

## Adult Care Services Covid-19 guidance for staff

<b>Reference Number:</b>	15
<b>Title:</b>	Covid-19 Vaccination and Mental Capacity
<b>Date published or last updated:</b>	07/12/2020

### **Covid-19 Vaccination and Mental Capacity**

The following guidance refers to the decision making process where there is doubt about a person's capacity to decide whether or not to have the covid vaccine.

#### **Whose Decision is this?**

It is for each person with capacity to decide whether they will have the covid-19 vaccination.

Families/relevant others can only give consent where the person lacks the capacity to consent to having the covid-19 vaccination and they have a Health and Welfare Lasting Power of Attorney or Deputy for Health and Welfare in place and activated.

Residential/nursing home staff cannot give consent on behalf of a resident/patient.

#### **Mental Capacity and Decision Making**

The Mental Capacity Act 2005 is clear that everyone should be deemed to have capacity to consent to medical treatment such as vaccination, unless there is evidence to suggest their capacity to make this specific decision is limited in some way.

Presence of capacity cannot be determined by appearance of the person, their age, medical conditions or behaviour.

Mental capacity is time and decision-specific so a decision cannot be based solely on prior knowledge or experience of the person.

Even where there are doubts about a person's capacity, every effort should be made to support them to make their own decision. Consideration should be given to communication approaches, such as accessible information or videos where these might help the person to retain the necessary information.

If capacity fluctuates, for example if the person is tired or has an infection, the decision should be postponed to see whether capacity is regained when they recover.

#### **Assessment of Capacity**

Ideally, assessments of capacity to consent to the vaccine should be completed by the clinician who will administer the vaccine. Where this isn't possible, senior staff

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from the residential/nursing home or other relevant professionals might complete the assessment.

The purpose of the assessment is where possible, to establish whether the individual assessed has capacity to consent to the covid-19 vaccination. **Consideration must be given to whether the person is able to:**

- understand relevant information about the decision
- retain that information long enough to make the decision required
- use or weigh up (evaluate) that information
- communicate their decision.

If the person is unable to do any one of these things, then they are deemed not to have capacity.

The process for the assessment and rationale for its conclusion should be clearly recorded in the person's records.

### **Best Interests Decisions**

Where it is considered that the individual lacks capacity, a decision about vaccination must be made in their best interests.

A decision on best interests determines what is best for the person at the present time. Where the decision involves the provision of medical treatment, the doctor or other member of healthcare staff responsible for carrying out the particular treatment or procedure is the decision-maker.

The assessment and the reasons upon which the decision was reached should be clearly documented in the person's records.

Even where they are deemed to lack capacity, the person should be involved in the decision-making process as far as is possible and any wishes they have expressed should guide the conclusion. Where appropriate and practical to do so, this is likely to involve a discussion with those close to and caring for the person. This discussion would seek their views about the person's best interests and to see if they have any information about the person's wishes and feelings, beliefs and values

In a residential or nursing home, there may be a number of residents or patients who might lack capacity. For each, there must be an individual assessment of capacity and for each there must be an individual consideration of their best interests.