
Rights Advisor

Appointed by the Provincial Government, the rights advisor is responsible for providing advice and assistance to:

- Involuntary patients;
- Individuals under a community treatment order; and,
- Patient representatives.

The primary purpose of the rights advisor is to make sure that involuntary patients and individuals under a community treatment order receive appropriate advice regarding their rights within 24 hours of the person becoming an involuntary patient or being placed under a community treatment order. The rights advisor is then required to follow up with these individuals and their patient representatives within 10 days after their first meeting.

Rights advisors are required to inform involuntary patients, individuals under a community treatment order and patient representatives of the following:

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- A person's status as an involuntary patient or under a community treatment order;
 - His or her rights under the authority of the Act;
 - How he or she may hire or get in contact with a lawyer; and,
 - How an individual may apply for a review by the Mental Health Care and Treatment Review Board.

For more information, visit:

[*www.gov.nl.ca/health/mhcta*](http://www.gov.nl.ca/health/mhcta)



MENTAL HEALTH *Care & Treatment Act*

Patient Representatives and Rights Advisors



The *Mental Health Care and Treatment Act* came into force October 1, 2007, and focuses on the protection and treatment of people living with severe mental illness.

Rights-Based Approach

The Act outlines what an individual can expect from the health care system if involuntarily admitted (certified) to hospital or placed under a community treatment order (CTO).

The Act also ensures that individuals are advised of their rights, including:

- Why a certificate of involuntary admission or a community treatment order has been issued or renewed, and receive a copy of the certificate or order;
- Reasonable access to a telephone and visitors;
- Send and receive correspondence;
- Retain and instruct legal counsel;
- Have input into treatment decisions;
- Appeal a certificate of involuntary admission or a community treatment order or renewal; and,

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- Access to a patient representative and rights advisor.

The Act legislates two roles that are essential to ensuring the rights-based approach is maintained—the patient representative and the rights advisor.

Patient Representative

Chosen by the person involuntarily admitted or placed under a community treatment order, the patient representative is someone who has agreed to act on the patient's behalf.

This person can be someone the patient trusts and whom he or she feels will best represent his or her interests and concerns.

A person with a mental illness may choose a patient representative at any time. However, the patient may wish to choose someone and discuss with them any concerns and identify any needs while he or she is well.

It is also important to know that the Act requires the physician to consult with an individual and his or her patient representative.

This is an opportunity for the physician to explain the purpose, nature and any effects of proposed diagnosis and treatment, and for the patient and his or her representative to explain their needs and concerns.

Limits of Representation

It is important to remember that the Act does not compel the physician to accept the recommendations made by the patient representative on behalf of the involuntary patient.

The physician will consider these views in making decisions about diagnosis and the treatment plan. The patient representative shares the wishes of the patient, but is not permitted to make decisions on the patient's behalf.

If a person has not named a patient representative, one will be named from his or her family such as a mother, father, sister or brother.

If the involuntary patient does not agree with the choice that has been made, he or she may choose not to have anyone act as a representative.
