

**Capacity assessment process worksheet**

1. Date of referral: \_\_\_\_\_ Referred by: \_\_\_\_\_

2. Date assessment began: \_\_\_\_\_

3. Trigger validity:

- a. Is the Adult demonstrating behaviour which puts themselves, or others, at risk of significant harm?  Yes  No
- b. Is the Adult known or suspected to have impaired decision-making?  Yes  No

Is the trigger valid?  Yes  No

Description of trigger, conflicts, severity and consequences of behaviour, etc.: \_\_\_\_\_

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\_\_\_\_\_

4. Identify domains in which the Adult may lack capacity:

- Healthcare  Accommodate  Choice of associates  Social/leisure activities  Education/vocational training
- Employment  Legal matters  Financial  Other (specify): \_\_\_\_\_

**Please do not proceed further with this database if the only concern is capacity to drive. Consider a referral for driving assessment.**

5. Please collect relevant domain-specific collateral information.

Description: \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. What are the Adult's values and goals, including cultural/religious beliefs, with regards to decision-making in relation to the domain(s) in question?

Comments: \_\_\_\_\_

\_\_\_\_\_