A Capacity Evaluation differs from a usual clinical evaluation in several ways:

- More intense evaluation of purpose of evaluation, whether it is a capacity issue and whether substitute decision making would help.
- Familiarity with legal terms, legal mechanisms of substitute decision making, and less restrictive alternatives.
- More careful attention to the ethical process including informed consent.
- Add functional assessment.
- Use everyday language
- Conclusions describe:
  - Diagnosis
  - Prognosis in everyday terms
  - Cognitive abilities vis a vis decision making
  - Functional abilities
  - Direct statement about capacity

1. **Speak to the referring clinician, ask**

A. What are the specific capacities in question?
   - ___ Medical decision making
   - ___ Financial decision making
   - ___ Independent Living (e.g., Can the patient be discharged home with supports)
   - ___ Other: ____________________________________________

B. Describe what specific situations or issues are in question …
   - Is there a specific treatment the patient is refusing?
   - Is there another issue being questioned right now?
   - Are there specific financial decisions or problems in question?

C. Is this really a question of legal capacities?
   - Are there family or system issues?
   - Will substitute decision maker help?
   - Could a less restrictive alternative be used?

D. Are there other substitute decision maker mechanisms in place?
   - Does the patient have an advance directive? Healthcare Proxy?
   - Does the patient have a DPA for finances or healthcare?
   - Does the patient have a representative payee?

E. What is the history to the problem?
   - Has the patient had trouble making decisions in the past?
   - Has the patient had trouble with finances in the past? (losses, cheated, exploited)
   - Has the patient had trouble living at home in the past? (care of home, safety)

F. What are the social resources? and other environmental/resource issues
   - Who is the patient’s family, how much are the involved?
   - Other sources of social support?
   - Any other aspects of the environment/situation to know, such as extent of financial assets, nature of home?
When do you need the results of this evaluation?

2. Informed Consent

A. Explain the evaluation to the patient

   Nature: What is involved (interviews, tests)
   Purpose: To determine decision making capacity for …
   Risks: May lose rights to decision making capacity, May have guardian appointed
   Benefit: May help in treatment planning

B. Ask the patient to paraphrase information back. Ask “what are the risks” and “what are the benefits”. If trouble, try repeating information, teaching, writing down. Continue to do everything to maximize patient’s understanding.

C. Ask if the patient consents. Document this process and what was said, and what the patient said.

3. Evaluation

A. Clinical Interview
   - Psychiatric, Medical, Family, Social History
   - Mental Status Exam (Symptoms of depression, anxiety, psychoses, behavioral observations)
   - Patient’s perceptions on issues, values, hopes, what does client want, who does client want to assist him/her?

B. Cognitive Testing
   - Select tests relevant to the diagnosis or the question and that tell you about decision making

C. Functional Assessment
   - Select instruments relevant to the specific capacity in question

D. Family Interview and/or Staff interview
   - Talk with family or staff if possible. Ask for their perceptions on the above.

4. Report

A. Summarize History
   - Presenting Problem, history of presenting problem, psychiatric history, medical history, substance abuse history, social history. Include treatments and services tried. Include current housing and supports.
   - Current Medications
   - Any Head CT/MRI

B. Summarize Informed Consent Process

C. Summarize Test Results
   - Diagnosis → how that relates to cognitive and psychiatric symptoms, how this relates to functional behaviors.
   - Prognosis → will this get better, worse, or stay the same.
   - Decision making → May use the “understanding, appreciation, reasoning, choice” framework.
   - Functional abilities → May use the “knowledge, skills, judgment” framework.
   - Patients values, strengths, preferences.

E. Make statement about capacity for task.

F. Make treatment recommendations