



# Mental Health Advance Preferences Statement

FAQs for consumers

## What is a Mental-health Advance Preferences statement (MAP)?

It is a way for you to let people know what you would like to have happen if you experience an episode of mental distress. A MAP is a way for you to have a voice when you might not normally be heard because you are too unwell or not in a position to be able to speak for yourself.

## Why should I have a MAP?

This is a good way to make sure you have a say in decisions about your care. It can include information about a variety of things that are important to you.

## What should I include in my MAP?

It should include the things you believe are most important to you in helping you in your recovery. This could be anything from the kind of treatments you feel work best for you, to people you want to have involved in your care, to things about your personal life that you want to make sure get taken care of. The last page of the MAP document has a list of suggestions of things you might want to include, but these are just helpful prompts and you may not wish to include some, or any, of the items suggested.

## Do I need a lawyer to make a MAP?

No, you can write one by yourself, but it would be best if you write one with help from someone you trust who you feel understands your situation and might be able to talk you through some options. Just remember, a MAP is about what you want, and what you feel is best for you.

## Can anyone help me write my MAP?

Yes. It could be a support person, or a family member, or your PDN, if you believe that that person knows you best. While you do not need to write the MAP together with your clinical team, once you have made a MAP, we would encourage you to discuss it with your clinical team, so they are aware of your preferences before a crisis occurs.

## Does my MAP have to be in a specific form?

No. But we would suggest you follow the form we have given you. You don't need to fill out everything that is suggested, and you can add any other things that you think are important. It is best if your MAP is in writing, and you sign and date it. You should also have someone who knows you well sign it to confirm that you understand what choices you are making and are well enough to make these choices at the time you are writing it (such as your mental health support worker).

## Can I do my MAP online?

Yes. We have a web-based form at [www.southernhdb.govt.nz/pages/mental-health-advance-preferencesadvance-directives](http://www.southernhdb.govt.nz/pages/mental-health-advance-preferencesadvance-directives).

## I don't have access to a computer? Does this mean I can't make a MAP?

No. You can fill out a paper copy with your support person and then give the hard copy to your mental health team and they will scan it into the electronic file. You can then ask to see a copy of what was entered online to make sure that it says everything you wanted it to say.

### Who should have a copy of my MAP?

There will be a note on your medical records to say you have a MAP. We would suggest that you also keep a paper copy for yourself and give copies to other people you believe would be helpful (such as a family member, a support person, your PDN). If you need to have copies provided, we can help you with that.

### How will people know that I have a MAP?

After you have written a MAP, it will become part of your electronic medical files. If a doctor or member of your treatment team looks at your notes, they will see a flag telling them you have a MAP. You may also want to keep a copy of your MAP where you can find it easily, and give a copy to your whānau, family or support person, and ask them to make sure your clinical care team knows you have a MAP.

### Does my MAP have to be followed?

No, not always. When deciding whether or not to follow your MAP, your clinician will need to decide whether you were able to understand what you were asking for when you wrote the MAP, whether your choices were really yours, and not someone else telling you what to write, whether the choices you made apply to the present situation, and whether or not things have changed so much since you wrote the MAP that it no longer makes sense. Even if your treatment team does not follow some of your preferences, they should review it and take it into consideration when making decisions regarding your treatment.

### What if I change my mind about what I want in my MAP?

You can make any changes you want when you are well enough to make decisions. We would recommend you review your MAP with your care team regularly and update it to reflect any changes that might occur.

### How do I make changes in my MAP?

Talk to your clinical care team or peer support counsellor. They will help you make the changes to your MAP and make sure it gets added to your electronic file.

### What if I change my mind about treatment preferences when I am unwell?

It depends how unwell you are, and how much it affects your ability to understand your treatment needs. As long as you currently understand the issues regarding your treatment, and you have the right to change your mind and ask for something that is not in your MAP, or that goes against what you had in your MAP. However, if you are under the Mental Health Act, your current wishes might be overridden by the treatment team.

### How long is my MAP good for?

There is no specific timeframe, but it should be current enough that people will see that it applies to you now. We suggest that you review your MAP every 18 months to two years, or after any major life changes (such as starting a new relationship, having children, or the death of someone close to you).

### What can I do if my MAP is not followed, and I think it should have been?

First, talk about this with someone you trust who understands the issues, such as a peer support counsellor or your clinician. If you still believe that your preferences should have been followed, you can complain to the Health and Disability Commissioner.