

Attachment 1: Background information and definitions

Background

There are imminent changes to legislation, namely adult decision-making capacity law and the repeal and replace of the Mental Health (Compulsory Assessment and Treatment) Act 1992, which we expect will significantly impact the use of advance directives/advance preference statements in mental health services.

Terms/definitions

An **advance care plan** refers to a document where someone has outlined what matters most to them, their values and goals and their preferences for current and future health care – including end of life care and wishes. The New Zealand My Advance Care Plan and Guide provides a template for consumers to this. This may include advance directives. Advance care plans are typically completed in the community (prior to any admissions) and may or may not include information specific to mental health care. They are designed for general use and are not designed specifically for mental health services or for planning for future mental health crises.

An **advance directive** is a person's refusal or consent to certain specific treatments. For it to be valid an advance directive has certain criteria that must be met: they are created by a person who has mental capacity to make the directive, the directive is made freely and without undue influence, the person intends it to apply to the current circumstances and, at the time of making it, the person understood the benefits, risks and consequences of consenting to or refusing the specific treatment.

However, within mental health settings some refer to an advance directive outside of its true definition and encompasses broader advance planning concepts rather than being focused solely on refusal or consent to treatment.

A Mental Health Advance Preferences Statement – (but also sometimes known as an MAP) is a way to let people know what you would like to happen if you experience an episode of mental distress and are unable to communicate your preferences. These advance preference statements are considered best practice internationally. An example of a MAPS template can be viewed here: <https://www.southernhealth.nz/getting-help-you-need/mental-health-and-addictions/mental-health-advance-preferences-statement>

MAPS or similar tools are not currently used widely in Aotearoa New Zealand.

The national advance care planning programme team

The role of the national programme is to provide and maintain national training and resources for advance care planning and provide oversight, guidance, and support to districts to develop systems and processes to effectively implement advance care planning in their services.