CLINICAL SKILLS FOR EMERGENCY MEDICINE

ASSESSING CAPACITY TO CONSENT

<u>Importance</u>

It is important to realise that the assessment of capacity to consent is not "one for the Psychs" – but is part of competent Emergency Department practice. In the emergency setting the issues around capacity assessment are particularly challenging as there may be little time for reflection if clinical issues are pressing. The most challenging situation is, of course, the assessment of capacity to refuse life-saving treatment.

Key skill

By the end of this session, you should be *confident* and *competent* in the following:

| Assessing capacity to consent | How to structure the assessment | Accurately assessing the capacity to consent |
|-------------------------------|---------------------------------|--|
| | | |

Procedure routine:

| 1. Prepare beforehand | Ensure the facts of the case are known and that any supporting information has been sought Ensure you have an understanding of the nature of the emergency and the consequences of no treatment |
|--|---|
| 2. Establish rapport | Good use of non-verbal and verbal skills Identification of patient concerns Empathetic approach |
| 3. History of the presenting episode | Check the facts of the presentation with the patient if possible |
| Assessment of the reasons for refusal of treatment | Check the reasons with the patient if possible |
| 5. Assessment of the patients awareness of the consequences of the decision not to consent | Explain the likely consequences of the decision not to consent to treatment in clear, unambiguous terms. Test understanding |
| 6. Assessment of the patients ability to retain information and make a reasoned judgement | Brief examination of cognitive functioning |
| 7. Assessment for psychiatric illness that may affect understanding or reasoning | Brief mental state examination may be needed |
| 8. Know the law | Mental Capacity Act (2007) Advanced directives Case law |