Form 1: Assessment of Capacity to make Decisions about a Personal Care Matter

(assessing capacity under Sections 10, 11 and 13 of the Personal Directives Act)

I, _		(fu	all name), am a registered member of the (name of capacity assessor's professional college		
			assessor under the Personal Directives Act. dical practitioner or a registered psychologist)		
Las	ssess	sed	(full name of person being assessed) Of		
			(address of person) on//		
(da	d/mm.	/yyyy) at a.m./p.m. at	(location of assessment).		
de	cisio	ns for another person, skip items 1 and	er a personal directive to make personal-care 2 and proceed to 3.		
1)	Personal directive made:				
	Che	eck one:			
		I am aware that made a personal directive.	(full name of person being assessed) has		
		I do not know if made a personal directive.	(full name of person being assessed) has		
2)	Cor	nsultation under personal directive:			
- b	y nai		t states that a personal directive may name a person pacity assessor must consult in making the		
Ch	neck (one of the following:			
		I consulted with	(full name of person named in personal f capacity.		

		I have made reasonable efforts to consult with	(full nam	ne of person
		named in personal directive) in making this assessment of capacity.		
		I am not aware that anyone has been named in the personal directive	for consu	ltation.
3)	<u>Ca</u> p	pacity explained:		
th	at is r	rity" is defined in the Personal Directives Act to mean the ability to unde elevant to the making of a personal-care decision and the ability to app ably foreseeable consequences of a decision or lack of a decision.		
		Before conducting the assessment of capacity, I explained to		
		(full name of person being assessed) the purpose of the assessment, the	_	
		effect of a finding of capacity or incapacity, and their right to refuse to) be asses	sed.
4)	Ass	essor's opinion		
lt	is mv	opinion that (full name of person	heing asse	esed) has
		acity to make a personal-care decision regarding the following:	20116 4000	70000) 1100
	•			
Pe	erson	al Care Decision	<u>Capacity</u>	
•	Healt	h care	Yes 🗆	No 🗆
		(Specify the type of healthcare)		
("	healti	n care" is defined for the Personal Directives Act to mean any		
		ation, procedure, service or treatment for an individual that is done		
		erapeutic, preventative, palliative, diagnostic or other health-related		
рι	irpos	e, and includes a course of health care or a care plan)		
•	Place	Yes 🗆	No 🖵	
•	Provi	Yes 🗆	No 🗖	
•	Leavi	Yes 🗆	No 🗆	
•	Othe	personal care	Yes 🗆	No 🗆
		(Specify the type of personal care)		

("personal care" is defined in the Personal Directives Act to include, but is not limited to, health care, nutrition, hydration, shelter, residence, clothing, hygiene, safety, comfort, recreation, social activities, support services and any other personal matter that is prescribed by the regulations)

5)	Su	pporting information:		
The	e fol	lowing information supports my opinion:		
	A)	Observations from my assessment of the	e person being assessed:	
	В)	Information from other sources (please s	pecify sources of information):	
Are	e the	ere any additional supporting documents,	information, or reports attached?	Yes □ No □
(date of signature)			(signature)	
			(printed name)	

Notes:

1) This form must be completed by a qualified capacity assessor, in accordance with Section 4 of the *Personal Directives Regulations*.

2) This form is to be used:

- a. if any of the following request an assessment of the capacity of a person who has made a personal directive or a person on whose behalf personal care decisions will be made:
 - the person who made the personal directive or on whose behalf personal care decisions will be made.
 - a delegate named in the personal directive.
 - a statutory decision-maker.
 - the nearest relative (as defined in the Personal Directive Regulations).
 - a health-care provider.
 - a person in charge of the home-care services provider or continuing-care home where the person who made the personal directive or on whose behalf the personal care decisions will be made resides.

(s. 10(2) and (3) of the Personal Directives Act)

- for the assessment of capacity of a person who has made a personal directive after they have been prevented from leaving the Province. (s. 11 of the Personal Directives Act)
- c. for the assessment of capacity of a person delegated under a personal directive to make personal-care decisions. (s. 13 of the Personal Directives Act)
- 3) An assessment made under s.11 of the Act after a person has been prevented from leaving the Province must be completed as soon as is practicable. (s.11(2) of the Personal Directives Act)

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