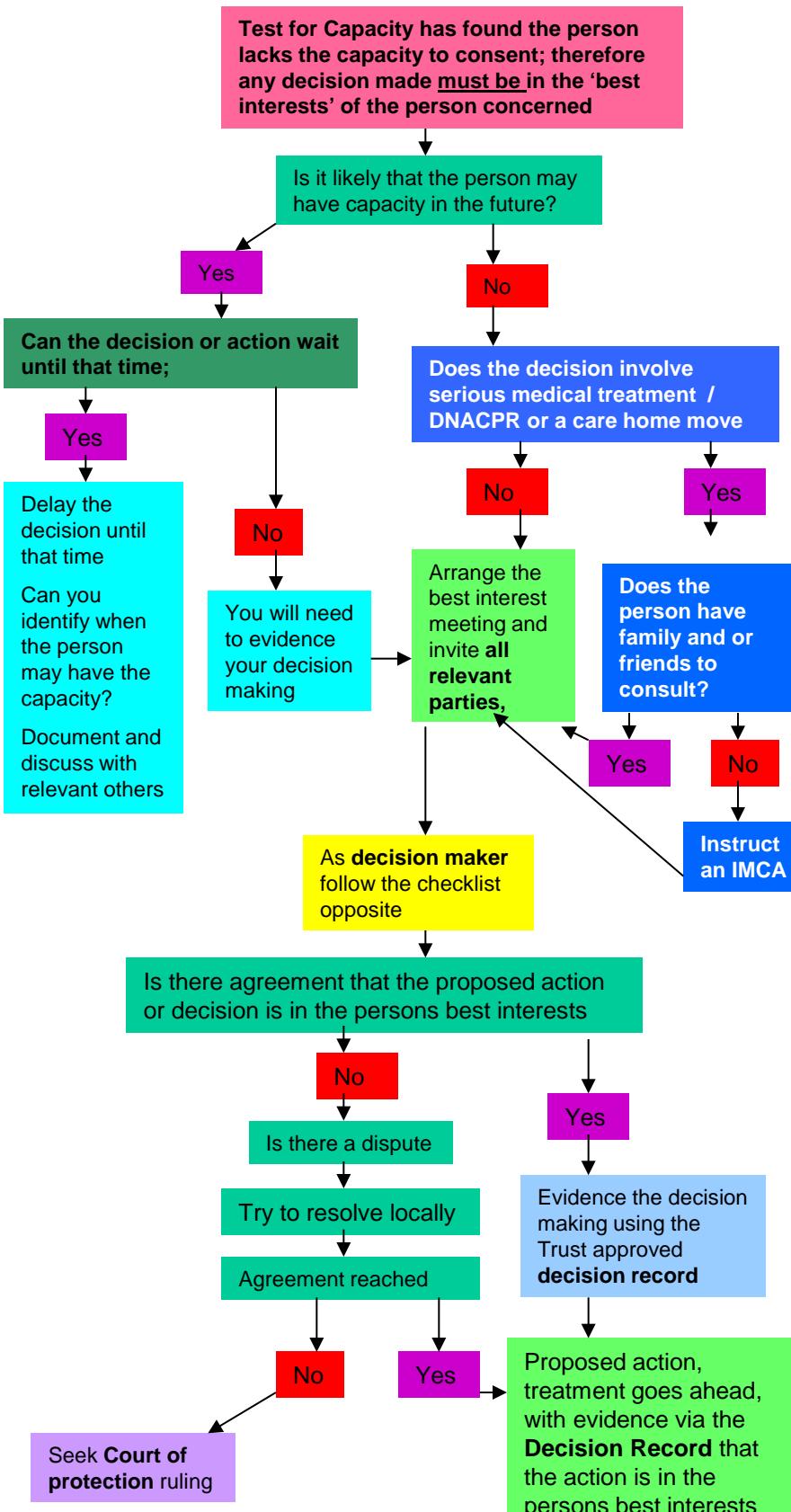


Mental Capacity Act (2005) Best Interest Pathway

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