

DECISION-SPECIFIC SCREENING TOOL To assist with assessment of capacity





WHAT IS THIS TOOL?

This tool provides a structured way for professionals to consider systematically whether an adult requires a formal assessment of their capacity for decision making. It is designed to support professionals to consider key factors relating to an adult's capacity at an early point and record that information. It consists of two main parts and an appendix:

- **Part 1** Captures standard biographical information about the adult for whom there is a query about capacity; the reason for the decision to refer for assessment; the presence of current risks to the adult; the adults views; and any practical considerations relating to facilitating an assessment of capacity.
- **Part 2** Asks specific questions about various aspects of the adult's decision making abilities. This section allows professionals to focus on and capture where there may be concerns about capacity for decision making.
- Appendix Contains a flowchart which clearly outlines the process to be followed in seeking a capacity assessment.

WHO IS IT FOR?

This tool is primarily designed for non-medical members of professional teams working with adults where there is a query in relation to an individual's capacity for decision making. It is designed to support such professionals in considering, and then agreeing, whether a formal assessment of capacity should be sought.

Any referral for assessment of capacity should be:

- **Specific** with regard to a particular decision to be made
- Focused, rather than a number of questions we would encourage referrers to focus on one or two questions which need examined
- Timely, i.e., assessed at the time the person is required to make the decision
- With a clear potential outcome, such as considering Guardianship under the Adults with Incapacity (Scotland) Act 2000

It is also important that a person has been given information and all necessary support regarding their choices and communication to allow them the opportunity to make a decision and/or express their preferences. This is a key principle of <u>supported decision making</u>.

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WHAT HAPPENS NEXT

Once the tool is completed, and it indicates the need for a capacity assessment, the document should be sent to the appropriate professional/team. This will vary depending on the adult's needs and circumstances. If the capacity assessment is related to **protection based decisions (such as Adult Support and Protection matters)** there is an <u>agreed Capacity Pathway</u> which will tell you where to send this document.

Each referral will be discussed once received and allocated to the most appropriate professional. Input may be multidisciplinary, requiring specific input from multiple professionals e.g. speech and language therapy, clinical psychology.

Some standard timelines have been agreed for the delivery of capacity assessments

Type of Request	Target Timeline
Urgent Assessment	Maximum 4 weeks from receipt of tool (may be earlier)
[Adult Support and Protection cases and other cases where there is clear potential risk of harm to the adult or others]	
Standard Assessment	Maximum 3 months from receipt of tool
	(may be earlier)

Please note, some assessments may take longer than the indicated timelines to complete, due to the clinical complexity of the person being assessed.

Additionally, regardless of whether the outcome of this tool is to refer for a capacity assessment, if professionals have concerns about an adult's vulnerability and risk – they must consider and follow the appropriate **Adult Support and Protection** referral processes. If there are issues or concerns about the process of seeking a capacity assessment, these should be **escalated** to your line manager immediately.

FURTHER READING:

- Adults with Incapacity (Scotland) Act 2000: Communication and Assessing Capacity: A guide for social work and health care staff
- Mental Welfare Commission Good Practice Guide: Supported Decision Making

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PART 1

Name of		CareFirst			CHI:	
Adult		No.				
Worker		Date				
Details						
risks and all	ternatives of the decision	on; ability to ners, ability	o weigh up the poss	ible outcomes ecision or show	in order to	n; understand the benefits, o arrive at a decision; ability ncy in decision making and
gather eviden	•	acking capa	city in relation to spec	ific decisions an	nd also to c	ing process. It may be used to onsider whether a more formal 2000.
Reason for as	sessment:					
What are the cu Child and Adult	urrent concerns (including Protection)					
How long has the regarding capacity	here been a concern city?					
Are there risks concern?	s to the person of					
NB it is the refe	rrer's responsibility to					
	asonable risk management					
Details of the a	adults views on the					
	made or action to be					
taken						
Where should	the person be seen?					
Are there any	known risks to staff?					

What are the key decisions facing the adult for which capacity is being queried?							
Who was cons	ulted in forming your opinion	nion of the adult's decision-making ability?					
Name	Relationship with Adult	Contact Details	View	View			

Q: Does the adult have a mental	Yes	No	Not Sure	For example: dementia, learning disability, brain	Condition
disorder (diagnosed			Sule	injury, personality	
or suspected) or are				disorder, neurological	
they unable to communicate				condition, mental illness etc.	
because of a				0.00	
physical disability?					

If you are not sure whether someone has a mental disorder, or what kind of mental disorder they have, seek assessment of this through the usual referral channels.

Q1: Do you consider the adult able to understand the information relevant to the decision? Has this information been provided in way that he/she is able to understand?	Yes	No	Not Sure	For example: a lady with learning disabilities who has never managed her own finances may need to receive information in an accessible manner. Information may need to be repeated.	Supporting Evidence
Q2: Do you consider the adult able to	Yes	No	Not Sure	An adult may need to be asked on several	Supporting Evidence
retain the information for long enough to use it in order to make a choice or an effective decision?				occasions to confirm the consistency of their response. Where a person has difficulty remembering the decision but answers consistently this makes their decision valid.	
Q3: Do you consider the adult able to	Yes	No	Not Sure	This may include understanding the	Supporting Evidence
weigh up the information about this decision?				consequences of the decision for themselves and others and weighing up the possible outcomes in order to arrive at a decision.	

Q4: Do you consider the adult able to communicate the decision?	Yes	No	Not Sure	Every effort should be made to facilitate communication including talking mats, sign language, interpreter, engaging Speech and Language Therapy etc.	Supporting Evidence
Q5: Do you consider the adult able to act upon the decision?	Yes	No	Not Sure	A person may show good reasoning and ability to understand and make the decision however when confronted with the situation, may not be able to use this reasoning to act, due to mental illness or cognitive impairment. For example: an adult with hoarding disorder may have shown capacity to understand and make a decision about others assisting with tidying however does not act on his/her decision by allowing entry to his/her home, due to emotional response associated with their hoarding disorder For example: an adult with brain injury and executive functioning difficulties may have shown capacity to understand and make	Supporting Evidence

				decisions about day to day budgeting however when shopping in town spends a month's allowance on new clothes due to difficulties inhibiting response in the situation.	
Q6: Have efforts been made to support the person to make the decision themselves?	Yes	No	Not Sure	 Interventions can be used to improve an individuals' Ability to make decisions' Memory or attention Ability to organise and process information e.g. Speech and Language Therapy, Advocacy, Assisted Communication Aids, Translators and neuropsychology 	Supporting Evidence
Q7: Overall, do you consider on the balance of probability that the impairment or disability is sufficient that the adult lacks the capacity to make this particular decision?	Yes	No	Not Sure	Any additional supporting	evidence

Any Further Comments:

If you have answered **YES** consistently to Q1-Q6, and **NO** to Q7, the adult is considered on the balance of probability, **to have the capacity to make this particular decision at this time**. However consideration should still be given to other legislation e.g. Adult Support and Protection. Additionally Power of Attorney should also be considered.

Sign/date this form and record the outcome within the adult's records

If you have answered NOT SURE or NO to any of the questions, sign and date the form and send this completed tool and any supporting documents to request a formal capacity assessment.

Signature		Date Assessment Completed	
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