

WHO IS A CAPACITY ASSESSOR?

A capacity assessor is a healthcare professional who (a) is a member of one of the Colleges specified in the Health Care Consent Act 1996; (b) has completed an approved training course; and (c) is covered by a minimum of \$1,000,000 in liability insurance. In addition to assessments of capacity for decisions related to personal care and long-term care admission, a capacity assessor is authorized to assess capacity to make property decisions.

WHEN DO YOU NEED TO INVOLVE A CAPACITY ASSESSOR?

A capacity assessor should be involved when:

- A formal capacity assessment is specified as the method of determining incapacity in a Power of Attorney document; or
- One has reasonable grounds to believe that a person is incapable with respect to property decisions and is suffering or at risk of suffering serious adverse effects as a result of his/her incapacity.

WHO IS AN EVALUATOR?

An evaluator is a healthcare professional who is a member of one of the Colleges specified in the Health Care Consent Act 1996. An evaluator can assess capacity related to decisions about personal assistance services (hygiene, washing, dressing, grooming, eating, drinking, elimination, ambulation, positioning

or any other routine activity of living) and admission to a long-term care facility.

ON-LINE RESOURCES:

Consent and Capacity Board

<http://www.ccboard.on.ca/>

Health Care Consent Act

<https://www.ontario.ca/laws/statute/96h02>

Substitute Decisions Act

<https://www.ontario.ca/laws/statute/92s30>

To speak to Cambridge Memorial Hospital's Bioethicist, call switchboard.

*This guide provides general information about the current law in this subject area. However, legal information is not the same as legal advice, where legal advice is the application of law to an individual's specific circumstances. Although we have tried to make sure that the information in this guide is accurate and useful, we recommend that you consult a lawyer if you want professional legal advice in this subject area that is appropriate to your particular situation.



Capacity Assessment for Treatment Plans

*How to determine when a person can make healthcare decisions for him/herself**



CAPACITY ASSESSMENT

Seventy year-old Mohamed recently had a stroke and is unable to speak. He has difficulties swallowing and is at high risk for aspiration. The healthcare team is proposing that a feeding tube be inserted.

Isabella, a frail 84 year old woman, is recovering from a broken hip. She wants to go home, but doesn't seem to understand the associated safety risks.

Sixty-seven year-old Hadi recently immigrated to Canada and his English is very limited. He has recently been diagnosed with Alzheimer's disease. He also has bone cancer and a decision about whether or not to undertake further chemotherapy treatment needs to be made.

WHAT IS CAPACITY?

A person is considered to have capacity with respect to making a treatment decision if he/she has the ability to understand the information that is relevant to the treatment decision, is able to appreciate the foreseeable consequences of consenting or refusing to consent to the treatment, and is able to reach a decision. Unless there are reasonable grounds to suggest incapacity, there is a general presumption of capacity.

HOW IS TREATMENT CAPACITY ASSESSED?

Assessment of an individual's capacity to make treatment decisions is the responsibility of the healthcare provider who proposes the treatment and it is primarily assessed by asking the individual questions related to the treatment decision.

The assessment may be supplemented by administering standardized tests or procedures that measure cognitive ability and brain function.

It is important to note that capacity is decision-specific. An individual may be able to make a simple, less complex decision but unable to make more difficult decisions that have potentially serious consequences.

WHAT FACTORS CAN AFFECT CAPACITY?

Capacity may be impaired as a result of a number of treatable underlying physical and psychological conditions such as depression, dehydration, infection, and fatigue.

Capacity may also be impaired as a result of an injury or disease that is not curable or likely to improve over time such as Alzheimer's Disease.

WHAT INDICATORS SHOULD PROMPT FURTHER ASSESSMENT?

If an individual exhibits any of the following, further assessment of capacity is warranted.

- Confused and irrational thinking
- Inability to retain information
- Fluctuating wishes and alertness
- Level of suffering that impairs understanding

WHAT INDIVIDUAL INDICATORS ALONE DO NOT DETERMINE INCAPACITY?

Incapacity is not directly related to any of the following factors:

- Advanced age
- Language barriers
- Psychiatric illness
- Physical disability and/or communication disorders
- Refusal of treatment
- Lower levels of education
- Cultural/Religious background
- Idiosyncratic or unusual beliefs

1 Hébert, P.C. (1996). *Doing right: A practical guide to ethics for medical trainees and physicians*. Toronto: Oxford University Press.

DO INDIVIDUALS NEED TO BE INFORMED OF THE FINDINGS OF INCAPACITY?

Yes. Individuals need to be informed of a finding of incapacity and provided with information about their rights, including the right to appeal the decision through the Consent and Capacity Board.