The process for making Best Interest Decisions in serious medical conditions in patients over 18 years

Start by assuming that the patient has capacity. If there is doubt, proceed to the two stage test of capacity: Stage 1: Does the person have an impairment of, or a disturbance in the functioning of their mind or brain? Stage 2: Does the impairment or disturbance mean that the patient is unable to make a specific decision when they need to? Their capacity for this decision can be assessed by four functional tests:

- 1. Can they understand the information? NB This must be imparted in a way the patient can understand.
- 2. Can they retain the information? NB This only needs to be long enough to use and weigh the information.
- 3. Can they use or weigh up the information? NB They must be able to show that they are able to consider the benefits and burdens of the alternatives to the proposed treatment.
- 4. Can they communicate their decision? NB The healthcare professional must try every method possible to enable this.

The result of each step of this assessment should be documented, ideally by quoting the patient.



• Appoint a Decision Maker (usually after an interdisciplinary team discussion) who should:

- * Encourage the participation of the patient.
- * Identify all the relevant circumstances.
- * Find out the person's views (ie wishes, preferences, beliefs and values); These may have been expressed verbally previously or exist in an ADRT or Advance Care Plan made when the patient had capacity.
- * Avoid discrimination and avoid making assumptions about the person's quality of life.
- * Assess whether the patient might regain capacity.
- * If the decision concerns life-sustaining treatment, not be motivated in any way by a desire to bring about the person's death.
- * Consult others (within the limits of confidentiality): this may include an LPA, IMCA or Court Appointed Deputy.
- * Avoid restricting the patient's rights.
- * Take all of this into account (ie weigh up all these factors in order to work out the patient's Best Interests).
- Record the decisions.
- Agree review dates and review regularly.

If there is unresolved conflict, consider involving: The Local Ethics Committee The Court of Protection, possibly through a Court Appointment Deputy (CAD).

Reproduced with kind permission of NHS Improving Quality Team. ©NHS Improving Quality (2008). From Regnard, Dean and Hockley—a guide to Symptom Relief Palliative Care.