Facilitation notes

Where can I find out more?

Below are some websites where you can find further information, if you do not have access to the internet, you can ask the health and social care professional who is involved in your or your relatives care for more information.

Websites with specific information about dementia:

• Alzheimer’s Society website:
  www.alzheimers.org.uk

• For more information and resources about the Mental Capacity Act, please visit our Web Resource:
  http://bhmssouthcentralccg.nhs.uk/dontleavemenow

• Social Care Institute of Excellence (SCIE):
  http://www.scie.org.uk/mca-directory/trainingcourses.asp

• NHS England—information about mental capacity:
  https://www.england.nhs.uk/?s=mca

• For Lasting Powers of Attorney— the Office of the Public Guardian (OPG):
  customerservices@publicguardian.gsi.gov.uk
  Telephone: 0300 456 0300
  Textphone: 0115 934 2778

• For more information, and to make a Lasting Power of Attorney visit this website:
  https://www.gov.uk/power-of-attorney/overview

• For more information about advance decisions: http://www.adrt.nhs.uk/

• NHS Choices website, general information about the Mental Capacity Act:

• Citizens Advice website, with information about managing someone else’s affairs:
  https://www.citizensadvice.org.uk/relationships/looking-after-people/managing-affairs-for-someone-else/

Contact details for adult social care in the Project area:

• Sandwell, contact centre for adult social care services, Sandwell Council ASSIST: 0845 352 2266,

• Birmingham, Adult social Care access point, ACAP: 0121 303 1234,

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Birmingham South Central Clinical Commissioning Group
Facilitation notes

Don’t Leave Me Now

Don’t Leave Me Now is a play by Brian Daniels. The play has toured the country and has been well received by members of the public, by Dementia charities and the National Council for Palliative Care. This edited production includes short messages about some of the principles of the Mental Capacity Act.

The play explores the impact of early onset dementia and family life, and is inspired by the true accounts of two couples. The film highlights the Mental Capacity Act which focuses on the views of the person with care needs, there are other laws which support carers.

It is aimed at those who may not have heard of this important piece of legislation, and can also be used as a training aid for professionals to understand the human aspect of best interest decision making.

Throughout the film, the two people living with dementia often fade into the background. People that struggle to make some decisions for themselves, can often find themselves excluded from choices and decisions when they should be at the very centre of that process.

The Mental Capacity Act empowers and enables people to have control of their own choices and decisions wherever this is possible. The Act allows people to plan ahead for a time when they may not be able to make certain decisions for themselves.

Questions to facilitate discussions

1. The Mental Capacity Act 2005 has been a statutory obligation since April 2007, think of some of the choices or decisions that you have taken over the last week, month or year.

Now imagine that overnight the law has changed and you can no longer make your own choices, or some of the decisions you have made are no longer valid, how do you feel, what do you do? Now think about such impacts upon people who may in reality have been denied rights to make their own choices or supported decisions.

2. The law is based on five principles which apply equally, what are these?

(Presumption, less restrictive, unwise, maximise capacity and best interests. Can you think of ways of using these principles in practice?

3. The Mental Capacity Act sets out a test to assess functional capacity, what is this?

(understand, retain, weigh-up and communicate back.) How is this different to a cognition test? How can you make someone feel at ease during a capacity test? How can you evidence the ‘weighing up’, what sort of questions are helpful?

4. In the film, what may have led to doubts about Chris’s and Judy’s capacity to make some decisions? What sort of support may have helped them to make such a decision?

5. In relation to the decision about a change of accommodation (a move into a care home), should an Independent Mental Capacity Advocate have been involved and what is their role?

Were Chris and Judy un-befriended for example? Or were there were any doubts about the ability of Penny and June to consider the ‘best interests’ of their loved ones?

6. Consider ways in which you could take practical steps when working with people to help them to make decisions.

Think about different types of communication, the time and place that you use, e.g. are some people better in the mornings than afternoons? Do some people prefer pictures or symbols to words?

7. If you were working with Chris or Judy, how could you put them at ease?

Think of a time when you may have felt under pressure, what would have helped you to feel more confident and comfortable?

8. What do you think Chris or Judy should be able to demonstrate regarding the decision about moving into a care home?

Think about how much you understood or chose to understand about a recent decision, such as taking out a loan. You could also think about other decisions, such as whether to go on holiday, for example.

9. It is essential that good recording practices underpin the assessment of capacity. The evidence of the ‘working out’ shows not only a respectful commitment to person centred practice but protects both the patient/service user and the professional decision maker.

A tick box approach is simply not good enough. Records should capture the practical steps taken to support and enable someone to have as good a chance as possible to make a decision.

10. Finally, thinking about making a best interest’s decision such as those that may have been made for Chris and Judy, how would you apply the Best Interest’s Checklist?

The following prompts may be useful: Understand the person’s views—past present wishes, values and beliefs; avoid discrimination; consider whether the person might regain capacity for the decision; if the decision concerns life-sustaining treatment, then those making decisions on behalf of the person should not be motivated by a desire to bring about the person’s death. In short, what decision would the individual most likely have made if they were able to do so? Or what would Chris or Judy want to consider if they were seeking to make the decision themselves?