that you wish your Agent to make clear to your treating physicians, it is advisable to discuss them with your Agent and document them on page 4 of the standard form, attaching further pages if necessary.

3. Can I appoint an Agent to make mental health decisions for me if I become incompetent?

Yes, your Agent must be someone other than your health care provider, an employee of your health care facility, or a spouse of such a person.

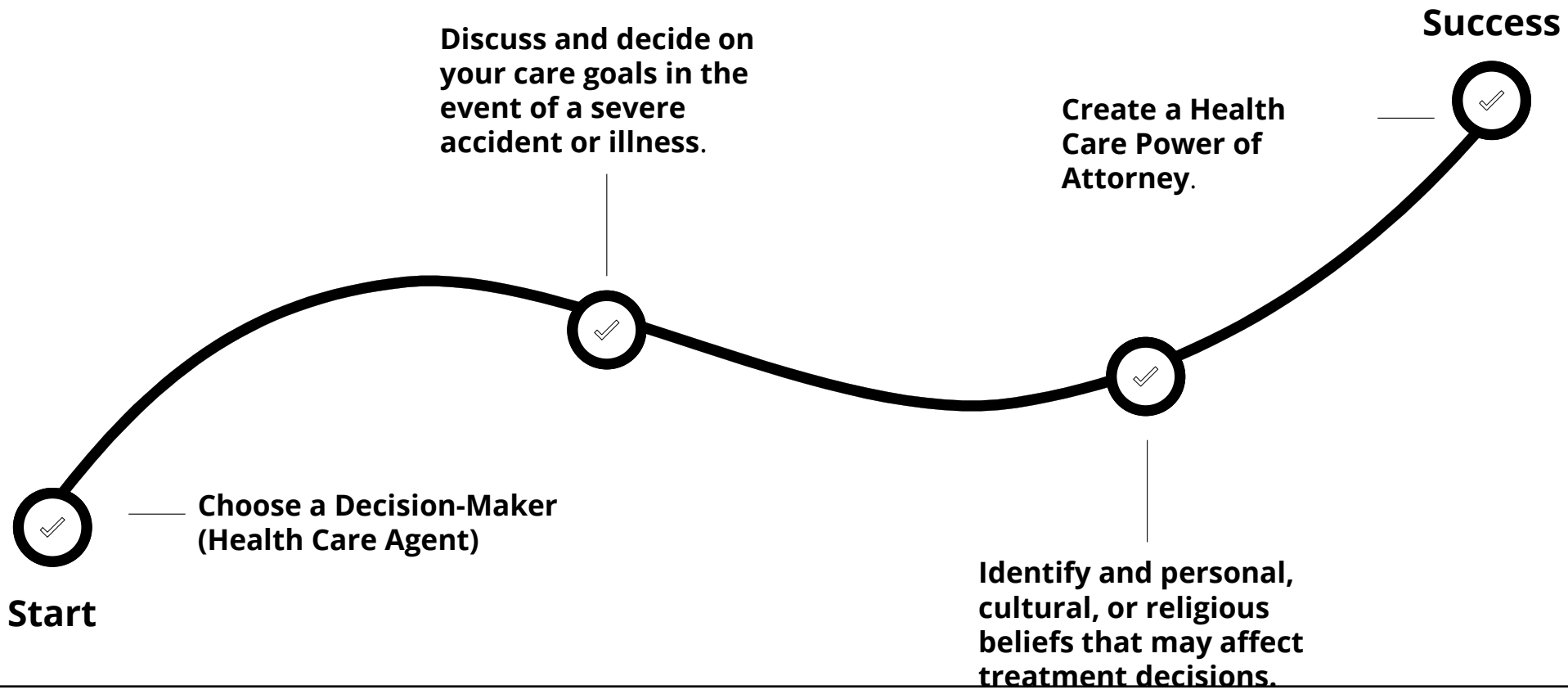
4. Before following my PAD, would my mental health care providers need a court to determine I am not competent to make a certain decision?

No. All that is required is that two providers believe you are unable to receive, process or communicate treatment information well enough to be able to manage your own health care decisions. The providers must document their decision in your medical records

5. Does the statute say anything about when my mental health providers may decline to follow my PAD?

No. However, a health care provider is likely to be able to override your health care agent's instructions if you are considered a danger to yourself or others, or otherwise in an emergency.

Advance Care Planning Steps



Choose a Decision Maker

Who can be trusted and will:

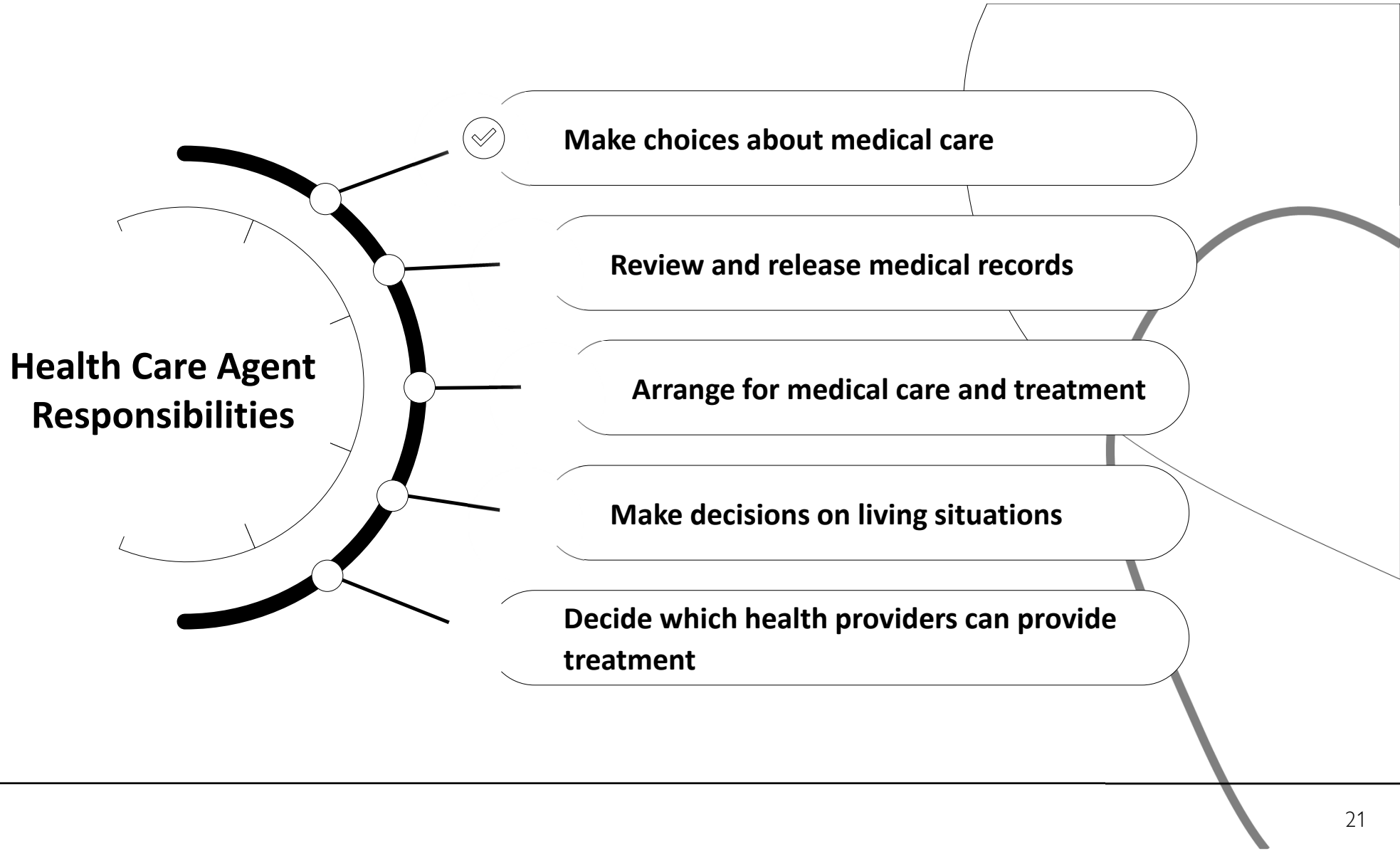
- Accept the role
- Talk with you about your goals, values and preferences
- Follow your choices, even if they do not agree with them
- Make decisions in sometimes difficult moments
- Have availability via telephone

When Does a Health Care Agent's Authority Begin?

The POA Must Be Activated

Two providers (MD, DO, APP, or Psychologist) must:

- Examine the individual AND
- Sign a statement certifying the person is incapacitated


Health Care Agent Responsibilities
Make choices about medical care
Review and release medical records
Arrange for medical care and treatment
Make decisions on living situations
Decide which health providers can provide treatment

Think About Your Care Goals

Reflect…

Look Back…

Explore What Gives Your Life Meaning

Explore Cultural and/or Spiritual Beliefs

What helps you face serious challenges in life?

What beliefs influence your preferences for medical interventions?

Do you need to discuss concerns or clarify your beliefs with others?

The 5D's Review

When Your Document is Complete

- Give copies to:
  - ✓ Health Care Agents
  - ✓ Primary Care Clinic
  - ✓ Any Health Care Organization where you receive care

- Talk to loved ones about your document and wishes

- Keep your original POA where it can be easily found

Reflection

- Describe a situation where advance care planning (or lack thereof) impacted a person's medical care?

- Think about 3 things that you will change in your practice to engage more clients in advance care planning conversations.

A Letter to My Loved One

Resources

- UW Health
  - www.uwhealth.org/acp (Free Advance Care Planning Virtual Workshops)
- The Conversation Project (Theconversationproject.org)
  - Several guides/forms/videos
- GWAAR-Guardianship Support Center (https://gwaar.org/guardianship-resources)
- Advance Care Planning & Advance Directive by the Wisconsin Medical Society
  - Advance Care Planning & Advance Directive (wismed.org)
  - Fillable Advance Directive forms in several languages
- National Resource Center on Psychiatric Advance Directives (https://nrc-pad.org/)
- Refer Client to Primary Care Provider for ACP
  - Most Health Care facilities have an ACP contact (often social work/spiritual care departments)

Questions?

thank you

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