#### **SESSION 1997**

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SENATE BILL 757

Children and Human Resources Committee Substitute Adopted 4/30/97 House Committee Substitute Favorable 8/13/97 Fourth Edition Engrossed 8/18/97

Short Title: Advance Instr./Mental Health.

(Public)

Sponsors:

Referred to:

### April 8, 1997

1	A BILL TO BE ENTITLED
2	AN ACT TO ESTABLISH ADVANCE INSTRUCTION FOR MENTAL HEALTH
3	TREATMENT.
4	The General Assembly of North Carolina enacts:
5	Section 1. Article 3 of Chapter 122C of the General Statutes is amended by
6	designating G.S. 122C-51 through G.S. 122C-70 as "Part 1".
7	Section 2. Article 3 of Chapter 122C of the General Statutes is amended by
8	adding the following new Part to read:
9	"PART 2. ADVANCE INSTRUCTION FOR MENTAL HEALTH TREATMENT.
10	" <u>§ 122C-71. Purpose.</u>
11	(a) The General Assembly recognizes as a matter of public policy the fundamental
12	right of an individual to control the decisions relating to the individual's medical care, and
13	that this right may be exercised on behalf of the individual by an agent chosen by the
14	individual.
15	(b) The purpose of this Part is to establish an additional, nonexclusive method for
16	an individual to exercise the right to consent to or refuse mental health treatment when

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1		acks sufficient understanding or capacity to make or communicate mental		
2	health treatment decisions.			
3	(c) This Part is intended and shall be construed to be consistent with the provisions			
4		Chapter 32A of the General Statutes, provided that in the event of a		
5		n the provisions of this Part and Article 3 of Chapter 32A, the provisions		
6	of this Part control.			
7	" <u>§ 122C-72. D</u>			
8 9	As used in the have the meaning	his Part, unless the context clearly requires otherwise, the following terms		
10	(1)	<u>'Advance instruction' or 'advance instruction for mental health treatment'</u>		
11	(1)	means a written instrument, signed by two qualified witnesses, that		
11		makes a declaration of instructions, that also provides information and		
12		preferences regarding mental health treatment, and that may appoint an		
13		attorney-in-fact.		
14	(2)	'Attending physician' means the physician who has primary		
15	<u>(2)</u>	responsibility for the care and treatment of the principal.		
10	( <b>2</b> )	<u>'Attorney-in-fact' means an adult validly appointed under G.S. 122C-75</u>		
17	<u>(3)</u>	to make mental health treatment decisions for a principal under an		
18 19		advance instruction for mental health treatment and also means an		
20		alternative attorney-in-fact.		
20 21	(A)	<u>'Incapable' means that, in the opinion of a physician or eligible</u>		
21	<u>(4)</u>	psychologist, the person currently lacks the capacity to make and		
22		communicate mental health treatment decisions. As used in this		
23 24		subdivision, the term 'eligible psychologist' has the meaning given the		
24 25		term in G.S. 122C-3(13b).		
23 26	(5)	<u>'Mental health treatment' means the process of providing for the</u>		
20 27	<u>(5)</u>	physical, emotional, psychological, and social needs of the principal for		
27		the principal's mental illness. 'Mental health treatment' includes, but is		
28 29		not limited to, electroconvulsive treatment (ECT), commonly referred to		
30		as 'shock treatment', treatment of mental illness with psychotropic		
31		medication, and admission to and retention in a facility for care or		
32		treatment of mental illness.		
33	<u>(6)</u>	<u>'Principal' means the person making the advance instruction.</u>		
34	(0) (7)	'Qualified witness' means a witness who affirms that the principal is		
35	(1)	personally known to the witness, that the principal signed or		
36		acknowledged the principal's signature on the advance instruction in the		
37		presence of the witness, that the witness believes the principal to be of		
38		sound mind and not to be under duress, fraud, or undue influence, and		
39		that the witness is not:		
40		<u>a.</u> <u>The attending physician or mental health service provider or a</u>		
40 41		relative of the physician or provider; or		
42		<u>b.</u> <u>An owner, operator, or relative of an owner or operator of a</u>		
43		health care facility in which the principal is a patient or resident.		
		neutri cure nuent, in which the principal is a patient of fesident.		

1	"§ 122C-73. Scope, use, and authority of advance instruction for mental health
2	treatment.
3	(a) Any adult of sound mind may make an advance instruction regarding mental
4	health treatment. The advance instruction may include consent to or refusal of mental
5	health treatment. The advance instruction may also appoint an attorney-in-fact.
6	(b) An advance instruction may include, but is not limited to, the names and
7	telephone numbers of individuals to be contacted in case of mental health crisis,
8	situations that may cause the principal to experience a mental health crisis, responses that
9	may assist the principal to remain in the principal's home during a mental health crisis,
10	the types of assistance that may help stabilize the principal if it becomes necessary to
11	enter a facility, and medications that the principal is taking or has taken in the past and
12	the effects of those medications.
13	(c) A person shall not be required to execute or to refrain from executing an
14	advance instruction as a condition for insurance coverage, as a condition for receiving
15	mental or physical health services, as a condition for receiving privileges while in a
16	facility, or as a condition of discharge from a facility.
17	(d) <u>A principal may nominate, by advance instruction for mental health treatment</u> ,
18	the guardian of the person of the principal if a guardianship proceeding is thereafter
19	commenced. The court shall make its appointment in accordance with the principal's
20	most recent nomination in an unrevoked advance instruction for mental health treatment,
21	except for good cause shown.
22	(e) If, following the execution of an advance instruction for mental health
23	treatment, a court of competent jurisdiction appoints a guardian of the person of the
24	principal, or a general guardian with powers over the person of the principal, the advance
25 26	instruction for mental health treatment shall remain in effect and shall be superior to the
26 27	powers and duties of the guardian of the person with respect to mental health treatment
27	<u>covered under the advance instruction.</u> (f) An advance instruction for mental health treatment may be combined with or
28 29	incorporated into a health care power of attorney or general power of attorney that is
29 30	executed in accordance with the requirements of Chapter 32A of the General Statutes.
31	"§ 122C-74. Effectiveness and duration; revocation.
32	(a) <u>A validly executed advance instruction becomes effective when it is delivered</u>
33	to the principal's physician or other mental health treatment provider and remains valid
34	until revoked or expired. The physician or provider shall act in accordance with an
35	advance instruction when the principal has been determined to be incapable. The
36	physician or provider shall continue to obtain the principal's informed consent to all
37	mental health treatment decisions as required by law.
38	(b) Upon being presented with an advance instruction, a physician or other
39	provider shall make the advance instruction a part of the principal's medical record.
40	When acting under authority of an advance instruction, a physician or provider shall
41	comply with it to the fullest extent possible, unless compliance is not consistent with:
42	(1) Best medical practice to benefit the principal;
43	(2) The availability of treatments requested; and

1997

1	(3) Applicable law.
2	If the physician or other provider is unwilling at any time to comply with any part or
3	parts of an advance instruction for one or more of the reasons set out in subdivisions (1)
4	through (3) of this subsection, the physician or provider shall promptly notify the
5	principal and, if applicable, the attorney-in-fact, and shall document the reason for not
6	complying with the advance instruction and shall document the notification in the
7	principal's medical record.
8	(c) Except as provided in subsection (b) of this section, the physician or provider
9	may subject the principal to mental health treatment in a manner contrary to the
10	principal's instructions as expressed in an advance instruction for mental health treatment
11	<u>only:</u>
12	(1) If the principal is committed to a 24-hour facility pursuant to Article 5
13	of G.S. 122C and treatment is authorized in compliance with G.S.
14	122C-57 and administrative rule; or
15	(2) In cases of emergency endangering life or health.
16	(d) An advance instruction does not limit any authority provided in Article 5 of
17	G.S. 122C either to take a person into custody, or to admit, retain, or treat a person in a
18	facility.
19	(e) An advance instruction for mental health treatment continues in effect for a
20	period of two years, unless revoked. An advance instruction may be revoked in whole or
21	in part at any time by the principal if the principal is capable. A revocation is effective
22	when a capable principal communicates the revocation to the attending physician or other
23	provider. The attending physician or other provider shall note the revocation as part of
24	the principal's medical record. The authority of a named attorney-in-fact and any
25 26	alternative attorney-in-fact named in the advance instruction continues in effect as long as
26 27	the advance instruction appointing the attorney-in-fact is in effect or until the attorney-in-
27 28	<u>fact has withdrawn.</u> (f) A physician or provider who administers or does not administer mental health
28 29	treatment according to and in good faith reliance upon the validity of an advance
29 30	instruction is not subject to criminal prosecution, civil liability, or professional
31	disciplinary action resulting from a subsequent finding of an advance instruction's
32	invalidity.
33	" <u>§ 122C-75. Scope of authority of attorney-in-fact; powers and duties; limitation on</u>
34	liability.
35	(a) An advance instruction may designate a competent adult to act as attorney-in-
36	fact to make decisions about mental health treatment. An alternative attorney-in-fact may
37	also be designated to act as attorney-in-fact if the original designee is unable or unwilling
38	to act at any time. An attorney-in-fact who has accepted the appointment in writing may
39	make decisions about mental health treatment on behalf of the principal only when the
40	principal is incapable. The decisions shall be consistent with any desires the principal
41	has expressed in the advance instruction.
42	(b) None of the following may serve as attorney-in-fact:

1	(1) The attending physician or mental health service provider or an
2	employee of the physician or provider, if the physician, provider, or
3	<ul> <li>(2) <u>employee is unrelated to the principal by blood, marriage, or adoption.</u></li> <li>(2) An owner, operator, or employee of a health care facility in which the</li> </ul>
4 5	
5 6	principal is a patient or resident, if the owner, operator, or employee is unrelated to the principal by blood, marriage, or adoption.
7	(c) The attorney-in-fact shall not have authority to make mental health treatment
8	decisions unless the principal is incapable.
9	(d) The attorney-in-fact is not, as a result of acting in that capacity, personally
10	liable for the cost of treatment provided to the principal.
11	(e) Except to the extent the right is limited by the advance instruction or any
12	federal law, an attorney-in-fact has the same right as the principal to receive information
13	regarding the proposed mental health treatment and to receive, review, and consent to
14	disclosure of medical records relating to that treatment. This right of access does not
15	waive any evidentiary privilege.
16	(f) In exercising authority under the advance instruction, the attorney-in-fact shall
17	act consistently with the desires of the principal as expressed in the advance instruction.
18	If the principal's desires are not expressed in the advance instruction and are not
19	otherwise known by the attorney-in-fact, the attorney-in-fact shall act in what the
20	attorney-in-fact in good faith believes to be the manner in which the principal would act
21	if the principal was not incapable.
22	(g) The appointment of an attorney-in-fact shall not revoke, restrict, or otherwise
23	affect any nonmental health treatment powers granted by the principal to a health care
24	agent pursuant to a health care power of attorney or attorney-in-fact pursuant to a general
25	power of attorney; provided that the mental health treatment powers granted to the
26	attorney-in-fact shall be superior to any similar powers granted by the principal to a
27	health care agent pursuant to a health care power of attorney or an attorney-in-fact
28	pursuant to a general power of attorney.
29	(h) An attorney-in-fact is not subject to criminal prosecution, civil liability, or
30	professional disciplinary action for any action taken in good faith pursuant to an advance
31	instruction for mental health treatment.
32	(i) <u>An attorney-in-fact may withdraw by giving notice to the principal.</u> If a
33	principal is incapable, the attorney-in-fact may withdraw by giving notice to the attending
34	physician or provider. The attending physician or provider shall note the withdrawal as
35	part of the principal's medical record.
36	(j) A person who has withdrawn under the provision of subsection (i) of this
37	section may rescind the withdrawal by executing an acceptance after the date of the withdrawal. The acceptance shall be in the same or similar form as provided for in C.S.
38 39	withdrawal. The acceptance shall be in the same or similar form as provided for in G.S. 122C-77 for accepting an appointment. A person who rescinds a withdrawal shall give
39 40	<u>122C-77 for accepting an appointment</u> . A person who rescinds a withdrawal shall give notice to the principal if the principal is capable or to the principal's health care provider
40 41	if the principal is incapable.
41	"§ 122C-76. Penalty.
74	Jame 10. Penuity.

1 2	It is a Class 2 misdemeanor for a person, without authorization of the principal, willfully to alter, forge, conceal, or destroy an instrument, the reinstatement or revocation
3	of an instrument, or any other evidence or document reflecting the principal's desires and
4	interests, with the intent or effect of affecting a mental health treatment decision.
5	"§ 122C-77. Statutory form for advance instruction for mental health treatment.
6	The use of the following or similar form in the creation of an advance instruction for
7	mental health treatment is lawful, and when used, it shall be construed in accordance with
8	the provisions of this Article.
9	
10	<u>'ADVANCE INSTRUCTION FOR MENTAL HEALTH TREATMENT</u>
11	I, being an adult of sound mind, willfully and voluntarily make this advance
12	instruction for mental health treatment to be followed if it is determined by a physician or
13	eligible psychologist that my ability to receive and evaluate information effectively or
14	communicate decisions is impaired to such an extent that I lack the capacity to refuse or
15	consent to mental health treatment. 'Mental health treatment' means the process of
16	providing for the physical, emotional, psychological, and social needs of the principal.
17	<u>'Mental health treatment' includes electroconvulsive treatment (ECT), commonly referred</u>
18	to as 'shock treatment', treatment of mental illness with psychotropic medication, and
19 20	admission to and retention in a facility for care or treatment of mental illness.
20 21	<u>I understand that psychoactive medications and electroconvulsive treatment (ECT)</u> (commonly referred to as 'shock treatment') may not be administered without my express
21	and informed written consent or, if I am incapable of giving my informed consent, the
22	express and informed written consent of my legally responsible person, health care agent
23 24	named pursuant to a valid health care power of attorney, or attorney-in-fact named
24 25	pursuant to a valid advance instruction for mental health treatment, as required under
26	G.S. 122C-57.
27	I understand that I may become incapable of giving or withholding informed consent for
28	mental health treatment due to the symptoms of a diagnosed mental disorder. These
29	symptoms may include:
30	<u></u>
31	
32	<b>PSYCHOACTIVE MEDICATIONS</b>
33	If I become incapable of giving or withholding informed consent for mental health
34	treatment, my instructions regarding psychoactive medications are as follows:
35	I consent to the administration of the following medications:
36	
37	
38	I do not consent to the administration of the following medications:
39	
40	
41	Conditions or limitations:
42	
43	ADMISSION TO AND RETENTION IN FACILITY

1	If I become incapable of giving or withholding informed consent for mental health
2	treatment, my instructions regarding admission to and retention in a health care facility
3	for mental health treatment are as follows:
4	I consent to being admitted to a health care facility for mental health treatment.
5	My facility preference is
6	I do not consent to being admitted to a health care facility for mental health
7	treatment.
8	This advance instruction cannot, by law, provide consent to retain me in a facility for
9	more than 10 days.
10	Conditions or limitations:
11	
12	
13	ADDITIONAL INSTRUCTIONS
14	These instructions shall apply during the entire length of my incapacity.
15	In case of mental health crisis, please contact:
16	<u>1.</u> <u>Name:</u>
17	Home Address:
18	Home Telephone Number: <u>Work Telephone Number:</u>
19	<u>Relationship to Me:</u>
20	<u>2. Name:</u>
21	Home Address:
22	Home Telephone Number: Work Telephone Number:
23	Relationship to Me:
24	<u>3.</u> <u>My Physician:</u>
25	Name: Telephone Number:
26	<u>4. My Therapist:</u>
27	Name: Telephone Number:
28	The following may cause me to experience a mental health crisis:
29	
30	
31	The following may help me avoid a hospitalization:
32	
33	
34	I generally react to being hospitalized as follows:
35	
36	
37	Staff of the hospital or crisis unit can help me by doing the following:
38	
39	
40	I give permission for the following person or people to visit me:
41	
42	
43	

treatment	(commonly	referred	to	as	'shock
treatment'):					
Other instruction	<u>ons:</u>				
<u>I ha</u>	ave attached an add	litional sheet of	instructions	to be follow	ved and
	considered part of	this advance instru	uction.		
	AT	TORNEY-IN-FA	CT		
I hereby appoint	<u>nt:</u>				
Name:					
Home Address		Work T	alanhana Nu	mhor	
Home Telepho	torney-in-fact to mak		<u>elephone Nu</u> ling my men		nent if I
•	ble of giving or with				
	named above refuses				oke that
-	rity to act as my attor		-		
my attorney-in	• •				
Name:					
Home Address	<u>:</u>				
Home Telepho	ne Number:	Work Te	elephone Nu	mber:	
• •	n-fact is authorized				
	have expressed in t			·	
	wn by my attorney-ir	n-fact, my attorney	y-in-fact is to	o act in what he	e or she
	my best interests.				
	necessary for the cour		rdian for me	, I hereby nomin	nate my
•	t to serve in that capa	•			1
	re, I indicate that I and	•	*		
	f this document, and	understand the fu	II import of	this grant of po	owers to
my attorney-in	<u>-fact.</u>				
Signature	of Principal		Date		
			NIDOODO		
Wa offine the		ATION OF WIT		ha principal ai	anad ar
	at the principal is pe				
acknowledged	the principal's signation	ature on this adv	ance instruc	and for mental	i neaiti

1	treatment in our presence, that the principal appears to be of sound mind and not under		
2	duress, fraud, or undue influence, and that neither of us is:		
3	A person appointed as an attorney-in-fact by this document;		
4	The principal's attending physician or mental health service provider or a relative of the		
5	physician or provider;		
6	The owner, operator, or relative of an owner or operator of a facility in which the		
7	principal is a patient or resident; or		
8	A person related to the principal by blood, marriage, or adoption.		
9	Witnessed by:		
10	Witness: Date:		
11	Witness: Date:		
12	STATE OF NORTH CAROLINA		
13	<u>COUNTY OF</u>		
14			
15	ACCEPTANCE OF APPOINTMENT AS ATTORNEY-IN-FACT		
16	I accept this appointment and agree to serve as attorney-in-fact to make decisions about		
17	mental health treatment for the principal. I understand that I have a duty to act consistent		
18	with the desires of the principal as expressed in this appointment. I understand that this		
19	document gives me authority to make decisions about mental health treatment only while		
20	the principal is incapable as determined by a qualified crisis services professional and a		
21	physician or eligible psychologist. I understand that the principal may revoke this		
22	advance instruction in whole or in part at any time and in any manner when the principal		
23	is not incapable.		
24			
25	Signature of Attorney-in-fact Date		
26			
27	Signature of Alternative Attorney-in-fact Date' "		
28	Section 3. G.S. 122C-57 reads as rewritten:		
29	"§ 122C-57. Right to treatment and consent to treatment.		
30	(a) Each client who is admitted to and is receiving services from a facility has the		
31	right to receive age-appropriate treatment for mental health, mental retardation, and		
32	substance abuse illness or disability. Each client within 30 days of admission to a facility		
33	shall have an individual written treatment or habilitation plan implemented by the		
34	facility. The client and his-the client's legally responsible person shall be informed in an		
35	advance of the potential risks and alleged benefits of the treatment choices.		
36	(b) Each client has the right to be free from unnecessary or excessive medication.		
37	Medication shall not be used for punishment, discipline, or staff convenience.		
38	(c) Medication shall be administered in accordance with accepted medical		
39	standards and only upon the order of a physician as documented in the client's record.		
40	(d) Each voluntarily admitted elient or his client, the client's legally responsible		
41	person person, a health care agent named pursuant to a valid health care power of		
42	attorney, or an attorney-in-fact named pursuant to a valid advance instruction for mental		
43	health treatment has the right to consent to or refuse any treatment offered by the facility.		

Consent may be withdrawn at any time by the person who gave the consent. If treatment 1 2 is refused, the qualified professional shall determine whether treatment in some other 3 modality is possible. If all appropriate treatment modalities are refused, the voluntarily 4 admitted client may be discharged. In an emergency, a voluntarily admitted client may be 5 administered treatment or medication, other than those specified in subsection (f) of this 6 section, despite the refusal of the client or his-client, the client's legally responsible person. 7 person, a health care agent named pursuant to a valid health care power of attorney, or an 8 attorney-in-fact named pursuant to a valid advance instruction for mental health treatment. The Commission may adopt rules to provide a procedure to be followed when 9 10 a voluntarily admitted client refuses treatment. (e) In the case of an involuntarily committed client, treatment measures other than 11 12 those requiring express written consent as specified in subsection (f) of this section may be given despite the refusal of the <del>client or his</del>-client, the client's legally responsible <del>person</del> 13 14 person, a health care agent named pursuant to a valid health care power of attorney, or an 15 attorney-in-fact named pursuant to a valid advance instruction for mental health treatment in the event of an emergency or when consideration of side effects related to the specific 16 17 treatment measure is given and in the professional judgment, as documented in the 18 client's record, of the treating physician and a second physician, who is either the director 19 of clinical services of the facility, or his the director's designee, either: 20 The client, without the benefit of the specific treatment measure, is (1)21 incapable of participating in any available treatment plan which will give him-the client a realistic opportunity of improving his-the client's 22 23 condition: 24 There is, without the benefit of the specific treatment measure, a (2)significant possibility that the client will harm himself or others before 25 improvement of his-the client's condition is realized. 26 27 Treatment involving electroshock therapy, the use of experimental drugs or (f)procedures, or surgery other than emergency surgery may not be given without the 28 express and informed written consent of the elient or his-client, the client's legally 29 30 responsible person, a health care agent named pursuant to a valid health care power of attorney, or an attorney-in-fact named pursuant to a valid advance instruction 31 for mental health treatment. This consent may be withdrawn at any time by the person 32 who gave the consent. The Commission may adopt rules specifying other therapeutic and 33 diagnostic procedures that require the express and informed written consent of the elient 34 35 or his client, the client's legally responsible person person, a health care agent named pursuant to a valid health care power of attorney, or an attorney-in-fact named pursuant 36 to a valid advance instruction for mental health treatment prior to their initiation." 37

38 Section 4. This act becomes effective January 1, 1998.