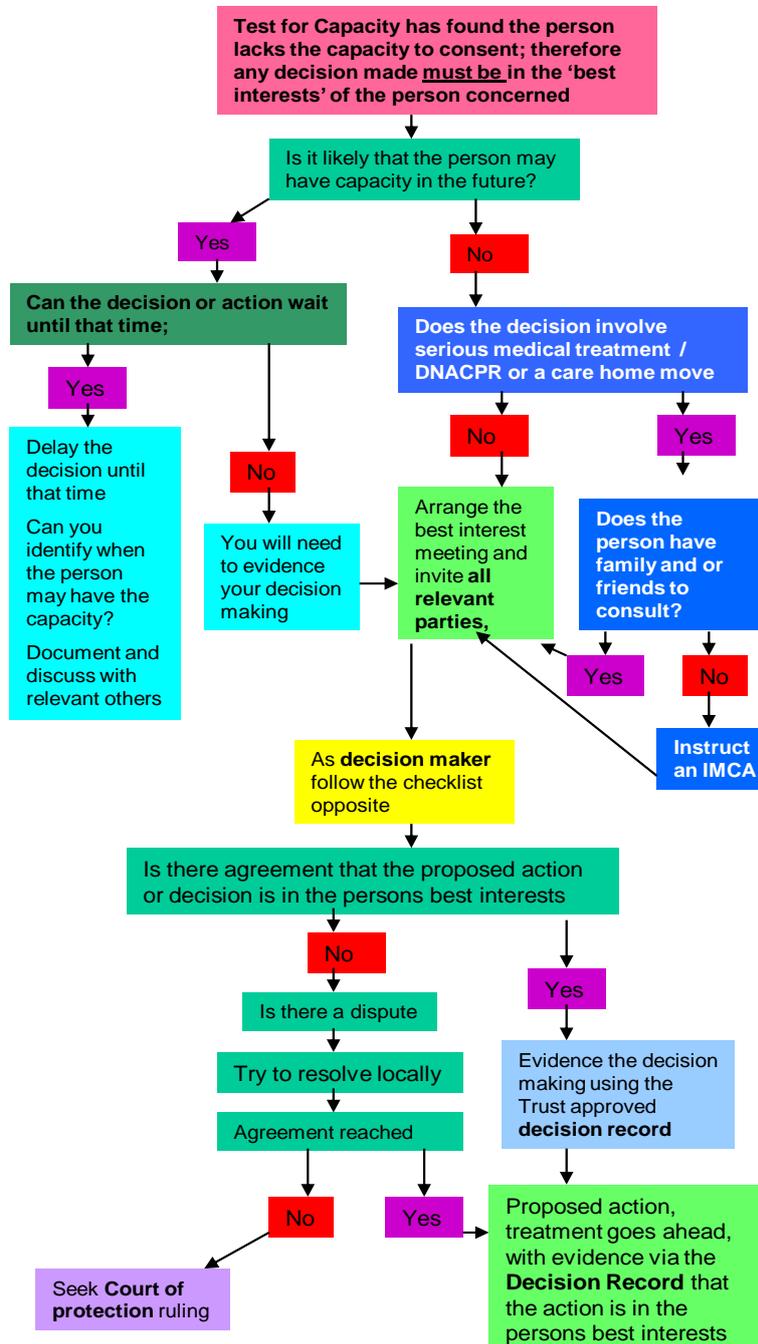


Mental Capacity Act (2005) Best Interest Pathway

Anything done for, or on behalf of a person who lacks capacity must be done in the persons best interests – This does not relate to any treatments under the Mental Health Act [1983]



The decision maker must ensure that the proposed action/treatment is in the best interests of the person

The decision maker needs to check if there is an advance directive, Lasting Power of Attorney [LPA] or Deputy or if there is a friend/carer of person nominated by the person to consult

The decision maker must:

- Consult with all relevant others i.e. the person, Medic/GP, Carers, Allied Health Professionals, Social Care staff, Advocate/IMCA, or people who know the person really well, i.e. LPA or Deputy or Enduring Power of Attorneys"
- Identify the views of all relevant people in the persons life
- Not make assumptions about a persons best interests based upon the persons age, or appearance, condition or any aspect of their behaviour
- Consider all the relevant circumstances relating to the decision in question
- Involve the person as fully as possible
- Ensure that the decision concerns the preservation of withdrawing of life sustaining treatment, the decision maker must not be motivated by a desire to bring about death
- Be able to justify and evidence their decision making
- Ensure that other least restrictive options are always explored **(please complete best interests decision record)**

If it has not been possible to contact people, give details why not possible

What constitutes a best interest meeting?

This does not always have to be a face to face meeting, as long as the decision maker follows the guidance above with all relevant others and this is documented on the agreed paperwork.

Record keeping; it is important that you accurately record and evidence any decisions made with regards to best interests

To access **Court of Protection**- contact the Trust's Mental Health Legislation Department for advice