

Board of Directors (in Public)

Item 2.4

Subject: Deprivation of Liberty Safeguards (DoLS)
Update for Q4 17/18

Date of meeting: 1st May 2018

Prepared by: Terri Meecham – DoLS Administrator

Presented by: Sue Pemberton - Director of Nursing and Quality

Purpose of Report: For Note

BAF Ref	Impact on BAF
1.1, 1.2	No Impact

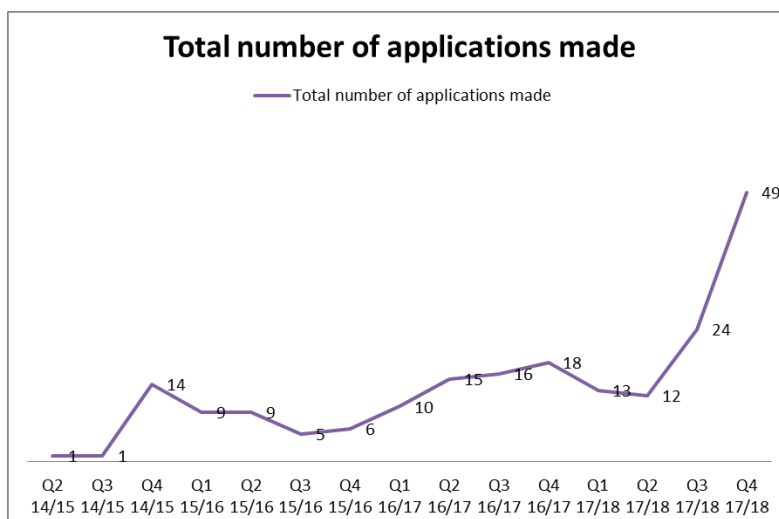
1. Executive Summary

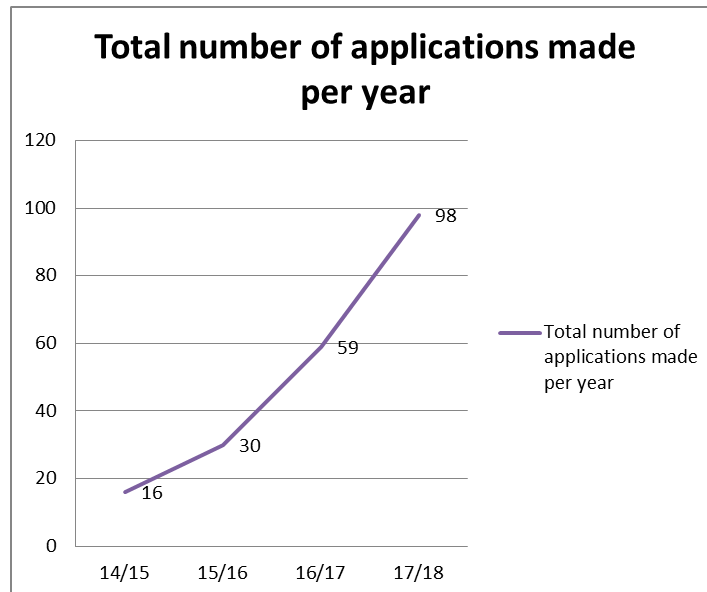
The purpose of this paper is to update the Board of Directors on the number of applications made for quarter 4 - 2017/18 in relation to the Deprivation of Liberty Safeguards (DoLS). For Q4 a total of 49 Deprivation of Liberty Applications have been received by the Safeguarding Team for 12 different local authorities across the catchment area. This is a 40% increase in applications received since the previous quarter.

2. Background

The Deprivation of Liberty Safeguards (DoLS) were introduced in 2009 (as an addendum to the Mental Capacity Act 2005 and a strong link to the Mental Health Act 2007). DoLS aim to prevent the unlawful detention of adults in hospitals and care settings who lack capacity to choose where they live and/or to consent to care and treatment. DoLS are compatible with Article 5 of the European Convention on Human Rights (the right to liberty and security of person).

3. Current Position





MCA Assessments and DoLS Applications – Q4 (2017/18)

For Q4 a total of 49 Deprivation of Liberty Applications have been received by the Safeguarding Team for 12 different local authorities across the catchment area. This is a 40% increase in applications received since the previous quarter. This is due to the introduction of the new delirium policy and also staff awareness of the DoLS process. We also now receive on a weekly basis a report from the EPR team of DoLS forms completed during the previous week. This is to ensure that no applications are missed as not all applications are referred via the EPR referral process.

Of the total 49, all were standard and urgent applications.

- 18 urgent applications were issued and the standards were not required as the patients were discharged or transferred within the 14 day urgent period or their confusion had settled.
- In 31 cases, the applications were reviewed and the patients were assessed by the safeguarding team but the applications were not sent. This was due to a number of reasons, either the patients confusion had settled, the patient met the criteria for a critical care patient and were to be managed under the best interests principle and would be reviewed again once they were ready to be transferred to the ward or the patient passed away. In one instance the form was not sent as the patient was under 18 years old and was classed as a minor and did not meet the DoLS criteria; however the patient was closely monitored throughout their stay by the safeguarding team.

MCA and DoLS Mandatory training is currently at 97% across the trust.

There are no new risks to be highlighted on this report; all applications are reviewed on an individual basis.

4. Recommendations

The Board of Directors are asked to note the numbers of applications made and assessments undertaken.