

Falkland Islands Government

Health and Social Services Directorate



Mental Capacity in The Falkland Islands

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1. Context and principles

1.1 Context

[The Mental Capacity Act 2005](#) (MCA) and the accompanying [Mental Capacity Act 2005 Code of Practice](#) protects people's rights to make decisions, and their right to have decisions made in their best interests if they lack capacity to make a specific decision.

The Falkland Islands does not currently have specific legislation in regard to mental capacity therefore this policy is based on good practice recognised within the Mental Capacity Act 2005 (MCA) and the Mental Capacity Act 2005 Code of Practice.

Everyone working with and/or caring for an adult who may lack capacity to make particular decisions must comply with this policy.

The Falkland Islands Government uses this policy to ensure it protects people's decision-making rights and acts in their best interests where required.

1.2 Principles

There are five statutory principles which underpin the values and legal requirements of the MCA and these are reflected in this policy

The Falkland Islands Government is informed by and uses the five principles to guide all its interactions, and to deliver care and support.

The five principles are:

1. A person must be assumed to have capacity unless it is established that they lack capacity
2. A person is not to be treated as unable to make a decision unless all practicable steps to help them to do so have been taken without success
3. A person is not to be treated as unable to make a decision merely because they make an unwise decision
4. An act done, or decision made, under this policy, for or on behalf of a person who lacks capacity, must be done, or made, in their best interests
5. Before the act is done, or the decision is made, regard must be had as to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person's rights and freedom of action.

All professionals will use the five principles to respect service user's rights to make a capacitated decision, protect service users who lack capacity and help them as much as possible to take part in decision making which affects them. Chapter 2 of the MCA Code of Practice contains helpful further guidance a summary of which is set out below:

- Every adult has the right to make their own decisions if they have the capacity to do so. Family, carers and health or social care staff must assume that a person has the capacity to make decisions unless it can be established that the person does not have capacity
- People should receive support to help them make their own decisions. Before concluding that individuals lack capacity to make a particular decision, it is important to take all possible steps to try to help them reach a decision themselves
- People have the right to make decisions that others might think are unwise. A person who makes a decision that others think is unwise should not automatically be labelled as lacking the capacity to make a decision
- Any act done for, or any decision made on behalf of, someone who lacks capacity must be in their best interests
- Any act done for, or any decision made on behalf of someone who lacks capacity should be an option that is less restrictive of their basic rights and freedoms, as long as it is in their best interests

(The MCA Code of Practice 2007)

2. Assessment of Capacity

2.1 Helping Service Users to Make Their Own Decisions (Maximising Capacity)

The Falkland Islands Government will assume a service user has capacity unless it is established that they lack capacity, and take all practicable steps to enable a service user to make a decision, before deciding that they may lack capacity.

A service user's capacity, or lack of capacity refers **specifically to their capacity to make a particular decision at the time it needs to be made**. All staff must make sure all assessments of capacity are decision specific and considered at the time the decision needs to be made.

This policy is dedicated to helping people make their own decisions, therefore it is the responsibility of health and social care professionals to provide all appropriate help to maximise opportunities for the individual to demonstrate mental capacity.

Falkland Islands Government employees will:

- Provide the service user with all the relevant information they require to make a decision, including information on the choices and alternatives available to them
- Consider how the service user communicates and present the information about the decision in a way that the service user finds easiest. This could be by using simpler language or visual aids. Consideration should also be given as to whether anyone else help with communication such as family, interpreter, advocate or speech and language therapist
- Consider any day and/or times when the service user's understanding is better. Think about the environment, where would the service user feel most at ease
- Who is the best person to support the service user to make the decision or express their view
- Consider whether the decision needs to be made. Can the decision be put off to a later time when the service user may be better able to make the decision?

2.2 Making Unwise Decisions

Everyone has a right to make their own decisions where they have capacity to do so, and the Falkland Islands Government will ensure that its service users' right to make a capacitated decision is respected, even if others believe their decision is unwise.

This will make sure its service users' freedom to determine their actions and retain control over their own lives is respected.

2.3 Assessing Capacity

The Falkland Islands Government will always presume a service user has the capacity to make a particular decision at the time it needs to be made. The Falkland Islands Government will also ensure staff understand that capacity *must* be assessed in relation to a specific decision, and at the time that decision needs to be made.

Staff must treat service users equally. This means that a service user's capacity must not be judged on their appearance, age, disability, condition or an aspect of their behaviour. It is also important to note that a service user may lack the capacity to make a decision about one issue, but not about others.

These basic tenets must be understood, respected and incorporated into the Falkland Islands Government practice, at every level, by all members of staff. Anyone who claims that an individual lacks capacity should be able to provide evidence. They need to show, that, on the

balance of probabilities, the individual lacks the capacity to make a particular decision, at the time it needs to be made. This means being able to show that it is *more likely than not* that the person lacks capacity to make the decision in question.

All staff involved in assessing, care planning or delivery of care and support should be trained in assessing capacity. A service user's mental capacity to make specific decisions will form part of their assessment of need. Where there is a concern that a service user lacks the capacity to make a particular decision, a time and decision specific mental capacity assessment will be carried out. The outcome of any mental capacity assessment will be included in the service user's care plan to ensure our staff are supported by the right guidance and instructions on how best to support the service user.

Health and social care professionals will always seek to maximise the service user's capacity to make day to day decisions, such as what they want to wear, what they want to eat and drink, what time they want to get up and go to bed. They will explain the options to the service user using visual aids (e.g. showing alternative clothing or meal choices) where required, to support the service user's ability to make their own decision.

Where a service user has been assessed as lacking the capacity to make a specific decision, a best interests decision will be carried out (See 4.1). Health and social care professionals should still seek to involve the service user in day to day decisions as much as possible to ensure their views and wishes remain central to their care and support.

2.4 The Two-Stage Mental Capacity Assessment

The person who assesses the service user's capacity will usually be the person directly involved with the service user at the time the decision needs to be made. For instance, a care worker might assess the service user's capacity to agree to support with showering or bathing, whilst the community nurse might assess whether the service user can consent to have a dressing changed.

Therefore, all management and care and support staff should be trained and competent in understanding capacity. This is because different staff will be involved in assessing someone's capacity to make different decisions, at different times, on a day-to-day basis. The training will ensure that staff understand the principles of mental capacity and how to apply this policy to ensure people's decision making rights are protected. Training should also include communication skills to ensure staff understand how best to support a service user to maximise their ability to make a decision. If staff have any concerns about their ability to effectively communicate with a service user in relation to decision making, they must escalate

this to their line manager who will seek advice and support from an appropriate health or social care professional such as the Adult Social Worker or Chief Nursing Officer.

To help determine if a person lacks the capacity to make a particular decision at the time it needs to be made, this policy sets out a two-stage test of capacity, which should be undertaken using the appropriate mental capacity assessment forms. Please see Appendix 1.

The two-stage test is as follows:

Stage 1: Does the person have an impairment or a disturbance in the functioning of their mind or brain. If the person does **NOT** have such an impairment or disturbance, they will not lack capacity and the assessment should stop.

Examples of impairment or disturbance include:

- Conditions associated with some forms of mental illness
- Dementia
- Significant Learning Disabilities
- The long-term effects of brain injury
- Physical or mental conditions that cause confusion, drowsiness or loss of consciousness
- Delirium
- Concussion following a head injury
- The symptoms of alcohol or drug use.

Stage 2: Does the impairment or disturbance mean that the person is unable to make a specific decision when they need to?

For a person to lack capacity to make a decision, the impairment or disturbance must affect their ability to make the specific decision when they need to. But first people must be given all practical and appropriate support to help them make the decision for themselves

Stage 2 can only apply if all practical and appropriate support to help the person make the decision has failed.

A person is unable to make a decision if they cannot:

- Understand relevant information about the decision to be made
- Retain that information in their mind
- Use or weigh up that information as part of the decision-making process
- Communicate their decision (by talking, sign language or any other means)

If a service user is not able to do one of the first three points (understand, retain, weigh up), they will lack the capacity to make the decision. The fourth point only applies in situations where a service user cannot communicate their decision in any way.

3 Guidance for staff on assessing a service user's ability to make a decision.

3.1 Before the Mental Capacity Assessment

- Start by assuming the service user has the capacity to make the specific decision. Is there anything to suggest the service user cannot make their own decision
- Provide all possible support to enable the service user to make the decision
- Remember people have the right to make unwise decisions if they have the mental capacity to do so. Consider whether your values and beliefs are impacting your professional judgement in relation to what you believe is an unwise decision
- Consider whether the decision can be delayed to take time to help the service user make the decision, or to give the service user time to regain the capacity to decide for themselves.

3.2 During the Mental Capacity Assessment

During the mental capacity assessment it is the responsibility of the member of staff to determine whether the service user has the capacity to make a specific decision at a specific time. Anyone can assess another person's mental capacity especially in relation to day-to-day decisions and simple decisions.

In order to make this determination it is good practice to use the attached Mental Capacity Assessment Form (Appendix 1)

Be aware that the fact that a service user agrees with you or accepts what is proposed does not necessarily mean that they have the capacity to make the decision.

3.3 Temporary, Fluctuating or Regaining Capacity

Factors that may indicate that a person may regain capacity in the future:

- The cause of the lack of capacity can be treated, either by medication or some other form of treatment or therapy
- The lack of capacity is likely to decrease in time (e.g., where it is caused by the effect of medication or alcohol or following a sudden shock)
- A person with intellectual disabilities may learn new skills or be subject to a new experience which increases their understanding and ability to make certain decisions
- The person may have a condition that causes capacity to come and go at various times (such as some forms of mental illness) so it may be possible to arrange for the decision to be made during a period when they do have capacity

- A person previously unable to communicate may learn a new form of communication
- Capacity may fluctuate depending on the time of day, seasons and other environmental factors.

3.4 Complex Decisions

In some complex cases it may be appropriate to seek specialist advice. This may be the GP, a specialist, a social worker, a speech and language therapist and, in some cases, a multi-disciplinary team. This is because complex or major decisions may have serious consequences for a service user.

3.5 Record of a Service user's Capacity to Consent

A Mental Capacity Assessment should be recorded in accordance with your departmental record keeping process when there is a concern a service user is not able to make a specific decision at the time it needs to be made. These will inform the service user's care plan and be part of the care plan review.

It is important to review capacity assessments regularly or if there is a significant change in circumstance, such as the possibility of change in capacity.

Minor day to day decisions such as what to wear, eat or drink do not require a record of the assessment of capacity. Instead, care workers will complete records in the daily notes of the steps they take to maximise and support service user's to make the specific decision and any decisions they make as part of the day to day care in the service user's best interests.

3.6 Professional Records

When professionals carry out an assessment of a service user's capacity to consent or make a decision, the relevant professional records are kept in the service user's plan.

3.7 Challenging a Finding of Lack of Capacity

When a situation arises that a service user, family, appointed representative or other professional challenges the result of the assessment of capacity, the first step is to raise the matter with the person who carried out the assessment. If the service user has been assessed to lack capacity, they should have support from family, friends or a representative.

- The assessor must give the reason why they consider the person lacks capacity to make the decision and provide objective evidence to support their conclusion
- The assessor must show they have applied the principles laid out in this policy

- If possible, a second opinion from an independent professional or expert in assessing capacity should be sought
- If the disagreement cannot be resolved the person who is challenging the assessment can seek independent legal advice.

4. Decision Making

4.1 Best Interest Decisions

This policy is based on good practice recognised within the Mental Capacity Act 2005 (MCA). Principle 4 of the MCA 2005 is that any decision made on behalf of a person who lacks capacity must be done or made, in that person's best interests.

The Falkland Islands Government follows these principles:

- For most day-to-day actions or decisions, the decision maker will be the care worker most directly involved in service user care as recorded in the care plan
- Where a decision involves the provision of medical treatment, the GP or other health care staff are the decision makers. All decisions are recorded in the care plan
- Where nursing or paid care is provided, the nurse or paid carer will be the decision-makers
- If an Enduring Power of Attorney (EPA) has been made, the attorney will be the decision-maker, for decisions within the scope of their authority.

Whenever possible, the person who lacks capacity will be involved in the decision-making process. Best interests decisions must never be based on discriminatory views or assumptions and must always consider whether the service user might regain capacity, and if so, could the decision be delayed.

Consideration must be given to whether the adult will have substantial difficulty being involved in the decision making process. It may be appropriate for a representative to be appointed to listen to the adult, provide information and explain options, assisting the adult to reach their own decisions and support or represent them in expressing their views regardless of capacity. Any representative should always support the adult at risk's view regardless of whether they agree with those views or not.

A best interest record (see Appendix 2) is kept in the service user's file and includes:

- What the decision was
- How the service user was supported to participate in the decision making
- What relevant circumstances were taken into account to make the decision

- What the service user's views are
- Who was consulted to help work out best interests
- What particular factors were taken into account
- Whether there are there any less restrictive options
- What the reason for reaching the decision was

Where a major best interests decision is required departments work in partnership with relevant professionals who are likely to be the most appropriate decision makers.

4.2 Protection for Staff

This policy allows care workers and other health and social care staff to carry out certain tasks in the best interests of the service user who lacks capacity.

However, it is the responsibility of the worker to;

- Check whether the service user has the capacity to consent
- Apply the two-stage test where necessary
- Act in the service user's best interests
- Understand the limitations on protection for staff in relation to deprivation of liberty, restraint or restrictive practice..
- Not pay for goods or services using the service user's money unless there is formal authority to do so.

4.3 Making lawful decisions – Ensuring consent is lawful and informed

The Falkland Islands Government will always ensure consent is lawful and informed.

Consent should always be sought from the service user where they have capacity to make a specific decision. Where a service has the capacity to consent the Falkland Islands Government will always respect their decision, including refusal of consent.

Helping a service user to make their own decisions directly relates to the principles laid out in this policy of assuming capacity and taking all practicable steps to enable a service user to make a decision, before deciding that they may lack capacity. Staff must ensure they support service user's to consent to a decision by:

- Providing all relevant information needed to make a decision, including information on the choices and alternatives available to them
- Considering communication needs and presenting information about the decision in a way that the service user finds easiest

- Seeking assistance when appropriate to support communication including an interpreter, speech and language therapist or family member
- Consider any day and/or times when the service user's understanding is better.
- Think about the environment, where would the service user feel most at ease
- Consider who the best person may be to support the service user to make the decision
- Consider whether the decision needs to be made now or whether it can wait until the service user may be better able to make the decision.

Where a service user lacks capacity to consent, the Falkland Islands Government will check whether there is another person with lawful decision-making authority. This may include someone with an Enduring Power of Attorney.

Where a service user lacks capacity and there is no one else with lawful decision-making powers, the Falkland Islands Government will ensure that best interests decisions are made following the principles laid out in this document to protect service users' rights and ensure they continue to be at the heart of decision making (see best interests decisions above).

Finally, where there are conflicts, or a decision has not been able to be made, legal advice should be sought.

4.4 Next of Kin (NoK)

This term is commonly used and there is a presumption that the person identified has certain rights and duties.

Health and social care colleagues should always consult the people closest to a person who lacks the capacity to understand that person's wishes and feelings to help with best interests decision making.

However, the person identified as NoK should not be asked to sign and/or consent to certain interventions.

4.5 Independent Advocacy

This Falkland Islands Government should consider whether the service user will have substantial difficulty participating in the decision making process and whether, in the absence of other representation, such as family members, an advocate should be appointed to listen to the adult, provide information and explain options.

Independent advocacy should be sought in cases where:

- The person who lacks capacity has no close family or friends to take an interest in their welfare

- Family members disagree about the person's best interests
- Family members and professionals disagree about the person's best interests
- There is a conflict of interest for people who have been consulted in the best interests assessment (e.g., the sale of family property where the person lives)
- The person who lacks capacity is already in contact with an advocate
- The proposed course of action may lead to the use of restraint or other restrictions on the person who lacks capacity
- There is a concern about safeguarding.

Any representative or advocate should always support the adult at risk's view regardless of whether they agree with those views or not.

4.6 Advance Care Planning

An Advanced Care Plan enables someone over the age of 18 with the capacity to refuse specified treatment for a time in the future when they may lack the capacity to consent to or refuse the treatment.

If a service user has made an advance care plan to refuse treatment the advance care plan is kept in their file and health care staff must be informed and they should respect this decision if it is valid and applies to the proposed treatment.

5.0 Use of Restraint and Restrictive Practice

5.1 Use of Restraint and Restrictive Practice

The Falkland Islands Government Deprivation of Liberty, Use of Restraint and Restrictive Practice Policy provides guidance to staff in the use of restraint and restrictive practice and under what circumstances a person would be considered to be deprived of their liberty.

It is important to note for the purposes of this policy that staff are using restraint or restrictive practice if they:

- Use force or threaten to use force to make someone do something that they are resisting, or,
- Restrict a person's freedom of movement, whether they are resisting or not.

Restraint can be physical, medical and mechanical.

The use of restraint must always be justified and documented.

It is the responsibility of all staff when using restraint for adults who lack capacity to adhere to the following two conditions:

- the person taking action must reasonably believe that restraint is *necessary* to prevent *harm* to the service user who lacks capacity, and
- the amount or type of restraint used and the amount of time it lasts must be a *proportionate response* to the likelihood and seriousness of the risk of harm.

The use of restrictions, restraint and physical interventions with service users will only occur where there is a need to protect the service user, staff or bystanders from harm and only where there are no other appropriate alternative strategies.

The intervention used must be used as the last possible option and with the least amount of restraint or restriction, and for the shortest time necessary to prevent harm to the person or others. The action must be detailed within the care and support plan and be administered only by appropriately trained and competent staff, and neither intervention nor the threat of intervention should ever be used as a form of punishment.

Where restraint of any kind has been used this must be escalated to the manager of the service, recorded within the care notes, including date, time, duration, type of restraint, reason, staff members involved in the incident, and any other relevant information.

If the service user or staff member or others are injured then an incident form must be completed, and the manager of the service informed immediately.

Staff must refer to and follow the Falkland Islands Deprivation of Liberty, Use of Restraint and Restrictive Practice Policy.

5.2 Deprivation of Liberty

The Falkland Islands Government is aware of the restrictive factors that indicate a service user is or is at risk of being deprived of their liberty. In accordance with the principles of this policy any decision to deprive a service user of their liberty must be considered the least restrictive option and clearly documented as to why a deprivation of liberty is considered to be in the individual's best interests.

Appendix One – Mental Capacity Assessment Form

Mental Capacity Assessment

The Mental Capacity Act 2005 states that **anyone** can assess another person’s mental capacity especially in relation to day-to-day decisions and simple decisions. The Falkland Islands does not currently have specific legislation in regard to mental capacity therefore this policy is based on good practice recognised within the Mental Capacity Act 2005 (MCA).

Assessors must abide by the following **five statutory principles** which are as follows:

1. A person must be **assumed** to have capacity unless it is established that he/she lacks capacity (by undertaking capacity assessment).
2. A person is not to be treated as unable to make a decision unless all practicable steps to **help** him/her to do so have been taken without success.
3. A person is not to be treated as unable to make a decision merely because he/she makes an **unwise** decision.
4. An act done, or decision made, under this Act for or on behalf of a person who lacks capacity must be done or made in his/her **best interests**.
5. Before the act is done, or decision is made, regard must be had to whether the purpose for which it is needed can be as effectively achieved in a way that is **less restrictive** of the person’s rights and freedom of action.

Person’s Details	
Name	
Address	
Date of Birth	
Date of Assessment	

Do you need anyone else to provide information or give their opinion?	Yes	No
Do you need to involve anyone to help you to communicate with the person?	Yes	No
Please give the name and status of anyone who assisted with this assessment (Please include Representative details if one is involved)		
Name	Status	Contact Details

Decision Requiring Assessment of Mental Capacity (provide details)

NB: Before deciding that someone lacks capacity to make a particular decision, it is important to take all practical and appropriate steps to enable them to make that decision themselves.

What is the Decision?

STAGE 1 – Determining an impairment or disturbance to the mind or brain

NB - If a person does not have an impairment or disturbance of the mind or brain, they will not lack capacity under the Mental Capacity in the Falkland Islands Policy				
Does the individual have an impairment or a disturbance in the functioning of their mind or brain?	Yes		No	
What are the individuals presenting condition?				
Unconsciousness				
Autism Spectrum Disorder				
Mental Health Issues				
Other cognitive impairment e.g., Stroke				
Dementia				
Learning difficulties / disabilities				
Acquired brain injury				
Other (please specify)				

<p>If you have answered Yes to Stage 1, PROCEED TO STAGE 2</p>
<p>If you have answered NO to Stage 1, there is no such impairment or disturbance and thus <u>THE PERSON DOES NOT LACK CAPACITY</u> within the meaning of the Mental Capacity in the Falkland Islands Policy</p> <p>Sign/date form, record the outcome within the person’s case records</p> <p>DO NOT PROCEED ANY FURTHER</p>

Having determined an impairment or disturbance in the functioning of the person’s mind or brain? (Stage 1), you now need to complete your assessment and form your opinion as to whether the impairment or disturbance means that the person is unable to make the decision at the time the decision needs to be made?

Every effort must be made to provide the relevant information in a way that is most appropriate to help the person understand it. For example, easy read leaflets, large print, enabled the person to be at ease, consider the location and timing; relevance of information communicated; the communication method used; and the involvement of others.

Describe the practical actions and steps you have taken to assist the person to make this specific decision.

		Evidence	
1. Is the person able to understand the information relevant to the decision to be made? <i>Do they understand the nature of the decision? The reason why the decision is needed? The likely effects of deciding one way or another, or making no decision at all?</i>	Yes		
	No		
2. Is the person able to retain the information for long enough to make an effective decision? <i>People who can only retain information for a short while must not be automatically assumed to lack the capacity to decide – it depends on what is necessary for the decision in question. Different methods may be needed to help someone retain information e.g. written information</i>	Yes		
	No		
3. Is the person able to use or weigh up the information as part of the decision-making process? <i>Sometimes people can understand information however they should be able to understand the advantages and disadvantages of the decision to be made.</i>	Yes		
	No		

4. Is the person able to communicate their decision? <i>All steps must be taken to aid communication. Communication does not need to be verbal.</i>	Yes		
	No		

Stage 2 – Assessment

NB: If a person cannot do one or more of these four things, they are unable to make the decision.

Outcome of Mental Capacity Assessment

On the balance of probabilities, there is a reasonable belief that:

The person has capacity to make this decision currently	
The person does not have capacity to make this decision currently	

If the person is considered, on the balance of probability, to HAVE the mental capacity to make this decision now. Sign/date this form and record the outcome within the person’s case records. **Do not proceed to the best interests decision.**

If you have answered NO to any of the questions, proceed to the **Best Interests Decision**

Details of Assessor:

Assessor		Signature	
Designation		Date	
Date of next review		Time	

Appendix Two – Best Interest Decision Making Document

Best Interests Decision

1. To be completed when an assessment of capacity has identified that the person does **NOT** have the capacity to decide on a specific issue
2. ALL questions must be answered fully and evidence given to support the response.
3. Reference must be made to Mental Capacity in the Falkland Islands policy.

Best Interests Decision						
Describe the decision to be made						
1. Has the person made an Advance Decision that may be valid and applicable to some or all of the treatment?	Yes*		No		Not known	
*If Yes, is it valid and applicable to this decision?	Yes		No		If you are unsure, please seek advice	
2. Does the person have appointed an attorney under an Enduring Power of Attorney for) Property and finances decisions?	Yes		No		Not known	
Is there a court appointed Receiver?	Yes*		No		Not known	
* If yes you will need to consult with the EPA/Receiver as they may be the decision maker and take a copy for your records.						
3. Does the person have someone who is willing and able to support them? *If yes, please state	Yes*		No			
a) Name						
b) Relationship						
4. What practical steps have been made to ensure that the person is helped to participate as fully as possible in the decision making? For example, easy read leaflets, large print, enabled the person to be at ease, consider the location and timing; relevance of information communicated; the communication method used; and the involvement of others?)						
5. What is the person's past and present wishes in relation to this decision?						

6. What are the person's beliefs and values that would be likely to influence this decision?
7. What other factors would they consider?
8. What are the views of significant others? (<i>State who was consulted and their relationship to the person</i>)
Best Interests Decision Summary
1. What is the decision that has been made in the person's best interests (e.g. evidence using a balance sheet approach to consider and evidence the benefits and risks of each available option)?
2. Record the reasons why this decision is in the person's best interests
3. Document how this is the least restrictive option?

I have reached the “Best Interests Decision” in accordance with the principles and requirements of the Mental Capacity in the Falkland Islands Policy

Signature			
Print Name			
Date		Time	
Job title/Status			
Contact			
Date for review of Best Interests Decision			

Appendix Three – Related Guidance

MCA Code of Practice:

<https://www.gov.uk/government/publications/mental-capacity-act-code-of-practice>

SCIE Mental Capacity Act 2005 At a Glance:

<https://www.scie.org.uk/mca/introduction/mental-capacity-act-2005-at-a-glance>

NHS Someone to Speak up for You:

<https://www.nhs.uk/conditions/social-care-and-support-guide/help-from-social-services-and-charities/someone-to-speak-up-for-you-advocate/>

Alzheimer's Society:

<https://www.alzheimers.org.uk/get-support/legal-financial/mental-capacity-act>

NICE Guideline 108: Decision-making and Mental Capacity:

<https://www.nice.org.uk/guidance/ng108>