Feasibility of using the Mental Capacity Assessment Support Toolkit (MCAST) in clinical practice

Dr Mark Jayes
Highly Specialist Speech and Language Therapist
HEE / NIHR Clinical Doctoral Research Fellow
Contents

- Background to research
- MCAST
- Feasibility study methods
- Feasibility study results
- Potential impact
Background: mental capacity

- The ability to make an **informed decision**
- **Mental Capacity Act (2005):** framework for assessing mental capacity in adults (>16y)

**Two stage test:**
- Impairment/disturbance of mind or brain
- Functional assessment of **decision-making:** ability to understand, retain, weigh up information and communicate a decision

- **Contributes to shared decision-making / patient-centred care agendas**
Background: mental capacity

- 34% medical patients may lack capacity ¹
- Assessment is subjective, complex
- Current practice is inadequate ²
- Inaccurate assessment risks excluding people from autonomous decision-making / asking people to make uninformed decisions

¹. Lepping, P. et al. (2015)
². House of Lords Select Committee on the Mental Capacity Act 2005 (2014)
Patients with communication difficulties

- Mental capacity may be masked by communication difficulties

- MCA requires adjustments to assessment process

- Assessors may not recognise or know how to support communication difficulties

- Assessors may not always refer to SLTs for specialist support

3 Hemsley & Balandin (2014)
4 Jayes, Palmer & Enderby (2016)
Research aims

- To develop a **toolkit** to support **multidisciplinary** staff to assess **mental capacity**

- To evaluate the **feasibility** of using the toolkit in clinical practice
Specification for toolkit

- Structure
- Documentation aid
- Prompts to help assessor do a thorough job
- Ways to identify and support communication needs
- Ways to check understanding
- Quick and easy to use
- Portable / easily accessible
The Mental Capacity Assessment Support Toolkit (MCAST)

- 3 components
  - 1. Support Tool
  - 2. Communication Screening Tool
  - 3. Resource Pack

- Paper format… digital coming soon!
Support Tool

Helps assessor to:

- prepare
- complete
- document

any assessment
Communication Screening Tool

Helps assessor to identify if P has a communication difficulty

- If yes, helps assessor decide what to do next
Resource pack

- Photographs and simplified language related to discharge / treatment decisions
- Ways to test decision-making abilities
Feasibility study

Aims
To investigate:

- feasibility of the MCAST materials and processes
- effects of using the MCAST on compliance with MCA
- effects of using the MCAST on assessor confidence
- Communication Screening Tool’s validity and reliability
- feasibility of recruitment and data collection methods
# Feasibility study: methods 1

<table>
<thead>
<tr>
<th>Research question</th>
<th>Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are assessments more <strong>compliant</strong> with the MCA (2005) when MCAST used?</td>
<td>Case note audit (n=10)</td>
</tr>
<tr>
<td>Do staff feel more <strong>confident</strong> about capacity assessment when they use the MCAST?</td>
<td>Confidence survey (n=17)</td>
</tr>
<tr>
<td>Do staff find the toolkit <strong>usable</strong> and <strong>acceptable</strong>?</td>
<td>Usability survey (n=19)</td>
</tr>
<tr>
<td>Do patients and carers find the toolkit <strong>acceptable</strong>?</td>
<td>Semi-structured interviews (n=6)</td>
</tr>
</tbody>
</table>
Feasibility study: methods 2

<table>
<thead>
<tr>
<th>Research question</th>
<th>Methods</th>
</tr>
</thead>
</table>
| Can staff use the MCAST Communication Screening Tool to **accurately** and **reliably** identify patients with communication difficulties and methods to support them? | **Case series (n=9)**  
Data compared across assessors for 2 subtests:  
  - **Yes/No** response reliability (Y/N)  
  - **Spoken Comprehension** (SC)  

**Criterion validity:**  
Researcher v Staff participant A  

**Inter-rater reliability:**  
Staff participant A v Staff participant B |
Results

Participants

- 21 members of staff
  - Medicine, Nursing, OT, Physio, SLT
  - Varied experience and training in mental capacity

- 17 patients
  - Stroke / cognitive difficulties (brain injury, delirium, dementia)
  - 13/17 had a communication disorder

- Acute and intermediate care settings:
  - Stroke unit, neurorehabilitation, dementia unit, elderly care
## Feasibility study: results 1

<table>
<thead>
<tr>
<th>Research question</th>
<th>Methods</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are assessments more <strong>compliant</strong> with the MCA (2005) when MCAST used?</td>
<td>Case note audit (n=10)</td>
<td><strong>Significant improvement</strong> in documentation (p=0.007)</td>
</tr>
</tbody>
</table>
| Do staff feel more **confident** about capacity assessment when they use the MCAST? | Confidence survey (n=17)       | **Significant increase** in reported confidence levels (p=0.008)  
Staff associated increased confidence with **use of MCAST** |
## Feasibility study: results 2

<table>
<thead>
<tr>
<th>Research question</th>
<th>Methods</th>
<th>Result</th>
</tr>
</thead>
</table>
| Do staff find the toolkit usable and acceptable? | Usability survey (n=19)                      | • 100% found it **easy to use**  
• >80% found it **useful**  
• >90% said it **helped** them to **assess** capacity  
• 100% would use it **again**  
• 100% would like to use MCAST to **document**                                                                 |
| Do patients and carers find the toolkit acceptable? | Semi-structured interviews (n=6)             | • All reported MCAST materials and processes were **acceptable**  
• Recognised potential to **improve access** to decision-making                                                                 |
Usability / acceptability: staff participants’ comments

Before using the MCAST I rushed into a capacity assessment without doing the necessary preparation.

Using MCAST has given me a structure to follow.

I’m doing a better and more thorough assessment.

Gave the patient the best possible chance to demonstrate capacity.

Really enjoying using the MCAST – it’s increased my confidence.

Your patient is paramount and using this tool I felt kept me patient centred.

A really reliable way of recording a capacity assessment and decision.
### Evaluation question
Can staff use the MCAST Communication Screening Tool to accurately and reliably identify patients with communication difficulties and methods to support them?

<table>
<thead>
<tr>
<th>Methods</th>
<th>Result</th>
</tr>
</thead>
</table>
| **Case series** (n=9)  
Data compared across assessors for 2 subtests:  
- *Yes/No* response reliability (Y/N)  
- *Spoken Comprehension* (SC) | **Criterion validity:**  
Y/N: 9/9 consistent  
SC: 2/9 consistent  

**Inter-rater reliability:**  
Y/N: 9/9 consistent  
SC: 5/9 consistent |

- 8/17 patients were *not screened*  
  - 1/8 no comm’n needs  
  - 3/8 known to SLT  
  - 4/8 required SLT input
Potential impact of MCAST

- Promotes patient-centred care
- May increase autonomous / supported decision-making
- Promotes awareness of communication / SLT
- May increase access to communication support / SLT
- Appears usable, acceptable
- Appears to facilitate and improve practice
- Potential for national roll out
- Applicable to different populations / settings
Thanks for listening
Any questions?

mark.jayes@sth.nhs.uk

@MCAsupporttool

**Supervisors:** Dr Rebecca Palmer, Professor Pam Enderby

This is a summary of independent research funded by Health Education England (HEE)’s and the National Institute for Health Research (NIHR)’s Integrated Clinical Academic Programme. The views expressed are those of the authors and not necessarily those of the NHS, the NIHR or the Department of Health.
References