



## Risk Assessment Form Assisted Decision Making Capacity Act



Ref: CF:005:05	RE: Assessment Form Assisted Decision Making Capacity Act				
Issue date:	May 2023	Revised Date:	04052023		
Author(s):	National Health & Safety Function				
Legislation	Under Section 19 of the Safety, Health and Welfare at Work Act, 2005 and associated Regulations, it is the duty of the employer to identify the hazards and assess the associated risks in the workplace. All risk assessments must be in writing and the necessary control measures to eliminate or minimise the risks documented and implemented.				
Note:1	Please note exposure to COVID-19 may present a health risk to staff and others at our places of work. It is essential that the latest public health advice is followed and suitable control measures identified and implemented to mitigate the risk of COVID-19 infection.				
	When conducting risk assessments consideration should be paid to the risk presented and the means of avoiding and mitigating any such risk so far as is reasonably practicable.				
	Where 2 metre worker separation cannot be ensured a specific activity risk assessment must be conducted and alternative protective measures must be put in place e.g. comprehensive hygiene measures, minimising the frequency and time staff are within 2 metres of each other, minimising the number of staff involved in the task, physical barriers, provision of face masks.				
	It is responsibility of local management to implement any remedial actions identified.				

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<sup>&</sup>lt;sup>1</sup> Please note this cover does not require printing for every Risk Assessment



	Coneral Di	sk Assassment Form			
	General Ri	sk Assessment Form			
Division: Older Person's Service	es	<b>Source of Risk:</b> compliance with Assisted Decision Making (Capacity) Act 2015.			
HG/CHO/NAS/Function: CHO8		Primary Impact Category: Risk Type: Rights Name of Risk Owner (BLOCKS): Michael McCaul			
Hospital Site/Service. The Villag	ge Residence				
Dept/Service Site: The Village R	esidence				
Date of Assessment: 04052023		Signature of Risk Owner: Michael McCa	ul		
Unique ID No: ADA 1		Risk Co-Ordinator:			
		*Risk Assessor (s): Swapna Varghese Ma		ennett, Mari	
		Butler, Jolly Varghese, Michael McCaul,			
**HAZARD & RISK DESCRIPTION	EXISTING CONTROL MEASURES	ADDITIONAL CONTROLS REQUIRED	ACTION OWNER (i.e. the Person responsible for the action)	DUE DATE	
Compliance with Assisted Decision Making (Capacity) Act 2015.	<ul> <li>1. Ensure that 9 principles are followed</li> <li>A. The first and most important principle is the presumption of capacity. This means it is assumed that everyone has capacity until proved otherwise.</li> <li>B. Support to Make Decisions – all practical steps should be taken, to help the person make the decision themselves</li> </ul>	<ol> <li>Least restrictive intervention</li> <li>Listen attentively to a person</li> <li>Recognise body language as a means of saying no</li> <li>Ensure a resident is involved in the decision to move into residential services.</li> <li>Ensure that a resident has access to information in a format and way that they can understand</li> <li>Ensure that a person is facilitated and not restricted in relation to social aspects of care</li> <li>Provide enhanced care and support for an individual</li> <li>Ensure that residents have information in relation to making a complaint</li> </ol>	Swapna Varghese Marie Butler Michael S McCaul Jolly Varghese	01.05.2023	

F.	Will and		
	Preferences –		
	Everyone involved		
	with the assisted		
	decision-making		
	process must give		
	effect to the will and		
	preferences of the		
	person.		
	person.		
7.	<b>Consider Views of</b>		
,.	Others –		
	Consideration of the		
	views of anyone		
	engaged in caring for		
	the person, who has a		
	bona fide interest in		
	the welfare of the		
	person.		
	person.		
l G	Consider the		
	Likelihood of		
	<b>Recovery</b> – In order		
	to emphasise the		
	principle of "least		
	restrictive approach"		
	Use of		
".	Information –		
	relevant information		
	only should be		



3	3	9	Open		
Likelihood	Impact	Initial Risk Rating	Open	Monitor	Closed
INITIAL RISK		Risk Status			
	info A p dec sub Sta Sta bei Ho tha A d	the purpose of making the action/intervention.  Sure that a person is able to retain ormation person is entitled to make a cision about a particular topic or object at a particular time ff don't have to like the decision ff may think the decision is wrong ff may think that the decision ng made could harm the person wever these are the decisions at at time decision is subject to change		Risk Status	
person and use the information only for					
		obtained from a			

<sup>\*</sup>Risk Assessor to be recorded for OSH risks only.

<sup>\*\*</sup>Where the risk being assessed relates to an OSH risk please ensure that the HAZARD and associated risk are recorded on the form. All other risk assessments require a risk description only.