

## **Guardian of the Person - Video 14 Behavioral or Mental Health Needs**

*(Introductory music and images)*

*Speaker appears in comfortable, neutral setting. At times words and pictures will appear next to them or in place of them to support the dialogue.*

This is the fourth and final video about being a guardian of the person. In this video, we will discuss the role of the guardian of the person in Pennsylvania when the incapacitated person has behavioral or mental health needs.

All guardians should refer to the court order appointing them to determine their specific powers and responsibilities. The Court may include specific provisions or limitations on what you can and cannot do. In general, as guardian of the person, you must help the incapacitated person develop their own skills and self-reliance where possible, consider their beliefs and wishes prior to incapacity and any input they can provide currently, to make decisions in their best interest. It is important to recognize that the incapacitated person's needs will likely change over time and their care and services will need to be adjusted accordingly.

If mental or behavioral health concerns are shared with you about the incapacitated person by anyone, including medical or psychiatric professionals, or staff at a residential facility where the person lives, or other service providers, ask them to clearly describe both the behavior, and interventions they have already tried. Be sure to involve the incapacitated person's regular mental health care provider or team of providers when considering possible interventions. It is part of your role to preserve the rights and freedoms of the incapacitated person to the greatest extent possible while also protecting them from harm. It is important to make sure that staff or service providers are informed of any new interventions so they can implement them. Monitor outcomes to determine if the intervention is effective.

While medical professionals may determine appropriate treatment, it is important that you understand the treatment plan and communicate it to service providers and others who interact with the incapacitated person regularly. Remember to discuss any treatments with the incapacitated person so they can be involved in planning and decision-making to the greatest extent possible.

When unpredictable or aggressive behavior occurs it is easy to panic, but that may make the situation worse. If you have concerns, contact the incapacitated person's mental health care providers for advice. Some strategies to help you remain calm in these situations include using a quiet voice with a commanding tone, keeping a safe distance between you and the escalated person without turning away from them, looking at their face or shoulder area, rather than directly in their eyes, showing support and empathy, not arguing with them, being firm, and setting limits. If a situation ever becomes dangerous or life-threatening, immediately leave the area or take steps to ensure your own safety and call 9-1-1.

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Occasionally, an individual's behavior may put themselves or others at risk. If this is a concern with the incapacitated person, it is important for you to confer with the medical and psychological providers to assure that their treatment plan include responses to risky or dangerous behavior.

Rarely, the use of physical restraints may be recommended by a person's medical and psychiatric care team. If the use of restraints is suggested by a medical provider or residential services provider, the incapacitated person's regular health care providers who are familiar with them and their care plan should be consulted. A doctor's order is required prior to use of these restraints. Before agreeing to the use of physical restraints or medical interventions to subdue the incapacitated person, make sure to ask questions so you understand the reason for the intervention and why no other options will work. Restraints should only be used as a last resort for certain medical or behavior problems, an individualized care plan should be in place prior to the use of restraints, the incapacitated person should be monitored frequently while restrained, and restraints should be removed as soon as it is safe to do so.

In potentially life-threatening behavioral or mental health situations, call the National Suicide and Crisis Lifeline at 988. This will connect you with a counselor who can provide phone-based support. These counselors can also engage a mental health crisis team to come to the incapacitated person's location, offer therapeutic interventions, provide transportation if further evaluation is needed, and make referrals for outpatient services. This service is available 24 hours a day, seven days a week and is free.

If you are a witness to a crisis situation in which the incapacitated person is at imminent risk of danger to themselves or others, is suicidal or is not eating or not able to care for themselves, and the person is not already in a residential placement that is able to meet their needs, you may need to seek an involuntary mental health commitment for the person under Section 302 of the Mental Health Procedures Act. This is informally known as a "302" proceeding. Note that your authority as guardian does NOT grant you the authority to authorize an inpatient mental health commitment. In seeking a mental health commitment, you will be treated like any other family member or other interested person requesting an immediate and urgent mental health intervention. If you are able, you may want to bring the incapacitated person to an emergency room to be evaluated by a physician to determine whether inpatient mental health treatment is appropriate.

It may also be wise to contact a local Mobile Crisis Unit, Mental Health Crisis hotline or emergency services in your local area, and you should prepare to have these phone numbers ready when needed.

Remember, certain decisions and procedures require prior court approval. This includes electroconvulsive therapy, experimental treatment, and psychosurgery. If a doctor

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recommends one of these therapies, you may not consent without petitioning the court, attending a hearing, and receiving court approval.

If requesting court approval, you should file a petition with the Court and be prepared to present evidence from a doctor to support that the decision you seek to make is in the best interest of the incapacitated person. If the incapacitated person communicated any objection to the proposed action at any time before or after they were found to be incapacitated, you must tell the court.

An attorney representing the incapacitated person should be notified of any such petition, and if there is no counsel serving, the court must appoint independent counsel for the incapacitated person.

As you make decisions on behalf of the incapacitated person, it is important to allow them to make their own decisions and develop independence to the extent possible. You must always act in the best interests of the IP and base your decisions on their needs, wants, and beliefs to the extent possible.

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