

# Learning Loop

## Mental Capacity



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**NHS**

North West  
Ambulance Service  
NHS Trust



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### Background

Ambulance clinicians regularly come in to contact with patients who lack mental capacity, however learning from incidents/coronial inquests has highlighted that ambulance clinicians are not always recognising when a person may lack mental capacity, including a lack of a detailed assessment.

**Patients who lack mental capacity are increasingly more vulnerable.**

In the pre-hospital environment, NWAS clinicians will be required to act in a person's best interest if they lack mental capacity and at times may need to use physical restraint/pharmacological restraint in order to safely convey patients to hospital (section 4, 5 and 6 of the [Mental Capacity Act 2005](#)).

JRCALC has [guidance for ambulance clinicians](#) on assessing mental capacity. There are also a suite of resources available on the [NWAS CPD Platform](#).

QR to  
MCA,  
JRCALC  
& CPD



### Practise

Use JRCALC and the NWAS Capacity assessment section on EPR when assessing an individual's mental capacity. Seek support if required.

**There must be a presumption of capacity unless a person gives reason to question it such as:**

Psychosis, suicidal ideation, self-harm (due to distorted thought/dysregulation) confusion through, for example, dementia, stroke, hypoglycaemia etc.

To lack capacity, a person must have a **disturbance or impairment of the mind or brain (permanent or temporary)**, and either be:

- Unable to understand the information relevant to the decision.
- Unable to retain the information for as long as the decision is valid.
- Unable to use or weigh up the information as part of the process of making a decision.
- Communicate their decision in any way.

You don't have to be 100% certain of your decision of capacity; think "Is it more likely than not that the individual lacks capacity"

### Now what

**Any decision to act in a person's best interest must be the least restrictive and for the least time possible.**

When acting in a person's best interests, staff must be able to demonstrate that any restraint used is proportionate and necessary to the likelihood or seriousness of harm occurring.

- **Complete the assessment of capacity/best interest section on EPR.**
- **Request support from Police, only if RAVE (Resistance Aggression Violence Escape) factors are present and risk to NWAS clinician, patient or others is present.**

