FPSC NO: 33 (REPEAT) MENTAL CAPACITY ACT AND CODE OF PRACTICE SUBMISSION DEADLINE: 5 MARCH 2010

INSTRUCTIONS

- With effect from 1st April 2008, the College Assessment of 30 MCQs has gone paperless.
- To submit answers to the following multiple choice questions, you are required to log on to the College Online Portal (www.cfps2online.org)
- Attempt ALL the following multiple choice questions.
- There is only ONE correct answer for each question.

• The answers should be submitted to the College of Family Physicians Singapore via the College Online Portal before the submission deadline stated above.

1. At the heart of the MCA lie three basic tenets. Which of the following best describes these three tenets?

- (A) Choice, dignity, and social safety net.
- (B) Autonomy, protection, and decision making.
- (C) Consent, confidentiality, and autonomy.
- (D) Non Maleficence, beneficence and justice.
- (E) None of the above.

2. As a personal welfare IPA, which of the following is a decision made by him or her for the donor?

- (A) Make business decisions.
- (B) Deciding where the donor is to live.
- (C) Conduct banking transactions.
- (D) Investment management.
- (E) Control and management of property.

3. The LPA appointments have certain conditions. Which of the following is allowed in the IPA document?

- (A) Anyone above age of 18 can qualify as a donee.
- (B) An undischarged bankrupt cannot be a donee.
- (C) Donor can appoint more than one donee.
- (D) Donor can appoint only a maximum of two replacement donees at a time.
- (E) Parents of intellectually disabled children can only appoint their family members to be their child's LPA.

4. Which of the following is a correct principle of mental capacity with regards to the implementation of the Singapore Mental Capacity Act 2008?

(A) Every individual needs to prove he has mental capacity to make a decision rather than being assumed to have that capability.

- (B) A person is deemed not have the capacity to decide if he or she cannot communicate verbally.
- (C) If the person cannot make a decision, the guiding principle is to choose the simplest decision for him or her.
- (D) A person cannot be assumed to lack capacity merely because he makes an unwise decision.
- (E) In deciding for the person with mental incapacity, safety is the most important concern.
- 5. If a health care provider comes across ill-treatment or willful neglect of a mentally incapacitated patient by his donee, who would be the best individual or organisation for him to complain to?
 - (A) The Singapore Medical Association.
 - (B) The Mediation Centre.
 - (C) The Magistrate Court.
 - (D) The Public Guardian.
 - (E) The Singapore Medical Council.
- 6. A person is defined to lack mental capacity if he is unable to make a decision or take an action for himself under which of the following circumstances?
 - (A) Any decision on day-to-day matters that a person will normally be able to make.
 - (B) Any decision so long as it is not financial.
 - (C) A particular decision at the end of the day.
 - (D) A particular decision irrespective of the time of the day.
 - (E) A particular decision at the time of the day that the person has the clearest thinking.
- 7. To be a certificate provider under the Mental Capacity Act, what is expected of the GP?
 - (A) Has completed training, passed a test and is accredited by MCYS.

- (B) Ensures that he is not related in any way to the person to be assessed.
- (C) Have regard to the code of practice in carrying out the formal assessment.
- (D) Applies the five principles in mental capacity assessment.
- (E) All of the above.

8. About the creation of a LPA, which of the following is correct?

- (A) The donee can exercise the authority conferred to him immediately once the LPA is completed.
- (B) The donor can only make an LPA if he has the mental capacity to make such an instrument.
- (C) There are three kinds of LPA that the donor can confer on his donees.
- (D) The donee of a personal welfare LPA makes decisions on tax matters for the donor.
- (E) All of the above are correct.
- 9. About information relating to the person who lacks capacity, which of the following is a criterion in establishing lack of capacity?
 - (A) Age.
 - (B) Appearance.
 - (C) Behaviour of the patient.
 - (D) Fails the 2-step test.
 - (E) Having made an unwise decision.

10. What legal protection is given to the person who provides information relating to person who lacks capacity?

- (A) May incur civil or criminal liability if the information turns out to be wrong.
- (B) Not deemed to have breached professional conduct or ethics.
- (C) May need to disclose his identity if this is required by any party.
- (D) He may not be protected if he is not a health care provider.
- (E) None of the above.

11. Any "healthcare worker" who gives information relating to a person who lacks capacity is protected. Who is included in this context?

- (A) Pharmacist.
- (B) Medical practitioner.
- (C) Social worker.
- (D) Dentist.
- (E) All the above.

- 12. Undue pressure is mentioned in the Mental Capacity Act (MCA). Which of the following statements about "undue pressure" is correct in the context of the said Act?
 - (A) It is expressly defined in the MCA.
 - (B) It is similar in meaning to undue influence.
 - (C) It may result in the LPA not being registered or be revoked.
 - (D) It is of smaller impact compared to undue influence.
 - (E) It is useful to identify various categories of undue pressure.
- 13. The assessment of mental capacity is a two-step test. Which of the following is the step 1 test?
 - (A) Is the person suffering from an impairment of, or a disturbance in the functioning of the mind or brain?
 - (B) Does the person understand the information?
 - (C) Does the person remember the information?
 - (D) Can the person weigh up the information?
 - (E) Can the patient communicate the decision?

14. About the code of practice, which of the following best describes it?

- (A) It is a set of practice tips.
- (B) It is a set of instructions.
- (C) It is a set of notes.
- (D) It is a legal statute.
- (E) It is a guideline.

15. About the use of restraints, which of the following statements is correct?

- (A) Pharmacological restraints are the safest and most effective restraint that can be used.
- (B) Removing the ability for a person to leave a place is not a restraint.
- (C) The restraint used should be the least restrictive option.
- (D) No restraints should be used.
- (E) All of the above.

16. About the kinds of patients who may need mental capacity certification, which of the following can be expected?

- (A) Relatives of the person whose capacity is in question, who wish to stop the person from making a particular decision.
- (B) The person who allegedly lacks capacity wishes to prove he has capacity.
- (C) The donee who wants confirmation that the donor does not have capacity.

- (D) Lawyers who need to confirm permanent incapacity in a person.
- (E) All of the above.
- 17. Section 7 of the Mental Capacity Act provides the actions of carers and providers which are protected or not protected. Which of the following IS protected?
 - (A) Care outside the carer's experience.
 - (B) Omissions of care.
 - (C) Negligent acts.
 - (D) Emergency care.
 - (E) Use of inappropriate restraints.
- 18. The Public Guardian is an appointment under the Mental Capacity Act. Which of the following is the best answer about his functions?
 - (A) Set up and maintain a register of LPAs.
 - (B) Set up and maintain a register of court orders that appoint deputies.
 - (C) Receive reports from donees and deputies.
 - (D) Investigate any alleged violation of any provision in the Mental Capacity Act.
 - (E) All of the above.
- **19.** With regards to mental incapacity which of the following is the best example of fluctuating capacity?
 - (A) Cerebral vascular accident.
 - (B) Delirium.
 - (C) Drug abuse.
 - (D) Clinical anxiety states.
 - (E) Early stage dementia.
- 20. Which of the components of history, mental state examination, physical examination, and investigations is/are NOT included in a psychiatric assessment?
 - (A) Detailed history.
 - (B) Physical examination.
 - (C) Investigations.
 - (D) Everything is included.
 - (E) Use of medications.
- 21. Informal assessment of most day-to-day decisions are best assessed by which of the following persons?
 - (A) Nursing officer.
 - (B) Attending physician.
 - (C) Caregiver
 - (D) The court.
 - (E) None of the above.

- 22. A formal assessment may be requested by a lawyer or a donee in which of the following situations?
 - (A) Day-to-day activities.
 - (B) Transferring assets to another individual or organisation.
 - (C) Adopting or announcing a religion.
 - (D) Consenting or revoking consent to treatment.
 - (E) None of the above.
- 23. With regards to a persistent vegetative state, which of the following best describes the type of incapacity associated with it?
 - (A) Permanent incapacity.
 - (B) Temporary incapacity.
 - (C) Fluctuating incapacity.
 - (D) Combination of permanent and temporary of incapacity.
 - (E) Combination of Fluctuating incapacity and temporary incapacity.
- 24. An individual or organisation such as a bank, that deals with a donee of an LPA on matter relating to the property of the donor, may require the donee to produce a certificate stating that the donor's lack of capacity is likely to be permanent. Who can certify this?
 - (A) Attending lawyer.
 - (B) Registered doctor.
 - (C) The court judge.
 - (D) The public guardian.
 - (E) None of the above.
- 25. The ethical issues related to the mental incapacity of a person centre around which of the following?
 - (A) Paternalism and consent.
 - (B) Autonomy and protection from harm.
 - (C) Justice and beneficence.
 - (D) Confidentiality and consent.
 - (E) None of the above.
- 26. When well-intended family members or relatives attempt to make decisions on behalf of a mentally incapacitated person, the conflicts and uncertainties that may arise are due to the lack of clarify and uncertainties about which of the following aspects of that person?
 - (A) Understanding and ignorance.
 - (B) Anxieties and fears.
 - (C) Concerns and hopes.
 - (D) Wishes and preferences.
 - (E) None of the above.

- 27. There is one different between the UK Mental Capacity Act 2005 and the Singapore Mental Capacity Act 2008. The latter does not carry any provision for advanced decisions on which of the following?
 - (A) Refusal of treatment.
 - (B) Care arrangements.
 - (C) Treatment.
 - (D) Personal welfare.
 - (E) Property and affairs.
- 28. The degree of accuracy of the surrogate's prediction of the patient's treatment preferences is in the order of which of the following?
 - (A) 20 30 percent.
 - (B) 40 50 percent..
 - (C) 60 70 percent..
 - (D) 80 90 percent.
 - (E) More than 90 percent

- 29. Which of the following best illustrates the principle of respect for a person who may lack capacity?
 - (A) Use pharmacological restraint instead of physical restraint.
 - (B) Help the person because he is frail.
 - (C) Accede to whatever he wants or needs.
 - (D) Decide for the person for the sake of safety.
 - (E) Act from the default position of presumed capacity.
- 30. Which of the following best illustrates the principle of balancing autonomy and protection from harm in a person who may lack capacity?
 - (A) Use of non-physical restraint.
 - (B) Ensure the restraining act is a proportionate response.
 - (C) Choose the most protective option available.
 - (D) Take a person to a place where he cannot leave.
 - (E) None of the above.