

# COD #3 - Determining patients' capacity for decision-making

## **Key Features**

- This EPA focuses on assessing frail older adults' capacity to assign a substitute decision maker and to decide about personal care and healthcare in the context of provincial medico-legal legislation.
- Personal care decisions include major health care decisions/treatments, establishing goals of
  care, future care planning, hospital discharge planning, acceptance of health services, and
  acceptance of residential care, among others including situations involving abuse or neglect.
- This EPA includes conducting screens for financial capacity but does not involve any formal medico-legal opinion or declaration.
- Observation of this EPA can be done in a variety of settings and experiences, including simulation, and inpatient service and outpatient clinic in geriatric medicine and/or geriatric psychiatry.

### **Assessment Plan:**

# Direct observation or case review by supervisor

# Use Form 1. Form collects information on:

- o Case presentation (select all that apply): personal care decision; financial decision; other.
- Observation: direct; case review
- o Simulation: yes; no
- Supervisor: geriatrician; psychiatrist

#### Target

#### Collect 3 observations of achievement.

- At least 1 personal care decision
- At least 1 assessment of financial decision-making ability
- At least 1 direct observation

## Milestones in Elentra

- ME 2.2 Perform a capacity assessment, screening for financial capacity, as required relevant to the patient presentation.
- ME 2.2 Demonstrate effective clinical problem-solving and judgment to address patient capacity to make a decision.
- ME 2.4 Develop and implement management plans.
- **COM 1.6** Tailor approaches to patient capacity assessment taking into account culture, education, sensory impairment, language.
- COM 3.1 Provide information on diagnosis and prognosis in a clear, comprehensive, respectful and objective manner
- COM 5.1 Maintain clear, concise, accurate, and appropriate records of clinical encounters and plans.
- **COL 1.3** Collaborate with the patient's health care team in order to perform a comprehensive capacity assessment, as needed
- **HA 1.1** Facilitate timely access to resources including the public guardian and/or trustee, legal advice, appeal mechanisms, family education and support
- P 3.1 Apply provincial laws governing practice as it pertains to consent, capacity, and elder abuse and neglect.