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Plenary Session 5—Mental Health & Policy

ADVANCE CARE DIRECTIVES FOR PERSONS WITH MENTAL ILLNESS

M Swartz,1 Jeffrey Swanson1 1Duke University

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The movement toward patient-centred care has fueled considerable interest in Psychiatric Advance Directives (PADs), analogous to medical advance directives and health care proxies, as a possible remedy for loss of patient autonomy in mental healthcare decisions, patient alienation from the treatment process, and associated poor clinical outcomes. Based on the hope for these benefits, 25 US legislatures have adopted PAD statutes and are encouraging the appointment of healthcare proxies, through durable power of attorney, for persons with mental illness. PADs may include three types of anticipatory decision-making: (1) informed consent to future treatment; (2) a forecast of personal values; (3) and the entrusting of someone to act as a proxy decision maker. The role of a healthcare agent (HCA), or proxy decision maker, is to help ensure that the patient’s previously expressed wishes are fulfilled; to further interpret what treatment the patient would wish to receive (or not receive); or to act in the patient’s best interest and protect the patient’s welfare. A recently conducted study in five US communities found that patients have great interest in PADs and supports the idea that people with mental illnesses should write down the type of treatment they would like to receive if they become very ill at some point in the future; 70–83% across sites wished a PAD, but only 4–13% had any form of PAD. In this presentation we will discuss current interest in, barriers to implementing and efforts underway to foster large scale use of PADs.

Testimonial

The APCEL conference is an important venue for dissemination of critical information and emerging research on advance care planning. A focus on advance care planning for persons with mental illness will place psychiatric advance directives in the broader context of other types of mechanisms to foster patient-centred healthcare.