

## Capacity Assessment Process Worksheet Guidelines for Attending Teams

### Purpose of Worksheet:

Removing a person's rights to make their own decisions is a serious step; due diligence is required to ensure it is necessary. This worksheet is a tool to assist the interdisciplinary team in collecting relevant information that demonstrates a person may lack or may have regained decision-making ability. It also:

- Ensures teams follow the Capacity Assessment Process providing direction for the team when addressing issues related to a person's decision making capacity.
- Allows team members to examine and document:
  - validity of reasons which potentially places the individual and/or others at risk of significant harm,
  - areas of intervention and risk-reduction, and
  - through the consideration of the success or failure of less intrusive methods of addressing the risks, assists in determining if a Formal Capacity Interview is necessary.

If a Formal Capacity Interview is needed, this worksheet provides a record of the process undertaken by the interdisciplinary team and will assist the Capacity Assessor in the interview.

All members of the interdisciplinary team are encouraged to add information to the Worksheet over the course of problem solving. This process can be stopped when the problem is solved and the risks managed.

If more space is needed, it is recommended that additional notes or comments be attached. Reference to documentation in the chart may also be made.

As the Capacity Assessment Process and Worksheet are done on an ongoing basis, any additions should be initialed and dated by that team member. A record of contributors is kept on the final page of the worksheet.

### Principles of Capacity Assessment:

The AGTA is built on four guiding principles:

- The adult is presumed to have capacity to make decisions until the contrary is determined;
- The ability to communicate verbally is not a relevant determination of capacity, the adult is entitled to communicate by any means that enables them to be understood;
- Focus on autonomy with a less intrusive and less restrictive approach; and
- Decision making that focuses on the best interests of the adult and how the adult would have made the decision if capable.

### “Decision-Making Capacity”:

The AGTA defines capacity as the ability to understand information relevant to a decision and to appreciate the reasonable foreseeable consequences of a decision or a failure to make a decision.

People have a right to make unwise decisions or decisions others may disagree with. As long as the person understands information about the decision and what is likely to happen as a result, they have the capacity to make the decision.

The key is the decision-making process, or lack of process, by which the decisions are made that calls into question capacity. A risky decision is not necessarily an incompetent decision.

## Capacity Assessment Process Worksheet

Do not complete this worksheet if the only concern of capacity is to drive. Consider a referral for driving assessment.

|   |                        |
|---|------------------------|
| <b>Date Worksheet Initiated (yyyy-Mon-dd)</b> | <b>Primary Contact</b> |
|---|------------------------|

Date worksheet initiated is the date when the worksheet was started.

Please list a primary contact with name and contact number. It may or may not be the person who initiated the form. This will give the team and anyone consulted a person to talk with during the process.

|   |
|---|
| <b>Is the adult making decisions (<i>or unable to make decisions</i>) which puts him/herself or others at risk of significant harm? Describe the reasons including risks, severity, conflicts, consequences of behaviours, etc.</b> |
|---|

Describe the risks, red flags, the triggers that have come to the attention of the interdisciplinary team, through personally witnessed accounts and/or other sources of collateral information provided.

Reference can be made to progress notes or other documentation. Please indicate where and when.

For restoration of Capacity: If the patient has been assessed in the past as being incapable of decision making in certain domains and is now showing significant signs of regained capacity and insight in these areas, describe the evidence that has presented itself, making it clear that this is what you are assessing.

|  |
|--|
| <b>In what domains have concerns been identified?<br/>Describe relevant collateral information, and evidence of risk for each domain of concern.</b> |
|--|

Incapacity in one area of decision making does not indicate incapacity in another. Within each domain there are also various levels of functioning, from very complex matters to simple decisions. Each domain must be assessed separately.

Check off only the areas (domains) where the risks, as identified above, require problem solving and could lead to a formal interview to determine if Decision-Making Capacity is affected and a decision-maker is required.

Provide any collateral information from other sources which may include family, friends, caregivers, housing agencies, community support services, and most importantly from the individual as well.

|  |   |  |
|--|---|--|
| <input type="checkbox"/> <b>Healthcare</b> | <input type="checkbox"/> <b>Accommodation</b> | <input type="checkbox"/> <b>Choice of associates</b> |
|--|---|--|

Cannot make and keep appointments.  
Unable to participate in own health care  
Unaware of medical problems or treatment options  
Unaware of medications

Unable to recognize/respond to hazards  
Cannot describe home environment  
Cannot function in familiar setting  
Cannot weigh pros and cons of housing options

Unable to recognize family and friends  
Unable to protect oneself from harmful relationships  
Unable to recognize when others present risk

☐ **Social/leisure activities**

☐ **Education/vocational training**

☐ **Employment**

Unable to choose activities of interest  
Decreased level of independence

Unable to identify preferences  
Unaware of skill level

Unable to find/ maintain a job  
Unable to recognize consequences of not working

☐ **Legal matters (*non-financial*)**

☐ **Financial matters**

Unaware of legal rights  
Unable to understand legal documents  
Cannot apply for relevant permits/licenses

Cannot monitor bank account activity  
No knowledge of value of assets  
Cannot manage bill payments

**What are the adult's values and goals, cultural/religious beliefs, with regards to decision-making in relation to the domain(s) in question? Has there been any recent significant change?**

Describe any values or beliefs that the individual or others have indicated as relevant to the domain(s) in question. Collateral history is crucial in this area. Any significant changes noted are relevant. Certain decisions are the result of personality, cultural, and/or religious beliefs. Information should include consideration of past risk-taking behaviors, particular personality traits, or cultural sense of duty.

**Describe the person's living situation, including formal and informal supports. Have there been any recent changes?**

Where does the person live and with whom? Does the individual receive support from family, friends or neighbours, home care, or other service providers in order to complete Basic or Instrumental Activities of Daily Living? Has the individual refused support in the past? Check with the individual and their support providers to ensure information is consistent. If there are inconsistencies, document and problem solve around these areas.

**Has the adult's capacity been assessed on a previous occasion?**

- ☐ No  
☐ Yes, describe date of assessment, domain in question, assessment results etc.

The individual may have encountered various other specialties in the past that have provided insight into the same concerns that are presenting now. It may have never taken the form of a formal capacity assessment, or it may have. Provide the date of and information related to these assessments, the domain(s) that were being questioned, the recommendations, and the outcomes.

**Have any and all reversible medical and mental health conditions that are likely to impact capacity been ruled out?**

- ☐ No  
☐ Yes

**The date of Medical Assessment (yyyy-Mon-dd)**

**Assessment completed by**

**Please list the medical diagnoses relevant to this capacity assessment:**

It is inappropriate to assess capacity when a person is in the midst of a serious illness, especially if there is a potential for his/her decision-making ability to improve once his/her illness is treated. It is important to distinguish between conditions that are temporary causes of impairment and those that have caused irreversible impairment. Capacity should only be assessed once an individual is considered medically stable and they have returned to their baseline health status or are considered to have stabilized at a new baseline. Document both the date and who completed the medical assessment.

Include any information related to medical conditions that the individual has/had that would affect decision-making ability, such as a recent stroke, alcohol/drug dependency, depression, encephalopathy, delirium, urinary tract infection, metabolic disturbances, kidney failure, etc. Include whether the individual has been treated and the outcomes.

If necessary, put the Worksheet on hold until these concerns can be addressed. Return to the Worksheet at a later date when it is appropriate to do so

**Define the cognitive changes which may affect capacity, including standardized and non-standardized assessments:**

| Test name | Administered by | Score | Date (yyyy-Mon-dd) |
|-----------|-----------------|-------|--------------------|
|-----------|-----------------|-------|--------------------|

Impaired cognition does not necessarily mean there is an impairment of capacity. Cognitive impairment can affect a person's decision-making capacity. An assessment of decision-making capacity also needs to take into account many other factors, including the person's level of functioning as well as the nature and complexity of the decision(s) in question.

Opinions regarding cognition may be obtained from formal and informal assessment. Provide the name of any completed assessments, the results, and the date completed. This includes cognitive testing that was

done in the individual's past, as this will provide insight into the potential trajectory of decline or improvement.

The OT, Psychologist or other member of the team with the skills to perform these assessments, should choose any assessment tool that is best suited to the individual and the domain(s) in question. Be aware of the potential for cultural bias within certain cognitive assessment tools.

Include the interpretation of the results and the severity of the impairment, and any concerns regarding validity of the tests. Include any recommendations and outcomes. Cognitive test scores are more than just a number.

**Does the adult have functional limitations in relation to the domain(s) in question?**

- ☐ No
- ☐ Yes

Describe any physical limitations that the individual displays. As part of problem solving the risks and concerns that have been presented, a focus on changing the environment may be relevant. Such as instituting equipment at home, introducing gait aides, the use of community care services, looking into alternate housing, and so on. The individual simply may require more time to properly rehabilitate.

**Have barriers to a valid assessment, such as language, literacy, vision and hearing, been addressed?**

- ☐ No
- ☐ Yes

Be aware of limitations that can be created by various barriers. Does the individual have his/her glasses? Are they the appropriate prescription? Does the individual use hearing aids? Do we need to use an amplifier? Do we need to write down? What is his/her education level? Is the individual literate? What is his/her first language or only language? Have distractions been minimized? Be aware of any other medical co-morbidities, such as aphasia or depression that may affect results.

The important piece is that we give the individual his/her best chance to be successful when assessments are occurring. Troubleshooting these barriers may provide a solution to the concerns brought forward.

**Can the problem be solved and the risks be managed by a less intrusive and restrictive form of support?**

- ☐ No
- ☐ Yes, describe the solution (consider meeting/consulting with other team members to problem-solve)

Involve the individual, family, friends, and seek perspectives from other professionals. Consider informal and formal resources available that are relevant to the domain(s) in question. Can the concerns that have triggered the need for the use of the Capacity Assessment Process Worksheet be addressed without the need for a formal capacity interview? Can the concerns be addressed without the need to enact legal documents or file for a legal decision-maker?

A cognitively impaired person may struggle with complex decisions but may also still have capacity to deal with simpler decisions. Similarly, a person may be cognitively impaired and have scored poorly on cognitive tests but is able to function well within their familiar environment with acceptable levels of risk.

If necessary, put the Worksheet on hold until the appropriate assessments are done and other potential interventions are considered.

If the recommendations are acceptable to the individual and his/her social supports, and they address the specific valid areas of concern, proceed with the plan, and document the outcome on the final page of the Worksheet. The remainder of the Worksheet does not need to be completed.

**Please indicate if the following documents exist:**

☐ **Personal Directive**

Enacted ☐ Yes ☐ No Domains: \_\_\_\_\_

☐ **EPOA**

Enacted ☐ Yes ☐ No

☐ **Guardianship order** Domains: \_\_\_\_\_

☐ **Trusteeship order**

Copies of all relevant documents and, if applicable, evidence that they have been enacted, should be placed on the chart. A person acting as an agent, guardian, or trustee should be able to show they have the legal authority to do so.

**Is a formal capacity interview required? (Is the potential risk of harm to self, or others, high enough to justify the removal of the adult's rights i.e. appointment of an agent/ power of attorney, co-decision maker, guardian or trustee?)**

☐ No

☐ Yes

If the risks cannot be solved by a less restrictive form of support, indicate what attempts have been made and why they have failed. Indicate if the risks presented are significant enough to justify proceeding with a formal capacity interview and potentially the removal of the individual's rights in particular domains.

Proceed with a referral to an assessor who is designated by the Adult Guardianship and Trusteeship Act (AGTA) to perform formal capacity assessments. This includes a Physician, Psychologist, or a Designated Capacity Assessor (DCA).

For invoking a PD or EPOA please read and follow the instructions in the respective documents.

**The Capacity Assessment Process Worksheet is to remain a part of the permanent record.**