

Isle of Wight Council Adult Social Care

Deprivation of Liberty Safeguard (DoLS) Policy

1 Document Information

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3 Purpose, Scope and Aims

This policy outlines the Isle of Wight Council's arrangements for the operation of the Mental Capacity Act (MCA) Deprivation of Liberty Safeguards (DoLS). DoLS were an amendment to the MCA 2005 and came into effect in April 2009.

DoLS:

- 1) Provides legal protection for those vulnerable people who are, or may become, deprived of their liberty within the meaning of Article 5 of the European Court of Human Rights (ECHR) in a hospital or care home;
- 2) Helps to identify when a person who lacks mental capacity to consent be deprived of their liberty and ensures that deprivation of liberty is lawful and provide an Appeals Process.

The safeguards provide legal protection for people who lack capacity who are or may be deprived of their liberty. They ensure that their Human Rights under Article 5 of the Human Rights Act are not breached.

In the event of there being a Deprivation of Liberty and a dispute over capacity and/or "Best Interests decisions then this must be referred to the Court of Protection. In the case of settings other than care homes or hospitals such as supported living arrangements, residential schools or at home where the State is paying for the care and everyone agrees that the DoLS is in the person's best interests – (i.e. not subject to challenge), this too must be referred to the Court of Protection. Failure to do this may at the very least leave the Isle of Wight Council open to a financial penalty. All such cases must be referred to the Legal Department.

Scope

The IWC carries out a number of distinct functions in relation to the Mental Capacity and DoLS:

- 1) Care Management
- 2) Assessment of Needs and Commissioning Care Plans
- 3) Managing Authority being registered care homes managed by IWC
- 4) Supervisory Body
- 5) The Isle of Wight council's DoLS Administration Team
- 6) DoLS Assessors – Best Interests Assessors (BIAs) and Mental Health Assessors (MHAs)

This policy helps to manage the potential conflicts of interest between these multiple functions.

3.1 Managing Authority

The MCA DoLS Code of Practice defines a Managing Authority as the person or body with management responsibility for the hospital or care home in which a person is, or may become, deprived of their liberty.

In a residential care home or a private hospital, this will be the Registered Manager of the home or hospital.

In an NHS hospital it will be the board of the NHS Trust that runs the hospital and a scheme of delegation should indicate who acts as the Managing Authority on their behalf.

3.2 Working with the MCA

DoLS is a provision of the Mental Capacity Act 2005 and only applies to people who have been assessed as lacking mental capacity to decide where they should live and may be deprived of their liberty in their accommodation (hospital/care home).

Managing Authorities should ensure that they work in line with the MCA, especially in relation to admitting the person to the service and care planning.

There is a presumption of capacity when it comes to decision making and giving/withholding consent. However, if there is a reason to suspect that a person may lack capacity to make a specific decision then an assessment of their mental capacity to make that specific decision should be undertaken.

If the person is found to lack capacity to make a decision or to give/withhold their consent, then any decisions made should be made in their best interests, in line with section 4 of the MCA 2005.

This may involve the use of restraint to protect the person from harm and where the level of restraint involves deprivation of liberty, this policy will apply.

3.3 Identifying DoLS

Social care workers for the council will identify when making a residential placement whether a deprivation of liberty may occur and advise the Care Home of the need to request an authorisation if deprivation of liberty is likely to occur.

- The managing authority should have a system in place to identify whether a person is, or is at risk of, being deprived of their liberty now or in the future.
- Whether a person is being deprived of their liberty should be considered at all care plan reviews of people who lack mental capacity to consent to being accommodated in the care home and are therefore subject to best interest decisions.
- The review should have reference to the DoLS Code of Practice and to the IWC DoLS Tool (see Appendix 2).
- Advice can be sought from the IWC DoLS Administration Team.
- Managing Authorities will respond to representations from third parties such as relatives or health / social care professionals regarding potential deprivation of liberty.

If a third party believes that a resident is being deprived of their liberty, attempts should be made to reduce the restrictions on that person if it is safe to do so. If the person remains deprived of their liberty, or if the third party continues to believe that they are, then the Managing Authority should make a referral to the DoLS Administration Team.

When visiting care homes or hospitals, Isle of Wight council staff must be alert to the circumstances of residents who may not have a social care worker and raise any concerns about deprivation of liberty with the Managing Authority.

3.4 Make appropriate DoLS referrals

It is the responsibility of the Managing Authority to make an application for a standard authorisation for any person who they believe may be deprived of their liberty or lack capacity to consent.

The Managing Authority should therefore have a process for making referrals including:

- Who will complete the forms? The registered manager or their authorised deputy. The forms can be requested from the DoLS office.
- Referring people if necessary before admission – if it seems likely that admitting a person to the home will result in a deprivation of liberty then an application will be made up to 28 days before admission.
- Identifying the appropriate Supervisory Body – this will be the local authority where the person was ‘Ordinarily Resident’ before their admission to the care home or hospital. If it is not clear who the appropriate Supervisory Body is, contact your local DoLS Team.
- The Managing Authority must inform the CQC of all DoLS applications made using the relevant CQC forms.

3.5 Grant Urgent Authorisations

If the Managing Authority feel that they are already or are about to deprive a person of their liberty, to provide necessary care or treatment to keep them from harm and they appear to meet the six qualifying DoLS requirements in 2.5 Deprivation of Liberty’s Code of Practice, then they should grant an Urgent Authorisation.

This authorises the deprivation of liberty for up to seven days as long as an application for a standard authorisation is also made at the same time, or as soon as is reasonable.

3.6 Keep families and carers informed

Applying for a Standard Authorisation should come at the end of a process of best interests decision making regarding a person’s placement and support package, it should not usually be an unexpected or isolated event.

The person, their families and carers should be involved in this best interests decision making as appropriate and they should be involved in the discussions about what restrictions are needed to meet the person’s needs and keep the person safe and whether this amounts to a deprivation of the person’s liberty.

3.7 Comply with DoLS ‘Conditions.’

When a Standard Authorisation is granted, it may have ‘conditions’ attached. These are recommended by the Best Interests Assessor (BIA) and agreed by the Authoriser in the Supervisory Body.

Conditions are related to the DoLS standard authorisation and are things that the Managing Authority must do, to either;

- Ensure that the deprivation of liberty is in the persons best interests, or
- Minimise the effect of the deprivation of liberty on the person, or
- Seek to reduce or eliminate the deprivation of liberty in the future – ie by helping them settle or preparing them for discharge.

Conditions are for the Managing Authority to implement and it is their job to ensure that this is done.

3.8 Support the Representative

Every person subject to a DoLS Standard Authorisation will have a Relevant Person's Representative (RPR), appointed to keep in touch with them and operate the safeguards on their behalf. The RPR will either be a relative/friend or a paid advocate.

The Representative may request a review of the DoLS Authorisation, make applications to the Court of Protection if they feel it necessary or make complaints on behalf of the person. The Supervisory Body will support the Representative in their role, explaining the role to them if they are an unpaid Representative – booklets are available from the DoLS Administration Team to help with this.

The Supervisory Body will also remind the Representative that they can be supported in their role by an IMCA (Independent Mental Capacity Advocate) and this can be arranged by the DoLS Administration Team.

The Managing Authority should facilitate visits by the Representative, ensuring they have reasonable access to the person. A Representative does not have any additional rights of access to the person.

Ideally the Representative should be able to see the person in private, but this will be subject to risk assessment by the Managing Authority, to ensure that the person, Representative or third parties are protected from potential harm or exploitation.

The Managing Authority also monitors the Representative's contact. As a guide, we suggest that a Representative have direct contact with the Relevant Person once a fortnight.

3.9 Monitor the care plan

The person's social care worker will support preparing and reviewing the person's care plan which should reflect the restrictions and restraints that constitute the deprivation of liberty.

When the care / treatment / support plan is reviewed, the DoLS Authorisation should be monitored as well, asking;

- Is the person still deprived of their liberty?
- Is it still in their best interests?
- Have any of the 6 qualifying requirements changed?

If there are any significant changes which may mean that the DoLS Authorisation may no longer be required or that the reasons for it being needed might have changed, then the Managing Authority should contact DoLS Administration to ask for a DoLS Review.

3.10 Inform the Supervisory Body of any changes.

DoLS Authorisations are a legal status.

The Managing Authority should inform the Supervisory Body, through DoLS Administration on the Isle of Wight, if the Authorisation ends for any reason;

- The person is no longer deprived of their liberty - request a review
- The person moves – DoLS is location specific and does not follow the person

- The person is detained under the Mental Health Act – the DoLS Authorisation can be suspended for up to 28 days if the Supervisory Body is informed. After 28 days the Authorisation will end.
- The person is subject to a DoLS Authorisation in another place (such as following an admission to an acute hospital) – the person can only be detained in one place at any given time.
- Death of the person

3.11 Death whilst subject to a DoLS Authorisation.

If a person subject to DoLS authorisation dies, the Coroner's office must be notified (Coroner's Act 2010).

4. DoLS Administration

All DoLS applications, from hospitals or care homes will be received, assessed and authorised by Isle of Wight Council (IWC) Adult Services as the Supervisory Body for the Isle of Wight council area.

To assist and support this policy, an internal DoLS Procedure document has been designed, which is enhanced by various standard forms and record keeping documents that is directly linked to the Department of Health's guidance that can be located under 12 Related Documents (page 16).

4.1 Advice and support to Managing Authorities

The DoLS Administration Team coordinates BIAs and members of the DoLS management team to offer advice and support to Managing Authorities on all aspects of the DoLS process.

Neither BIAs nor the DoLS Administration Team will 'screen' referrals or advise that a referral shouldn't be made based on a judgement regarding whether the person is deprived of their liberty or not. The DoLS service will not advise whether a person is deprived of their liberty unless the person has been seen and the managing authority and an interested party consulted. The responsibility to make a DoLS application is with the Managing Authority and once a referral is made an assessment by a DoLS assessor will be undertaken.

4.2 Receive DoLS Applications

DoLS applications for standard authorisations, reviews etc can be made by email, fax or post. Email and fax are recommended due to the time scales imposed by legislation.

Urgent Authorisations should not be sent by post as they need to be dealt with in less than a week.

4.2.1 Urgent Authorisations & extensions

IWC will respond to requests for authorisation in a timely manner and will allocate assessors to complete assessments within the required deadlines. Where necessary, any urgent authorisations will be extended by up to one week.

4.2.2 Standard Authorisations

When an application for a Standard Authorisation is received by the DoLS Administration Team, the application is checked by the DoLS Management Team to ensure that it is an eligible application and that IWC is the appropriate Supervisory Body. Where necessary, the managing authority will be contacted for further information.

4.2.3 Completion of Assessments

Completed assessments, together with the authorisation form, will be forwarded to an authoriser for scrutiny. The completed application will be sent to the Managing Authority within 24 hours.

4.2.4 Unauthorised Deprivation of Liberty

If anyone feels that a person is deprived of their liberty in a registered care home or hospital and there is no DoLS authorisation or other legal framework in place to authorise the deprivation of liberty, the concerned party should inform the managing authority that they believe the person is unlawfully deprived of their liberty.

The managing authority should review the situation and within 24 hours should either:

- amend the care plan and reduce restrictions so that the person is no longer deprived of their liberty, or
- put an Urgent DoLS Authorisation in place and make an application for a Standard DoLS Authorisation, or
- inform the concerned party that the managing authority does not believe a deprivation of liberty is occurring.

If the managing authority does not resolve the situation, using the 1st or 2nd option within 24 hours then the concerned party should be advised to contact the DoLS Administration if they still believe that person is deprived of their liberty. The DoLS Administration Team will arrange for a Best Interests Assessor to determine whether the person is deprived of their liberty, unless:

- the request is clearly 'frivolous or vexatious'
- the person is clearly not deprived of their liberty
- the question of deprivation of liberty has been recently assessed and there have been no changes in the person's circumstances which would justify reconsidering.
- the DoLS Administration Team are receiving repeated requests, which have been determined as above

If the assessment concludes that the person is deprived of their liberty, the Managing Authority will be instructed to make an application for a Standard DoLS Authorisation by the DoLS Administration Team.

If the Managing Authority were to refuse to make this application a safeguarding alert would be raised by the assessor.

4.2.5 Reviews

The IWC will review DoLS when requested by the Managing Authority, the person, their Representative, any interested party or the social care worker.

DoLS Reviews will be undertaken when there is a belief that one of the qualifying requirements (see 1.3 of the procedural document) has changed.

DoLS Administration Team will inform parties of the scope of the review using standard forms.

The relevant assessments will be conducted in the same manner as for a standard application, using the same assessment forms.

If the review concludes that the person no longer meets one or more of the qualifying requirements then the DoLS Authorisation ends immediately and alternative arrangements may need to be considered to support the person without depriving them of their liberty.

5. Assessments

5.1 Mental Health Assessors

IWC has a list of mental health assessors who are appointed on a case by case basis, for which a payment equivalent for the Mental Health Act assessment fee, plus reasonable mileage, is made. Payments are now made directly by IWC to the doctors on submission of invoice.

Eligible MHAs will be approached by DoLS Administration Team and asked to complete the Mental Health, Eligibility and Mental Capacity assessments.

Where an MHA has completed assessments within the past 12 months the BIA can consider if it is appropriate to use these as equivalent assessments – see 5.3 below.

5.2 Best Interests Assessors (BIAs)

The council will have a list of BIAs who will be appointed to undertake assessments on a case by case basis. Normally such work will be undertaken during normal working hours but where agreed, can be undertaken as additional work, for which appropriate payment will be made.

BIA's will normally undertake the age, no refusals and best interests assessments and may also be asked to undertake the mental capacity assessment and the eligibility assessment (if qualified as an AMHP).

5.3 Equivalent Assessments

The MCA allows for the use of assessments that are 'equivalent' to any of the six DoLS assessments, instead of obtaining new assessments.

The equivalent assessment must have been completed in the past 12 months (except for the age assessment) and meet all of the requirements of the DoLS assessment. The Supervisory Body must be satisfied that there is no reason to believe the assessment is no longer accurate and the Supervisory Body must have a written copy of it.

5.4 Independent Mental Capacity Advocates (IMCAs)

Within the DoLS process IMCAs will be appointed to:

- Be involved in the DoLS assessment process for an unbefriended person or where the person is not unbefriended but has no one who is in a position to represent their views due to family dynamics, safeguarding concerns or conflicts of interest (39A IMCA)
- Act temporarily as a Representative when an unpaid Representative gives up the role and whilst a new Representative is appointed (39C IMCA)
- Support an unpaid Representative to understand or carry out their role or support the relevant person with the DoLS (39D IMCA)

Referrals for DoLS IMCAs will be made by the DoLS Administration Team when requested by a BIA, Senior Practitioner, a Representative, the Person themselves or the Managing Authority. The referral should be made as soon as the need for an IMCA is realised.

A 39A IMCA will report back to the BIA and provide a report for the Authoriser and their recommendations must be considered when the authorisation is decided upon. The report will be sent to the DoLS Authoriser with the assessments.

The IMCA must be informed of the authorisation date so that they can deliver their assessment in time. It may be necessary to arrange an extension of an Urgent Authorisation to allow an IMCA's report to be delivered and considered.

If a BIA's recommendations are in significant disagreement with the IMCA report, this should be brought to the attention of the authoriser as soon as the BIA identifies this. The BIA should inform the DoLS Administration Team of the disagreement who should notify the Authoriser.

This should not be left until the actual time that the authorisation is due as the authoriser may need to discuss the case with the BIA and IMCA or may even need to call a meeting with them.

If a Paid Representative and an IMCA are involved with a person IWC would expect these two roles to be carried out by different advocates as the roles can at times conflict.

6. Authorisation

In IWC the role of scrutinising and granting authorisations and making decisions throughout the DoLS process is delegated as follows:

Granting or not granting authorisations, extending urgent authorisations and agreeing the outcomes of DoLS reviews is delegated to the Commissioning & Operational Managers in IWC Adult Social Care, including Head of Adult Social Care (Nominated Director of Adult Social Services), Strategic Commissioning Manager (ASC) and Commissioning Manager for individual support.

Other decision making forms which do not authorise periods of deprivation of liberty may be scrutinised and signed by the DoLS Management Team.

6.1 Role of the authoriser

The authoriser:

- will scrutinise the assessments completed by the BIA and MHA following an application for a standard authorisation:
 - if all assessments are presented and they indicate that all six qualifying requirements are met, the standard authorisation must be granted.
 - if the assessments recommend that any of the qualifying requirements are not met, the authorisation must be declined.
- should not 'rubber stamp' assessments and grant authorisations without first scrutinising the assessments to ensure that they clearly evidence whether the qualifying requirements are or are not met.

If the authoriser:

- does not believe that the assessments evidence the recommendations or
 - is not clear what the recommendations are, or
 - is clear that a reasonable assessment process has not been followed or the assessments do not meet what the authoriser believes to be an acceptable standard, or
 - does not believe that the assessments take into account the person's human rights, including the right to a private and a family life
 - should discuss their concerns with the assessor or DoLS Administration Team for clarification or for the assessment to be completed to an acceptable standard.
- Set the duration for any period of standard authorisation, which may not exceed the duration recommended by the BIA (it can be shorter).
 - Will consider any condition recommended by the BIA. The authoriser may remove recommended conditions following a discussion with the BIA but it should be borne in mind that the removal of conditions may change the BIA's assessment of best interests.
 - Can add conditions to the authorisation, again following a discussion between the authoriser and the BIA. The MHA/MCA Lead or BIA Senior Practitioner may be involved in this discussion as appropriate.
 - Will agree the outcome of a DoLS review by scrutinising the submitted assessments and authorise the continuation or ending of the standard authorisation as appropriate.

6.2. When there is a disagreement with an Authorisation

- Where the relevant person or their Representative disagrees with the authorisation, they can apply to the Court of Protection for review.
- If there is an unresolved dispute about the person's best interests, the IWC will normally make the application to the Court of Protection.

7. Social Care Teams

When a DoLS Standard Authorisation is granted, any social care worker involved in the person's care should be notified.

If there are conditions attached to the authorisation, the social care worker must monitor the implementation of these. To facilitate this, the DoLS Administration Team will notify the relevant social care worker of any conditions applied by forwarding the authorisation to them.

People deprived of their liberty are amongst the most vulnerable people in society and it is good practice to ensure that all people subject to a DoLS Standard Authorisation are allocated a named social care worker whilst that standard authorisation is in place to allow monitoring of the placement, the DoLS and any conditions.

8. Representatives

All persons subject to a DoLS Standard Authorisation have a Relevant Person's Representative (RPR) appointed to assist them to operate the DoLS safeguards.

The BIA will seek to recommend a suitable RPR during the best interests' assessment.

Firstly the BIA should assess whether the person has the mental capacity to select their own RPR, if they do, they should be invited to select someone who is eligible.

To be eligible a person will be:

- 18 or over,
- able to keep in touch regularly with the person, ideally on average having fortnightly face to face contact (equivalent with the expectations upon Paid RPRs)
- willing to be appointed
- free of any financial or contractual conflicts of interests, such as providing services or employed by the home or hospital. These conflicts are described in detail in the DoLS code of practice and Schedule A1 of the MCA 2005.

If the person lacks capacity to make the selection but has an LPA or Court Appointed Deputy for Health and Welfare decisions, then the attorney or deputy should be asked to recommend an eligible RPR. If an RPR is recommended then the BIA should determine whether that person is eligible, if they are eligible then that RPR will be recommended to the authoriser to appoint.

If the person or an attorney/deputy does not recommend an eligible RPR then the BIA will try to identify one, usually a family member or a friend who is, or could be in regular contact with the person and is willing to take on the role. In selecting someone to recommend, the BIA should take into account the preferences of the person being assessed, the contact between them and the ability of the proposed RPR to undertake that role in the person's best interests.

The BIA should not recommend someone that the person or LPA/Deputy is not happy to be appointed. The person being recommended must be happy to be appointed and must be advised by the BIA about what the RPR's role is.

When the role is discussed with the RPR they should be told, by the BIA, that they can be supported in their role by a s39d IMCA.

If no unpaid eligible person can be identified to be appointed as a Representative, then the DoLS office will appoint the Paid Representative Service to undertake the role. This is a paid advocate, contracted to IWC, who will respond to referrals to be RPR and will visit the person for one hour's face-to-face contact once a fortnight.

9. Suspending DoLS

If a person subject to a DoLS Standard Authorisation is detained under the Mental Health Act for assessment or treatment of a mental disorder, the Managing Authority should inform the Supervisory Body immediately and request that the DoLS Standard Authorisation be suspended for up to 28 days, as the person is no longer meeting all of the eligibility criteria for DoLS.

If the person's detention under the Mental Health Act ends within the 28 days, the Managing Authority must again inform the Supervisory Body and the DoLS Standard Authorisation can resume. If the person remains detained under the Mental Health Act beyond 28 days, the Standard Authorisation will be ended by the Supervisory Body.

If a person who is subject to a Standard Authorisation moves from one location to another, the effect of the move on the authorisation will depend upon the individual circumstances:

- If the person is subject to a standard authorisation in a care home and moves to hospital for treatment, the original authorisation will remain valid unless a further authorisation is granted relating to the stay in hospital. The latter authorisation will supersede and terminate the former.
- If no authorisation is required in the hospital, the original authorisation remains valid and may be relied upon when the person returns to the home, as long as the six qualifying requirements remain met and the reasons that they are met remain the same as before. If the Managing Authority believes that any qualifying requirement is no longer met or that the reasons they are met have changed, they should request a DoLS Review.
- Similarly if a person subject to a standard authorisation in hospital leaves for a period of time (ie home leave) but is expected to return to the hospital and is not discharged, then the standard authorisation can remain in place unless a subsequent authorisation is granted.
- If the person is subject to a standard authorisation in a care home and moves to hospital for treatment of a mental disorder under the Mental Health Act, the original authorisation will be suspended as described in section 9.
- If a person moves from a care home or a hospital and they are not expected to return, being discharged from the service or their placement ended, then the DoLS authorisation should be ended and the managing authority should contact the DoLS Administration Team to inform them that the person is not intended to return.

10. Ending DoLS early

If during the period of a DoLS Standard Authorisation the person should cease to meet any of the 6 qualifying requirements for DoLS then the Managing Authority should contact the Supervisory Body and inform them of the change in circumstances.

The Supervisory Body will arrange a review if required and if this confirms that the qualifying requirements are no longer all met, the Standard Authorisation will be ended.

11. 'Renewal' of DoLS

When a person is subject to a Standard Authorisation for a fixed duration (set out in the Authorisation document) they will either;

- Cease to meet the DoLS qualifying requirements in that place and in these cases the Authorisation will be ended,

or

- Continue to be deprived of their liberty in that place and require a further period of authorisation. In these cases the Managing Authority should submit a referral for a Standard Authorisation to the DoLS Administration Team one month before the current Standard Authorisation is due to end.

The DoLS Administration Team will contact the Managing Authority 28 days before the Standard Authorisation is due to end to prompt this application.

If the Managing Authority has not submitted an application 14 days before the Authorisation ends, then the DoLS Administration Team will initiate the process for a DoLS Review.

12. Monitoring and Evaluating

The DoLS office will collect data on DoLS activity for the Health & Social Care Information Centre (HSCIC) annual return.

The DoLS office will prepare quarterly reports on DoLS activity for each month for ASC management. The following will be recorded:

- The number of DoLS requests for managing authorities
- The number of reviews undertaken
- The number of authorisations issued
- The number of authorisations refused
- The number of requests withdrawn
- The number of outstanding requests

13 Related Documents

• Corporate Plan 2014-17	http://wightnet.iow.gov.uk/documentlibrary/view/corporate-plan
• Mental Health Act 1983	http://www.legislation.gov.uk/ukpga/1983/20/contents
• Mental Capacity Act 2005	http://www.legislation.gov.uk/ukpga/2005/9/part/1 http://www.legislation.gov.uk/ukpga/2005/9/pdfs/ukpgacop_20050009_en.pdf <u>DoLS Code of Practice</u>
• Care Act 2014	http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted/data.htm
• Human Rights Act 1998	http://www.legislation.gov.uk/ukpga/1998/42/contents
The Coroners (Investigations) Regulations 2013	http://www.legislation.gov.uk/uksi/2013/1629/pdfs/uksi_20131629_en.pdf
• Social Care Institute for Excellence	Deprivation of Liberty Safeguards: putting them into practice (Adults' Services: Report) http://www.scie.org.uk/publications/reports/report66.asp
• IWC Independent Advocacy Policy	Currently in draft form March 2015. Will be filed on iwight.com, Your Council, Documents, Policies and Plan and council intranet under documents April 2015.
• Equality Impact Assessment (EIA)	<u>DoLS EIA</u>
• Officer Decision Record (ODR)	Filed with Council Adult Social Care ICT system
• Data Protection Act 1998	https://www.gov.uk/data-protection/the-data-protection-act
• Data Protection Policy	http://wightnet.iow.gov.uk/documentlibrary/view/dataquality-strategy-and-action-plan
• Equality Policy Statement Practice Guidelines	http://wightnet.iow.gov.uk/documentlibrary/view/equality-policy-statement-practice-guidelines
• SHIP's Safeguarding Adults Multi-Agency Policy, Guidance and Toolkit, May 2015	http://wightnet.iow.gov.uk/documentlibrary/view/safeguarding-adults-multi-agency-policy-guidance-and-toolkit

• Data Protection Policy 2009	http://wightnet.iow.gov.uk/documentlibrary/view/data-protection-policy
• Computer Misuse Act 1990	http://www.legislation.gov.uk/ukpga/1990/18/data.pdf
• Information Security Policy, May 2014	http://wightnet.iow.gov.uk/documentlibrary/view/information-security-policy
• ICT Electronic Communications Policy, May 2014	http://wightnet.iow.gov.uk/documentlibrary/view/ict-electronic-communications-policy
• ICT Software Policy, May 2014	http://wightnet.iow.gov.uk/documentlibrary/view/ict-software-policy
• Access to Information Policy 2008	http://wightnet.iow.gov.uk/documentlibrary/view/access-to-information-policy
• Grievance Procedure, March 2014	http://wightnet.iow.gov.uk/documentlibrary/view/grievance-procedure-incl-school-based-staff

14. Glossary of Terms

• MCA	Mental Capacity Act 2005
• MHA	Mental Health Act 1983
• IWC	Isle of Wight Council
• MHA	Mental Health Assessor
• BIAs	Best Interests Assessors
• LPA	Lasting Power of Attorney
• CQC	Care Quality Commission
• IMCA	Independent Mental Capacity Advocate
• DBS	Disclosure and Barring Service
• OT	Occupational Therapist
• AMHP	Approved Mental Health Professional
• DSM	District Service Manager
• LSM	Local Service Manager
• RPR	Relevant Person's Representative
• ECHR	European Convention on Human Rights
• HSCIC	Health & Social Care Information Centre

15. Action Plan

Requirement / Recommendation	Issue	Action	Lead Officer	Outcome	Start Date	Target Date
<p>The Deprivation of Liberty Safeguards (DoLS) were introduced into the Mental Capacity Act 2005 (MCA) via the Mental Health Act 2007 (MHA).</p> <p>Registered homes and hospitals are 'managing authorities' for DoLS and they have the responsibility for preventing unnecessary deprivations of liberty and recognising when a deprivation of liberty is occurring or is likely to occur. They are also responsible for granting 'urgent authorisations' and referring to the 'statutory body' for a DoLS assessment to grant a 'standard authorisation'. The Supervisory Body is the Isle of Wight Council.</p>	<p>There was no Adult Social Care DoLS Policy which is an important new protection for people who are at risk of being deprived of their liberty in a hospital or a registered care home, who lack capacity to consent to the arrangement and who are not detained under the Mental Health Act 1983.</p> <p>DoLS provides a legal framework in circumstances where deprivation of liberty appears to be unavoidable and aims to prevent breaches of the European Convention on Human Rights.</p>	<p>Develop and maintain a Policy and supporting tools/forms and record keeping simplifying the various Department of Health forms required to administer a DoLS application.</p> <p>The DoLS policy will apply to people in hospitals and care homes aged 18 years and over with a mental disorder who lack capacity to consent to where their treatment and/or care is given and are deprived of their liberty in their own best interests to protect them from harm.</p> <p>Circulate this policy to all relevant managers and relevant members of staff.</p>	Stephen Ward	DoLS Policy is implemented and embedded into Isle of Wight Council Adult Social Care Procedure.	01/04/15	18/06/15

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Arabic

إذا كان لديك صعوبة في فهم هذه الوثيقة، الرجاء الاتصال بنا على هاتف رقم 01983 821000 وسوف نبذل قصارى جهدنا لمساعدتك.

Hindi

यदि आपको इस दस्तावेज़ को समझने में कठिनाई पेश आ रही है तो, कृपया हमारे साथ 01983 821000 पर सम्पर्क करें और हम आपकी सहायता करने का पूरा प्रयास करेंगे।

Punjabi

ਜੇਕਰ ਤੁਹਾਨੂੰ ਇਹ ਦਸਤਾਵੇਜ਼ ਸਮਝਣ ਵਿਚ ਮੁਸ਼ਕਲ ਪੇਸ਼ ਆ ਰਹੀ ਹੈ ਤਾਂ ਕ੍ਰਿਪਾ ਕਰਕੇ ਸਾਡੇ ਨਾਲ 01983 821000 'ਤੇ ਸੰਪਰਕ ਕਰੋ ਅਤੇ ਅਸੀਂ ਤੁਹਾਡੀ ਸਹਾਇਤਾ ਕਰਨ ਦੀ ਪੂਰੀ ਕੋਸ਼ਿਸ਼ ਕਰਾਂਗੇ।

Urdu

اگر آپ کو اس دستاویز کو سمجھنے میں مشکلات کا سامنا ہو تو برائے مہربانی ہم سے اس نمبر پر رابطہ کیجئے 01983 821000 اور ہم آپ کی مدد کرنے کے لیے ہر ممکن کوشش کریں گے۔

Chinese

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Bengali

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Polish

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French

Si vous avez des difficultés à comprendre ce document, veuillez nous appeler au 01983 821000 et nous ferons de notre mieux pour vous aider.

Italian

Per ulteriori chiarimenti su questo documento, Vi preghiamo di contattarci per telefono al numero 01983 821000 dove riceverete la nostra migliore attenzione.

German

Sollte es Ihnen Schwierigkeiten bereiten, dieses Dokument zu verstehen, rufen Sie uns bitte an unter 01983 821000, und wir werden unser Bestes tun, um Ihnen zu helfen.

Hungarian

Ha nehézséget okoz e dokumentum értelmezése, kérjük, forduljon hozzánk a 01983 821000 számon, és minden tőlünk telhetőt megteszünk, hogy segítsünk.

Spanish

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Romanian

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