

Board of Directors (in Public)

Item 2.5

Subject: Deprivation of Liberty Safeguards (DoLS)
Update for Q2 18/19
Date of meeting: 6th November 2018
Prepared by: Terri Meecham – DoLS Administrator
Presented by: Sue Pemberton - Director of Nursing and Quality

BAF Reference	Impact on BAF
1.3	None

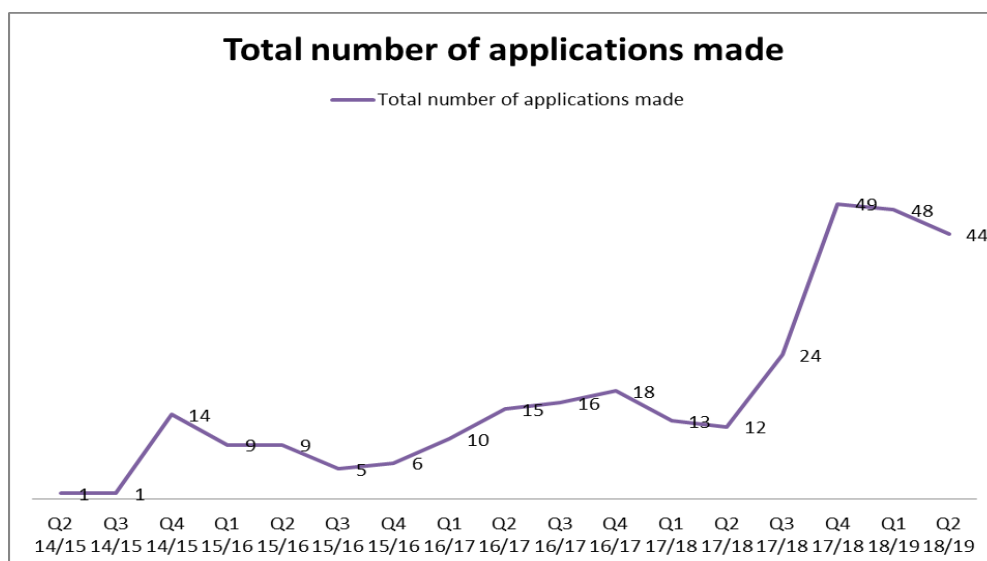
1. Executive Summary

The purpose of this paper is to update the Board of Directors on the number of applications made for quarter 2 - 2018/19 in relation to the Deprivation of Liberty Safeguards (DoLS).

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 – Q2 (2018/19)

For Q2 a total of 44 Deprivation of Liberty Applications have been received by the Safeguarding Team for 14 different local authorities across the catchment area. This is an 8% reduction in applications received since the previous quarter.

Of the total 44, all were standard and urgent applications.

- 4 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 2 cases the urgent applications expired and no decision or approval was given by the Local Authority. One patient passed away and another was transferred to a rehab unit for further treatment. On both occasions an 'Independent Mental Capacity Advocate' (IMCA) was required as the patients had no Next of kin to consult with to make decisions on the patient's behalf. No IMCA's were instructed by the Local authorities as there are long waiting lists despite chasing the service but patients continued to be managed under best interest principles.
- In 38 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.

Mental Capacity Act (MCA) and Deprivation of Liberty's (DoLS) Mandatory training is currently at 93% 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.