Assessment of Capacity to Consent to Treatment (ACCT) Interview

© Moye, Karel, Gurrera, Edelstein, Hicken, Armesto

Part 1: Values Assessment

"In this part of the interview, I am going to ask you your opinion about your health and life. You should give your honest opinion."

Valued Activities

Show response card

"The next questions are about what is most important to you in your life, or what makes your life worth living. Please tell me which three things are most important to your life or make your life worth living."

To take care of myself (e.g., bathing, dressing); not have to depend on others for help with daily life
To walk or move around by myself
To live at home
To think clearly about things
To make my own life decisions (e.g., about health, finances, housing)
To have relationships with family and friends
To practice my religion or spiritual life (faith, prayer)
To live without significant pain or discomfort.
To do specific activities or hobbies that I enjoy (e.g., reading, tv, gardening). [If chosen, ask, "what is it"].

Read through the list. Help the person to choose three things. Record the three things on the next page. Set page aside for future reference.

Valued Relationships

Do you live:			
In your own home or a	partment	In a supervised living setting	Other
For how long?			
Do you live:			
Alone	With loved ones	With others (ask who)	Other
Who are the people w	ho are most imp	ortant in your life?	
How close are you to			
Not at all	Somewhat close	Very Close	

Preferences for Doctor Involvement in Decision Making

Change response card. Pointing to the card: "These are the choices for the next question:"
"The next questions are about who you like to be involved when you face an important medical decision."

	I want to make the decision myself	I want to make the decision mostly by myself	I want to make the decision together with my doctor	I want my doctor to make the decision mostly for me	I want my doctor to make the decision entirely for me
When you make an important healthcare decision, how much input do you want from the doctor?	0	1	2	3	4

Preferences for Family Involvement in Decision Making

Change response card. Pointing to the card: "These are the choices for the next question:"

	I want to make the decision myself	I want to make the decision mostly by myself	I want to make the decision together with my family	I want my family to make the decision mostly for me	I want my family to make the decision entirely for me
When you make an important healthcare decision, how much input do you want	0	1	2	3	4
from family?					

Importance of Religion / Spirituality

Change response card. Pointing to the card: "These are the choices for the next question:" The next question is about whether your faith, religious, or spiritual beliefs influence your medical decisions.

	Not at all	A little	somewhat	mostly	completely
When you make an important healthcare decision, how much do your religious or	0	1	2	3	4
spiritual beliefs influence your decision?					

Quality of Life

Change response card.

"For this first set of questions, I will read you a statement, and I'd like you to tell me how true or false the statement is for you. I will ask you to tell me one of these answers [show response card and point to response categories]. You might tell me the statement is: Very False, Mostly False, that you Do Not Know, Mostly True, or Very True."

How true is each statement for you?	Very	Mostly	Do	Mostly	Very
·	False	False	Not	True	True
			Know		
The quality of my life is more important	0	1	2	3	4
than how long I live.					
If I were very sick, I would like to do	0	1	2	3	4
everything possible to prolong my life.					

Part 2. Decision Making Abilities

General instructions. If responses are vague, ask for elaboration. If using a standardized vignette and the individual gives examples or reasons outside of the vignette, direct them to the facts in the vignette (e.g., "yes, but in this story what is the benefit of the medication"). If the question asks for two responses (e.g., what are the two choices for treatment) and the individual gives only one response, prompt for another response.

Give credit for facts correctly enumerated. If response is omitted, prompt with questions below. If response is still incorrect or omitted, state the correct response. Repeat or rephrase the question if question misunderstood.

U1. Understanding 1: Disorder

Give bulleted list of information about the disorder to the patient. Leave the list out during the entire interview for reference. "In this next section, I am going to leave out lists of what I am reading. You can refer to the lists if you like."

If using a hypothetical problem, read this introduction:

"Now, I am going to tell you a story about a pretend or imaginary medical problem. I want you to listen very carefully. After I am finished, I am going to ask you some questions about the problem to make sure you understand it. Okay? In this story, I want you to imagine you have ... (disclose about the disorder)."

If referring to a real medical problem, read this introduction:

Now, I am going to talk to you about a medical problem you are facing. I want to review with you the basic facts about your medical situation. I want you to listen very carefully. After I am finished, I am going to ask you some questions about the problem to make sure you understand it. Okay? Right now, the medical problem you have is ... (disclose information about the disorder)."

Now, please describe to me in your own words ..."

U1. Who has this medical problem?

U2. What is the medical problem?

U3. How is it affecting you?

U2. Understanding 2: Treatment A

Give bulleted list of information about the treatment to the patient. Disclose information about Treatment A. Now, please describe to me in your own words ..." U4. What does the doctor want you to do? U5. What are the benefits of the treatment? **U6.** What are the risks of the treatment? U7. What are the risks of not getting the treatment? A1. Appreciation 1: Distrust A1. Do you have any doubts that such a medicine might help you? Why/Why not?" A2. Would you be concerned that the doctor might be trying to harm you? Why/Why not?"

U3. Understanding 3: Treatment B

If there is an alternative treatment, disclose and inquire in the same manner as Treatment A.

U8. What does the doctor want you to do?
U9. What are the benefits of the treatment?
U10. What are the risks of the treatment?
U11. What are the risks of not getting the treatment?

C1. Naming Choices
C1. What are your choices for treatment (in the story)? If only one choice is given, prompt for other, e.g., "w
is the other choice".
C2. Expressing a Choice
C2. What would you do? If no choice provided, prompt for choice, e.g., "if you had to choose, which one we
it be".
R1. Reasoning 1: Rational
Rational Reasons
R1. "What risks and benefits did you consider when making that decision?
If only one risk or benefit given, prompt, e.g., "what is another one?"
Comparative Reasons
R2. Tell me why seems better than
The me way seems seems seems
R2. Reasoning 2: Values
Impact on Valued Activities
R3. What are the ways that [choice] could affect [activities]? Ask for elaboration.
KS. What are the ways that [choice] could affect [activities]. Ask for etaboration.
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Impact on Valued Relationships
R4. What are the ways that [choice] could affect [person/relationship]? Ask for elaboration.

A2. Appreciation 2: Foresight

•	lecided to [choice given, prompt, e.g	-· ·	O •	_	
A4. Do you bel	ieve you might ge	t better without	[treatment]?" W	Vhy/Why not?"	