

Islington Safeguarding Adults Board

Learning from Islington Safeguarding Adult Reviews — How can we get better at using the Mental Capacity Act in practice?

The Mental Capacity Act (MCA) 2005 has been around for 15 years and yet practitioners often struggle with implementing it effectively. It requires skilled practice and a nuanced understanding of the law. When poorly implemented, it can have serious consequences and this is borne out by Safeguarding Adults Reviews which repeatedly identify implementation of the Mental Capacity Act 2005 as needing improvement.

We have sifted through the mental capacity learning points from relevant Safeguarding Adults Reviews in Islington and found some common themes and have produced a set of resources that you can use personally, within your teams and within your organisations.

Contents:

The resources include:

- A 7 minute briefing summary which highlights the key learning about the MCA from Islington SARs
- A PowerPoint presentation with embedded videos with further information about the MCA and the learning from Islington SARs
- An easy read booklet about the MCA which you can use when working with service users.

These resources have been developed to facilitate discussion and learning from others about the MCA. This could take place, for example, at team meetings. The key learning points can also be embedded in your organisational policies and procedures as well as being included in any training your organisation delivers.

There are links for further reading within the 7 minute briefing summary to support discussions.









<u>Ideas for discussions at team meetings:</u>

There is a range of experience and knowledge within every team and we can learn from each other! Suggested discussion points:

1. Self-neglect:

You are working with a patient or a service user who is refusing care, support or treatment. You have assessed them as having capacity to make this decision. However, you feel that there is a high risk of them coming to harm by refusing this treatment/care and support.

As a professional, what would you do in this situation?

To what extent would you take the view 'they have capacity to make this decision and we need to respect this'?

As a team reflect on the balancing of autonomy, risk and vulnerability – how do these come into play in your decision making?

What are the possible actions/interventions that you could consider in this situation and when you are concerned that the risk of harm is high?

At what point might you consider re-assessing mental capacity for this decision?

2. Coercion and control.

As professionals, we understand that the Mental Capacity Act comes into play when somebody has an impairment of the functioning of their mind or brain.....' and we are concerned about whether the person may not have capacity to make this decision for themselves. However,

Do you also understand how coercion and control can affect people's decision making?

What are some of the signs that this might be occurring?

What would you do if you suspected that coercion and control might be occurring and this was impacting on the person's well-being and decision making?

3. Discuss what makes a 'good' legally compliant capacity assessment.





