ST3-POA-FELL-EPA1 – POA Capacity assessment

Area of practice	Psychiatry of old age	EPA identification	ST3-POA-FELL-EPA1
Stage of training	Stage 3 – Advanced	Version	v0.7 (EC-approved 24/07/15)

The following EPA will be entrusted when your supervisor is confident that you can be trusted to perform the activity described at the required standard without more than distant (reactive) supervision. Your supervisor feels confident that you know when to ask for additional help and that you can be trusted to appropriately seek assistance in a timely manner.

Title	Formal capacity assessment and report.					
Description Maximum 150 words	The trainee demonstrates an understanding of legal concepts and criteria for testamentary capacity, enduring power of attorney, unsoundness of mind and capacity to stand trial for their jurisdiction and can apply these in clinical situations.					
Fellowship competencies	ME	1, 2, 8	НА	1		
	СОМ	1, 2	SCH	2		
	COL	1	PROF	1, 2		
	MAN	1, 3				
Knowledge, skills and attitude required	Competence is demonstrated if the trainee has shown sufficient aspects of the knowledge, skills and attitude described below.					
The following lists are neither exhaustive nor prescriptive.	Ability to apply an adequate knowledge base					
	Demonstrates knowledge of the legal meaning of capacity and of clinical scenarios in old age psychiatry where capacity may be affected.					
	• Shows detailed knowledge of the legal instruments giving others substitute decision-making power, including enduring powers of attorney, wills, guardianship and administration orders, medical decision making and advance directives, and the criteria that apply to these in the local jurisdiction.					
	Shows knowledge of forensic issues, including capacity to stand trial, fitness to plead.					
	Has an awareness of how elder abuse and exploitation may occur in these legal domains.					
	Skills					
	Shows the ability to evaluate patients and apply relevant legal concepts and definitions in a range of clinical scenarios.					
	 Can assess complex social networks, relationship histories and patterns of making previous wills and enduring powers of attorney to understand the psychosocial and historical context in which patients may be making decisions regarding wills and enduring powers of attorney. 					

	Can identify circumstances where mental disorders can affect reasoning, knowledge and decision making in processes of patients making legal decisions.			
	Can communicate psychiatric history, assessments and conclusions in relevant reports.			
	Attitude			
	Appreciates the difference between a clinical versus medicolegal role and assessment in old age psychiatry.			
	Maintains appropriate professional boundaries when dealing with requests in a medicolegal context.			
	Maintains impartiality when undertaking medicolegal assessments and providing reports.			
Assessment method	Progressively assessed during individual and clinical supervision, including three appropriate WBAs.			
Suggested assessment	Mini-Clinical Evaluation Exercise.			
method details	Observed Clinical Activity (OCA).			
(These include, but are not limited to, WBAs)	Professional presentation.			
	Formal review of knowledge through supervision.			
	Supervisor review of trainee's reports.			

References

BROOKBANKS WJ & SIMPSON AIF, eds. Psychiatry and the law. Wellington: LexisNexis, 2007.

DARZINS P, MOLLOY DW & STRANG D. Who can decide? The six step capacity assessment process. Adelaide: Memory Australia Press, 2000.

O'NEIL N & PEISAH C. Capacity and the law. Sydney: Sydney University Press, 2011.

RYAN C, CALLAGHAN S & PEISAH C. The capacity to refuse psychiatric treatment: a guide to the law for clinicians and tribunal members. *Aust NZ J Psychiatry* 2015; 49: 324–33.

COL, Collaborator; COM, Communicator; HA, Health Advocate; MAN, Manager; ME, Medical Expert; PROF, Professional; SCH, Scholar