

Assessing mental capacity for after care, where dementia present: Patricia

Patricia has dementia and was taken to hospital following a fall at home. She was admitted to a surgical ward as she needed a hip replacement.

Following the surgery, Patricia needed regular repositioning to prevent skin damage, however she would not let the nursing staff do this, telling them to go away. The staff did not think that Patricia had the mental capacity to understand why they wanted to turn her, so they spoke to Patricia's daughter. Together, they spoke to Patricia to explain why the repositioning was important.

They talked about the purpose of changing position and how the staff can do this using equipment so that changing position is done with ease and dignity. The staff were able to show what the equipment looked like. They also talked about what would happen if Patricia did not change position - for example, how this could lead to pressure sores. After talking with Patricia, staff asked what she thought about their discussion. Patricia was unable to recall the conversation saying that she doesn't need help as her daughter will be with her.

Outcome: Following this conversation, both staff and daughter agreed that Patricia did not have mental capacity to make decisions related to her after care as she didn't understand what her risks were. A plan was made using a 30-degree tilt on the bed and careful positioning with pillows to relieve the pressure areas until Patricia was ready for further rehabilitation with the therapists.