

Mental Capacity Assessment Tool				PAGE 1 OF 4		
ASSESSMENT BACKGROUND						
Client's Name	Client A		Completed By	John Doe		
Person closest to the client	Name Ms Mother	Tel: Number [REDACTED]				
Lasting Power of Attorney	Name	Tel: Number		Not applicable		
IMCA	Name	Tel: Number		Not applicable		
Court of Protection Deputy	Name	Tel: Number		Not applicable		
Department of Work and Pensions Appointee	Name	Tel: Number		Not applicable		
<i>What decision needs to be made?</i>						
If Client A is able to make decisions relating to his accomodation.						
<i>Who did you consult about the decision that needs to be made?</i>						
Ms Mother (Mother), Mr Joe Bloggs (Bloggs School) Dr Doe (Consultant Paediatrician)						
ASSESSMENT DETAILS						
Is there an impairment or disturbance in the function of the brain or mind?	Permanent	x	Temporary		No	
<i>How did you reach this decision?</i>						
Dr Doe, Consultant Paediatrician reports that Client A is formally diagnosed with a Severe Learning Disability, Paroxsmal Dystonia, Attention Deficit Hyperactivity Disorder. The disabilities are noted to be lifelong and pervasive.						
<i>Page 2 of 4</i>						
Can the decision be delayed until the person regains capacity?	Yes		No		Unlikely to regain capacity	x
<i>How did you reach this decision?</i>						
Dr Doe confirmed that Client A's disability is lifelong and pervasive, and his cognitive function and processing would not deviate from the his current range.						
Can the person understand the information relating to the decision to be made?	Yes		No			x

How did you reach this decision?

I met with Client A on two occasions to complete the assessment whilst at University Hospitals Coventry and Warwickshire on the 03/11/20 and 04/11/20 at approximately 11am on each occasion. Client A was medically fit for discharge but had not yet been discharged. The assessments took place in the side room that he was allocated to whilst in hospital and he was being supported by a student Nurse to ensure his safety and that his basic care, social and emotional needs were being met. This was the second and third time that I had met Client A with the first being the evening before when he was being admitted to hospital. Client A was reminded of my role and was informed of the purpose of my visit which was to ask him some questions so that I could understand what he understands about his situation, care and treatment.

Client A was asked questions verbally with items of reference, Makaton Sign language and Makaton PECS cards.

Client A was not able to demonstrate an understanding of where he was or why he was there. He was asked if he knew where he was verbally, with Makaton Sign language and Makaton PECS cards. He did not respond so he was informed that he was in hospital using all three mediums sequentially allowing time for him to process. He was then asked the question again but did not respond appropriately via either medium. When asked where Client A lived he was able to note that he lived at home but could not share any further details of where he lived. When asked who he lived with he was able to name his mummy but also noted other parties that did not live with but is a family friend (██████).

During the Assessment Client A was informed that he is now old enough to choose where he lives and who he lives with. Client A was presented with A PECS symbol for home. Client A was asked who lives at home and he responded mummy followed by home now.

Client A was presented with two further PECS house cards and the option of living at a different house with other young people and support staff who would help him when he needs it. Client A was asked to confirm what other options were available if he didn't live at home and he responded with yes. A further option of Client A living in a different house with a different family who would help him when he needs it. Client A was asked to confirm what other options were available and he responded with yes

Client A if he could choose where he lived. Client A responded yes but when explored further Client A was not able to discuss the possibilities of the options discussed so far.

It can be determined from the assessment that Client A lacks the ability to

understand the salient facts regarding his ability to make decisions about his accomodation.				
Can the person retain the information for long enough for the decision to be made?	Yes		No	x
<i>How did you reach this decision? see above</i>				
<i>Client A is not able to demonstrate an understanding of the salient facts to make this decision, I can reasonably believe that he is unable to retain the necessary information to make a decision regarding his accomodation.</i>				
Can the person use information to weigh up the pros and cons of the decision?	Yes		No	x
<i>How did you reach this decision? see above</i>				
As Client A cannot understand the salient facts regarding a decision, his ability to use and weigh up this information consequently is impaired.				
Can the person communicate their decision by any means?	Yes		No	x
<i>How did you reach this decision?</i>				
Client A is not able to understand, retain, use or weigh the salient facts relating to the decision; he is also not able to communicate a decision in regards to his accommodation.				
OUTCOME OF ASSESSMENT				
Has there been disagreement with this assessment?	Yes		No	X
If YES Give details of the disagreement				
<i>Page 3 of 4</i>				
What is going to happen next?	Case Conference	2 nd opinion	Mediation	Court of Protection x
If NO does the individual have capacity to make this decision at this time?	Yes		No	
If the client has the capacity to make this decision at this time, the process ends here, If the client lacks capacity proceed to a best interests decision				
ADVANCED DECISIONS AND ADVANCED STATEMENTS				
Is there an advanced directive relevant to the decision?	Yes		No	x
<i>If you do not know if one exists, what action will you take to find out?</i>				

Professionals and Agencies Names have been changed in this document to protect identities

Is the advanced decision valid N/A	Yes		No	x
<i>If not valid please indicate the reason, such as the Advanced Directive has been Withdrawn, LPA in place that covers the decision, inconsistent behaviour, detained under the Mental Health Act.</i>				
Is there an advanced statement relevant to the decision? N/A	Yes		No	x

If you decided not to follow the advanced statement please explain how you reached that decision

PAST AND PRESENT WISHES

What is known about the persons past and present wishes?

Who did you consult about past and present wishes?	Name and Role Ms Mother (mother) Mr Joe Bloggs (Bloggs School)	Name and Role
--	--	---------------

OPTIONS

Please record below the options open to you with the possible consequences (risks and benefits) of not proceeding with each option.

Option	Consequences
Client A lives at his current house and Mother with support of the Local Authority to meet assessed needs.	<p>Client A's lives with a family member who he has lived with for his whole life in an environment that is being adapted to meet his needs.</p> <p>Client A's needs would be met by someone that knows Client A and has met his needs historically</p> <p>The Local Authority Provide Short breaks to support Client A and his family to have breaks from caring rolls and responsibilities as well as providing Client A with access to community resources.</p> <p>Mother's ability to manage Client A's needs is impacted on by her own mental health needs leading to potential poor boundaries and guidance, poor medication acceptance levels at times and health needs being unmet.</p>
Client A is cared for by Henley House (Residential Specialist Children's Placement.	Client A will have his care needs being met by Henley House where he has access to

Professionals and Agencies Names have been changed in this document to protect identities

	<p>consistent approaches to care and support.</p> <p>Client A would live in an environment that is adapted to meet his health and care needs associated with his disability.</p> <p>Henley House is in close proximity to family so contact can be facilitated and supported.</p> <p>Client A's social, emotional and behavioural needs would be met.</p> <p>Client A would live in a residential setting that he is unfamiliar with and not with his mother.</p> <p>Client A would have to move from this setting at age 18 because it is a children's specialist residential setting.</p>
--	---

--	--

What is the least restrictive option in terms of human rights and freedoms?

--	--

Clients own views where expressed

--	--

BEST INTEREST DECISION TAKEN AND JUSTIFICATION

--	--	--	--

Signature of Decision Maker		Role	
Organisation		Contact Number	
Date			

