

Clinicians and Mental Capacity Assessment (CMCA) Questionnaire

V1.91

Demographic information

What is your age?

- 18-29
- 30-44
- 45-54
- 55-64
- 65+

What gender do you identify as?

- Male
- Female
- Trans
- Prefer not to disclose

In which country did you obtain your Primary Medical Qualification (i.e. MBBS, MD degree)?

- United Kingdom
- European Union or European Economic Area
- Non-European Union or Non-European Economic Area

At what career stage are you currently?

- Recently Qualified - FY1-FY2
- Early Speciality Training - CT1-ST3
- Senior Speciality Training - ST4 to CCT
- Consultant – less than 10 years of experience
- Consultant – over 10 years of experience
- Retired
- Other _____

Which clinical speciality do you predominately work in? (Drop down menu, list of specialities as recognised by the General Medical Council)

- Acute Internal Medicine (AIM)
- Allergy
- Anaesthetics
- Audiovestibular Medicine (AVM)
- Cardiology
- Cardiothoracic surgery
- Clinical Genetics
- Clinical Neurophysiology
- Clinical Pharmacology & Therapeutics (CPT)
- Combined Infection Training (CIT)
- Dermatology
- Emergency Medicine
- Endocrinology & Diabetes Mellitus
- Gastroenterology
- General Practice
- General surgery
- Genitourinary Medicine (GUM)
- Geriatric Medicine
- Haematology
- Immunology
- Infectious Diseases & Tropical Medicine
- Intensive Care Medicine
- Medical Microbiology

- Medical Oncology
- Medical Ophthalmology
- Medical Virology
- Neurology
- Neurosurgery
- Obstetrics and Gynaecology
- Oral and maxillofacial surgery
- Otolaryngology (ENT)
- Paediatrics
- Paediatric surgery
- Palliative Medicine
- Pathology
- Plastic surgery
- Rehabilitation Medicine
- Renal Medicine
- Respiratory Medicine
- Rheumatology
- Sport And Exercise Medicine
- Trauma and orthopaedic surgery
- Urology
- Vascular surgery
- Other

Domain 1: Experience

Please select the response(s) that most closely match your knowledge and experience:

1. Have you ever performed a mental capacity assessment independently or as part of a team?
 - Yes
 - No

2. If you answered No to Question 1, (i.e. do not perform mental capacity assessments) why is this?
 - I do not work clinically
 - My work does not involve patient contact
 - I delegate mental capacity assessments to doctors more junior to me
 - I refer mental capacity assessments to doctors more senior to me
 - I refer mental capacity assessments to other members of the multi-disciplinary team
 - Other _____

3. Have you performed a mental capacity assessment in the past 12 months?
 - Yes
 - No

4. How many mental capacity assessments have you performed in the past 12 months?
 - 1-10
 - 11-20
 - 21-30
 - 31-40
 - 41-50
 - >50

5. Are you familiar with the professional guidelines on mental capacity assessment?
- Yes
 - No
6. Have you ever received formal training on performing mental capacity assessments?
- Yes
 - No
7. If yes, what did your training cover? **Select as many as apply:**
- The Mental Capacity Act (2005) and its legal requirements
 - The components of a mental capacity assessment
 - Indications for performing a mental capacity assessment
 - The purpose of mental capacity assessment in consent for health and social care
 - Performing mental capacity assessments in patients with communication difficulties
 - I don't remember
 - I did not receive formal training
8. How was your training delivered? **Select as many as apply:**
- eLearning online training module
 - Face to face workshop
 - Didactic lecture
 - I don't remember
 - I did not receive formal training
9. How do you usually perform mental capacity assessments? **Select as many as apply:**
- I have a conversation with the patient to gain an impression and make a judgement.
 - I compare a patient's argument to commonly held beliefs then make a judgement.
 - I follow the steps set out in the local guidelines to make a judgement.
 - I perform a comprehensive interview in the presence of at least 1 other witness before I make a judgement.
 - Other _____
10. On average, how much time do you usually allot to perform a mental capacity assessment?
- 1 - 10 minutes
 - 11- 20 minutes
 - 21- 30 minutes
 - 31-60 minutes
 - >60 minutes
 - I am not sure

11. How confident are you in recognising when an assessment of mental capacity is justified?

Not at all confident	Somewhat confident	Mostly confident	Very confident	Extremely confident	I don't know
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12. Have you ever witnessed a mental capacity assessment being performed without a clear indication?
- Yes
 - No
13. Have you ever queried the indication(s) for or the outcome of a mental capacity assessment?
- Yes
 - No

14. If yes, why did you query the mental capacity assessment(s)? **Select as many as apply:**
- The assessment was unnecessary.
 - The question posed or decision to be made was unclear.
 - The assessment was performed incorrectly.
 - The patient or individual's mental capacity fluctuated.
 - Excess pressure was exerted by the patient's relatives or caregivers in favour of a particular outcome.
 - Excess pressure was exerted by colleagues in favour of a particular outcome.

Domain 2: Attitudes

Consider the scenario below:

Mrs C is an 80 year old lady admitted after her daughter found her on the floor drowsy and confused at home. A severe community acquired pneumonia was diagnosed as the cause of her delirium and appropriate treatment was given over several days. Mrs C requires ongoing input from the therapy team due to poor mobility and although improving, she continues to be delirious. Mrs C has expressed a wish to end her hospital admission early against medical advice and you have been asked to perform a mental capacity assessment.

Please select the statement which most closely represents your thoughts and/or feelings in the context of and in consideration of the scenario above:

1. Have you ever faced a scenario like that of Mrs C professionally?
- Yes
 - No

2. How competent do you feel to perform a mental capacity assessment in the above scenario?

Not at all competent	Somewhat competent	Moderately competent	Very competent	Extremely competent
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3. How confident do you feel in performing a mental capacity assessment in the scenario above?

Not at all confident	Somewhat confident	Moderately confident	Very confident	Extremely confident
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4. In relation to your feelings toward performing mental capacity assessments, have you felt any of the below? **Select as many as apply:**
- Happy
 - Sad
 - Anxious
 - Stressed
 - Frustrated
 - Ambivalent
 - Under time pressure due to your workload
 - Under pressure or bullied by colleagues
 - Under pressure or bullied by patient relatives or caregivers
 - I have not experienced any of these feelings in this context
 - Other_____