

POLICY ON A PAGE

Deprivation of Liberty Safeguards (DoLS)

1 WHY DO WE NEED THIS POLICY?

Where a person's care plan is so restrictive that it amounts to a deprivation of liberty, the DoLS process allows for this situation to be "authorised" so that the deprivation of liberty becomes lawful and is subject to safeguards.

DoLS applies to people:

- 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

Where a 16 or 17 year old is considered to be deprived of their liberty, the application for a DoLS authorisation should be made to the Court of Protection. The policy gives further guidance on provisions for those under 16 years of age.



2 WHAT DO I NEED TO KNOW?

Clinicians need to:

- Undertake a thorough assessment of capacity to determine if the patient has the relevant capacity to consent to continued admission.
- Review the care plan to identify if the arrangements amount to a deprivation of the patient's liberty.
- Ensure family/carer views are sought and recorded.
- Pay careful attention to any indication that the patient is resisting care and treatment for their mental disorder, as this would indicate use of the Mental Health Act is required.



4 Understanding the Process

Completion of a DoLS Form 1 will (a) request assessment for a standard authorization assessment from the local authority and (b) put in place an Urgent authorization that lasts for up to 7 days. The DoLS Form 1 is available on the DoLS page on the intranet.

Ward teams need to ensure they are clear about the current legal status of the patient so that they can

- 1) ensure the patient is advised of their legal status and rights.
- 2) accurately record in the Carenotes record whether the patient is subject to a Deprivation of Liberty authorisation.



3 Quality Standards

Clinicians are responsible for reviewing ongoing use of deprivation of liberty safeguards to ensure they are the most appropriate and least restrictive option.

Ward teams are responsible for advising the DoLS Co-ordinator when a patient is discharged, transferred out, detained under the MHA etc.

The DoLS Co-ordinator is responsible for maintaining communication with the local authority DoLS teams, and to undertake regular weekly checks to identify those patients awaiting a DoLS assessment.

The MH Law Practice Development Manager will undertake monthly checks of clinical records of patients awaiting a DoLS assessment to (a) ensure the criteria for use of DoLS still applies, (b) provide the relevant local authority DoLS teams with a list of patients awaiting assessment and (c) update the Executive Team.

Monitoring the use of DoLS including exception reporting will be provided by the Mental Health Law Services Team to the Mental Health Act Committee.



5 CONTACT

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