

Quality assurance checklist for Mental Capacity Act Policies:

Self-assessment for organisations

Worcestershire Safeguarding Adults Board

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Document Control

Ratified by WSAB

Reviewed

Ratified by Chairs on behalf of WSAB

To be reviewed

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Consulted on the Policy/Guidelines

Organisation	Date
WSAB Policy Sub Group	22/08/2017
WSAB Board members	07/09/2017
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1.0 Introduction

The Mental Capacity Act (MCA) 2005 provides the legal framework for acting and making decisions on behalf of people who lack the mental capacity to make particular decisions for themselves. It also provides a legal structure which enables those who have mental capacity to make preparations for a time when they may lack capacity in the future.

The Act is supported by <u>Codes of Practice</u> and professionals must have regard to this when working with adults who may lack capacity.

The Care Act (2014) is underpinned by the principles of the MCA and the Act is integral to best practice in adult safeguarding. Organisations should consider <u>Adult Safeguarding:</u> <u>multi-agency policy and procedures for the protection of adults with care and support needs in the West Midlands</u> in relation to working with people who lack capacity who may be at risk of abuse or neglect.

Worcestershire Safeguarding Adult Board (WSAB) expects all health and social care agencies within Worcestershire to understand and apply the principles of the *Mental Capacity Act (2005)*.

WSAB has produced an MCA policy for Worcestershire, which is supported by MCA Multiagency MCA & DoLS Competency Framework.

2.0 Purpose

This checklist has been developed by WSAB to assist organisations to quality assure their existing policies against, or to formulate a new policy. It helps to ensure that the policy meets the requirement of the WSAB and contracting and commissioning requirements. The toolkit provides details of what individual organisation's policies should cover in addition to the WSAB Mental Capacity Policy. All organisational polices should incorporate the principles of the MCA (2005) which are:

- 1. Every adult has the right to make his or her own decisions and must be assumed to have capacity to make them unless it is proved otherwise.
- 2. A person must be given all practicable help before anyone treats them as not being able to make their own decisions.
- 3. Just because an individual makes what might be seen as an unwise decision, they should not be treated as lacking capacity to make that decision.
- 4. Anything done or any decision made on behalf of a person who lacks capacity must be done in their best interests.
- 5. Anything done for or on behalf of a person who lacks capacity should be the least restrictive of their basic rights and freedoms.

3.0 Checklist

Standard	Standard not met	Standard partly met	Standard met
Contains a statement of the organisation's basic philosophy and principles relating to the Mental Capacity Act (2005).			
Identifies that the organisation is signed up to the WSAB MCA policy and provide direction to the location of the document and how to access e.g. URL link.			
Identifies who in the organisation has lead responsibility for Mental Capacity. Use of structure charts may help.			
Defines the MCA training requirements of all employees (a matrix may prove beneficial).			
Identifies arrangements for induction and ensuring staff are competent to practice in relation to MCA (relevant to role).			
Identifies the organisations Quality Assurance/ Governance processes/ reporting arrangements in relation to MCA and Deprivation of Liberty Safeguards (DoLS).			
Outlines arrangements by which the organisation provides evidence that they are meeting their responsibilities in relation to MCA and DoLS (e.g. supervision; case file audits).			
Defines the scope of the policy and terms 'consent' and 'capacity'.			
Identifies what staff and volunteers must do if they have reason to doubt capacity of someone within their care.			
Identifies how assessments of capacity and best interests decision making are carried out in the organisation.			
Identifies expectations of staff in relation to documenting / evidencing consideration of mental capacity.			
Identifies how application of MCA provides protection from liability and how that protection works in practice.			

Sets out when to make an appropriate referral to an IMCA		
Identifies organisational response to Deputies, Attorneys, Advanced decisions and DNAR.		
Outlines how potential deprivation of liberty should be identified, managed, and recorded.		
Identifies a process regarding the use of restriction, restraint, and deprivation and what happens when a report is made to external bodies, for example, the CQC.		
Identifies who in the organisation is responsible for submitting an urgent authorisation and standard application for a DoLS.		
Identifies who in the organisation is responsible for subsequent requirements when a DoLS authorisation is granted. For example, ensuring renewal dates are monitored/oversight of any 'conditions'		