

Deprivation of Liberty Safeguards

a guide for relevant person's representatives

This fact sheet is designed to help you understand and fulfill your role as a relevant person's representative (RPR). As an RPR, you have been appointed to support a person who is deprived of their liberty under the Mental Capacity Act 2005 Deprivation of Liberty Safeguards (MCA DOLS).

When a person lacks the mental capacity to make decisions about the care or treatment they need, and may be at risk if that care is not provided, it is sometimes in their best interests to deprive them of their liberty. The aim of this is to prevent them from coming to harm. The MCA DOLS exist to ensure that no one is deprived of their liberty without good reason, and that if someone needs to be deprived of their liberty in these circumstances, that person still has specific rights.

One of these rights is that every person deprived of their liberty under the terms of the MCA DOLS must have an RPR like you to protect their interests throughout the process.

This fact sheet contains all the information you need to understand your role and responsibilities as a person's RPR. It will enable you to represent the interests of the person being deprived of liberty in the best possible way.

Your role as the RPR is:

- to maintain contact with the person being deprived of their liberty
- to represent and support that person in all matters relating to the MCA

DOLS, including, if appropriate, requesting a review, using an organisation's complaints procedure on the person's behalf or making an application to the Court of Protection

- to provide support that is independent of the relevant person's commissioners and service providers

Key terms used in the MCA DOLS legislation include

- **Supervisory body:** this refers to Local Health Boards and Local Authorities
- **Managing authority:** this is the person or body with management responsibility for the hospital or care home in which a person is being, or may be, deprived of liberty
- **Standard authorisation :** this permits lawful deprivation of liberty and is issued by a supervisory body
- **Urgent authorisation:** this permits lawful deprivation of liberty and is issued by a managing authority
- **Relevant person :** this is the person who needs to be deprived of liberty
- **Relevant person's representative:** this is the person who represents the relevant person
- **best interests assessor :** this is the person who assesses whether or not deprivation of liberty is in the person's best interests, is necessary to prevent harm to the person and is a proportionate response to the likelihood and seriousness of that harm

- **advance decision:** this is a decision to refuse specified treatment made in advance by a person who has capacity to do so. The decision will then apply at a future time when that person lacks capacity to consent to, or refuse, the specified treatment. Specific rules apply to advance decisions to refuse life sustaining treatment
- **Donee of lasting power of attorney:** this is the person appointed under a lasting power of attorney who has the legal right to make decisions within the scope of their authority on behalf of the person (the donor) who made the lasting power of attorney
- **Independent Mental Capacity Advocate (IMCA):** this is a person who provides support and representation for a person who lacks capacity to make specific decisions in certain defined circumstances. The IMCA was established by the Mental Capacity Act and is not the same as an ordinary advocacy service.

Your responsibilities as the RPR

Who can be a RPR?

In cases where no friend or family member is willing or eligible, a paid representative will be appointed.

To be eligible for the role of the relevant person's representative, you must be:

- 18 years of age or over
- Able to keep in contact with the relevant person
- Willing to be appointed. You must not be:
 - Financially interested in the hospital or care home where the relevant person is being deprived of their liberty, or be a relative of a person who has a financial interest
 - Employed by, or providing services to, the care home in which the relevant person is residing
 - Employed by the hospital in which the relevant person is residing in a role that is, or could be, related to their treatment or care
 - Employed to work in the relevant person's supervisory body in a role that is, or could be, related to the relevant person's case.

If you think that you may not be eligible to act as the RPR for any reason, you must contact the supervisory body immediately.

Acting in the best interests of the person you represent

According to the 'best interests' principle of the Mental Capacity Act 2005 (MCA), anything done to, or on behalf of, someone who lacks the capacity to make their own decisions must be in their best interests. As the RPR, you will need to make decisions and act on behalf of a person who lacks capacity, so you must follow this principle.

The MCA gives a non-exhaustive list of what you need to think about when working out what is in a person's best interests, for instance:

- As far as possible, the person must be involved in any decision made on their behalf
- If there is a chance that the person may regain capacity and be able to make the decision, could the decision be delayed to allow this?
- The wishes and feelings of the person, including any views they have expressed in the past, should be used to understand what their wishes and feelings might be in this situation. This might include things they have written down or said to other people, or examples of how they have behaved in similar circumstances in the past

- Any beliefs or values a person holds may influence their decision-making process. These might include religious beliefs, cultural background or moral views
- If the decision is about life-sustaining treatment, the decision must not be motivated by a desire to bring about the person's death
- If there any other factors that the person would be likely to consider if they were able to do so, these should be considered too.

In your role as the RPR, you should consult with carers and anyone who has an interest in the relevant person's welfare to ensure that all decisions are made in their best interests. People providing care for the relevant person are obliged to consult with you, as well as with any donee of lasting power of attorney (attorney) or deputy appointed for the person by the Court of Protection (deputy) involved in the case, before key decisions are made.

Maintaining regular contact

RPRs must have regular, face-to-face contact with the person being deprived of their liberty, to ensure that their interests are being safeguarded. This means that the hospital or care home where the person is (the managing authority) should allow you to visit them at reasonable times. As the RPR, your name should be recorded in the person's health and social care records.

If you have insufficient contact with the relevant person for whatever reason, they may not have full opportunities to have their case reviewed or to appeal against their deprivation of liberty to the Court of Protection.

Understanding the MCA DOLS: an overview for RPRs

What are the MCA DOLS?

The MCA DOLS provide protection for vulnerable people who are accommodated in hospitals or care homes in circumstances that amount to a deprivation of their liberty, and who lack the capacity to consent to the care or treatment they need. In such cases, MCA DOLS provide a lawful way to deprive someone of their liberty, provided that this is in their own best interests or is necessary to keep them from harm.

Who can be lawfully deprived of their liberty under the MCA DOLS?

The MCA DOLS state that deprivation of liberty should be avoided whenever possible, and should only be authorised in cases where it is in the relevant person's best interests and is the only way to keep them safe. It should be for as short a time as possible and only for a particular treatment plan or course of action.

In order to be deprived of their liberty, a person must be staying in a hospital or care home, and must meet six qualifying requirements:

- the age requirement
- the no refusals requirement
- the mental capacity requirement
- the mental health requirement
- the eligibility requirement
- the best interests requirement.

Local health boards (LHBs) and local authorities are known under the MCA as supervisory bodies, and they have a statutory duty for arranging assessments, when requested by a care home or hospital, to see if these requirements are met. If they are, they must authorise a deprivation of liberty and appoint an RPR.

As the RPR, you should:

- be sure that the person you represent is eligible to be deprived of liberty under the terms of the MCA DOLS. If you have any doubt, you can request a review of their MCA DOLS authorisation at any time
- ensure that the MCA DOLS are never used as a form of punishment for the relevant person, or for the convenience of professionals, carers or anyone else

How does the assessment process work?

As the RPR of someone who is being, or will be, deprived of their liberty, you should have a good understanding of the assessment process. If you think the person you represent does not meet (or has ceased to meet) any one of the assessment criteria, you should ask for their MCA DOLS assessment to be reviewed.

Before issuing an MCA DOLS authorisation, the supervisory body must conduct the six assessments listed below:

- age assessment: to assess whether the person being deprived of liberty is aged 18 or over
- no refusals assessment: to ensure that the authorisation being requested does not conflict with a valid decision already made by an attorney or deputy, and is not for the purpose of giving any treatment that would conflict with a valid and applicable advance decision made by the relevant person
- mental capacity assessment: to assess whether the person being deprived of liberty lacks capacity to decide whether to be admitted to, or remain in, the hospital or care home in which they are being, or will be, deprived of liberty
- mental health assessment: to assess whether the person being deprived of liberty is suffering from a mental disorder within the meaning of the Mental Health Act 1983, but disregarding any exclusion for people with learning disabilities
- best interests assessment: to establish whether there is a deprivation of liberty and, if there is, whether it is:
 - in the best interests of the person to be subject to the authorisation
 - necessary in order to prevent them coming to harm
 - a proportionate response to the likelihood of them suffering harm and the seriousness of that harm
- eligibility assessment: to assess whether the person is eligible to be deprived of liberty under the MCA DOLS. Broadly, a person is eligible unless they:
 - are detained under the Mental Health Act 1983
 - are subject to a requirement under the Mental Health Act 1983 that conflicts with the authorisation being requested (such as a guardianship order requiring them to live somewhere else)
 - object to being in hospital for the purpose of treatment of a mental disorder, or to being given some or all of the treatment in question, and they meet the criteria for detention under the Mental Health Act 1983

What happens once an MCA DOLS authorisation is granted?

If the relevant person complies with all six assessment criteria, an MCA DOLS authorisation will be granted and, as the RPR, you will be informed in writing. Supervisory bodies will set the duration for the authorisation, which should be as short as possible (and no longer than 12 months, or the time period suggested by the best interests assessor). The law requires supervisory bodies to issue the standard deprivation of liberty authorisation in writing, including details such as the purpose of the deprivation of liberty and the period for which it is to be in place.

Standard and urgent authorisations

To properly defend the rights of the relevant person, RPRs must understand the terms of their MCA DOLS authorisation. There are two types of authorisation: urgent and standard.

Urgent authorisations

Urgent authorisations are valid for a maximum of seven calendar days, and can be given by managing authorities (hospitals or care homes). They should only be given if it is clear that there is a need to deprive someone of their liberty immediately in their own best interests in order to protect them from harm.

When giving an urgent authorisation, managing authorities must, if they have not already done so, apply simultaneously to their supervisory body for a standard authorisation to be issued before the urgent authorisation expires. Where an urgent authorisation has been given, the assessments must be carried out within five calendar days from the date that the assessors are instructed. If there are exceptional reasons for doing so, a supervisory body may extend the duration of an urgent authorisation by up to seven calendar days.

Standard authorisations

Standard authorisations should be the most common type of authorisation. An application for this kind of authorisation should be made before a person is deprived of liberty and only when it is clear that less restrictive measures will not meet the person's needs.

Once issued, a standard authorisation can last for a maximum of 12 months, but every effort should be made to ensure that it is in place for as short a time as possible.

When the supervisory body receives an application for a standard deprivation of liberty authorisation from a hospital or care home, and no urgent authorisation has been given, assessors have 21 calendar days in which to complete the assessments.

If a managing authority believes that deprivation of liberty needs to continue beyond the initial authorisation period, it should apply for a new authorisation. A new set of assessments will then indicate whether continued deprivation of liberty remains in the person's best interests.

Every effort should be made to prevent deprivation of liberty from occurring. If deprivation of liberty cannot be avoided, it should be for no longer than is necessary.

Can an authorisation be challenged?

You can challenge authorisations on behalf of the person you represent in the Court of Protection, although you should consider whether it is possible to resolve any concerns

informally with the managing authority and/or supervisory body first. All unpaid RPRs and people being deprived of their liberty have a statutory right to be supported by a specialist Independent Mental Capacity Advocate (IMCA) when making an application to the Court of Protection (see section 4, 'Your rights as an RPR').

When should authorisations be reviewed?

Supervisory bodies are legally required to carry out a review if you request one in your capacity as RPR. Supervisory bodies are also legally required to review an authorisation if:

- the person no longer meets the age, no refusals, mental capacity, mental health or best interests requirements
- the person no longer meets the eligibility requirement because they object to receiving mental health treatment in hospital and they meet the criteria for an application for admission under section 2 or 3 of the Mental Health Act 1983
- there has been a change in the person's situation and, because of that change, it would be appropriate to amend or delete an existing condition of the authorisation or add a new condition
- the reasons why the person now meets the qualifying requirements are different from the reasons recorded at the time the authorisation was given.

If you request a review, the supervisory body must assess which, if any, of the qualifying requirements should be reviewed and record its decision. The supervisory body should then commission the relevant assessments and inform you as the RPR.

If the person no longer meets the qualifying requirements for being deprived of their liberty, the authorisation must be terminated. If the assessments illustrate that deprivation of liberty is still necessary, the supervisory body must consider whether the conditions attached to the authorisation should be amended. In either case, you should be informed in writing.

What happens when an authorisation comes to an end?

If an authorisation is terminated for any reason, the supervisory body should inform you in writing. The person should cease to be deprived of their liberty immediately. This also applies if an authorisation is suspended, which is possible for a maximum of 28 calendar days.

Your rights as an RPR

Support from managing authorities

Managing authorities and supervisory bodies should keep you informed about sources of support and information available to help you in your role, including how to access the support of an Independent Mental Capacity Advocate (IMCA).

As soon as possible after a standard deprivation of liberty authorisation is given, the managing authority must make sure that both you and the relevant person understand:

- the effect of the authorisation
- the formal and informal complaints procedures that are available to both of you
- your right to request a review
- your right to make an application to the Court of Protection to seek variation or termination of the authorisation

- your right, where the relevant person does not have a paid 'professional' representative, to request the support of an IMCA.

Legal representation: the right to an IMCA

Both the person who is deprived of liberty under a standard authorisation and you as their RPR have a statutory right of access to an IMCA. It is the responsibility of the supervisory body to instruct an IMCA if you, or the person deprived of their liberty, requests one.

The IMCA will give you extra support if you need it, and will help you to make the best possible use of the review process and the Court of Protection. You only have access to an IMCA if you are an unpaid RPR.

The IMCA can also help you and the relevant person understand:

- why the person meets the criteria for authorisation
- how long the authorisation will last
- any conditions to which the authorisation is subject.

The IMCA will have the right to make submissions to the supervisory body to provide relevant information for assessors. In addition, they can request reviews of qualifying requirements.

As the RPR, you can request support from an IMCA more than once during the period of the authorisation. For example, you might choose to ask for help at the start of the authorisation and then again later in order to request a review.

Finishing your work as an RPR

Your work as an RPR will usually finish when the relevant person's authorisation comes to an end. However, there may be special circumstances in which your time as an RPR may end prematurely. For example, this could happen if you decide that you no longer wish to continue in the role, or if the supervisory body is concerned that you are no longer maintaining regular contact with the relevant person or acting in their best interests.

In every case where an RPR's role is terminated, the supervisory body should inform the RPR of the date when their role will come to an end and clearly state the reasons for their decision.

Your appointment as an RPR will be terminated if:

- the standard authorisation comes to an end and a new authorisation is not granted
- the relevant person objects to you continuing in your role as the RPR and selects a different person to be their representative (providing that they have the capacity required to make this decision)
- an attorney or deputy objects to you continuing in the role of RPR (if they have the authority to do so)
- the supervisory body believes that you are no longer willing or eligible to continue in the role of RPR
- the supervisory body becomes aware that you are not keeping in touch with the relevant person or that you are not acting in their best interests
- you die while the MCA DOLS authorisation is still in place.

If the supervisory body believes that you are not keeping in touch with the relevant person, no longer acting in the person's best interests or no longer eligible to be an RPR, it should contact you to clarify the position before deciding whether to terminate your appointment.

If you are no longer eligible to be a person's RPR, the supervisory body may seek your advice on who would be an appropriate replacement.

What happens when there is no RPR available?

A person who is being deprived of their liberty will be in a particularly vulnerable position during any delays in the appointment of an RPR since there will be nobody to represent their interests or to apply for a review on their behalf. If there is nobody who can support and represent the person (other than someone who is engaged in providing care or treatment for the person in a professional capacity or for remuneration), the managing authority must notify the supervisory body, who must instruct an Independent Mental Capacity Advocate (IMCA) to represent the person until a new representative is appointed.

The role of an IMCA instructed in these circumstances is essentially the same as that of an RPR. The IMCA's appointment ends when the new RPR is appointed.

Who are our local supervisory bodies?

Our local supervisory bodies are;

- Rhondda Cynon Taff County Borough Council
- Merthyr Tydfil County Borough Council
- Rhondda Cynon Taff Local Health Board
- Merthyr Tydfil Local Health Board

Contact details

If you wish to contact the supervisory body for the relevant person you represent, your first point of contact is;

DoLS Co-ordinator, RCT Community Services Division, Ty Elai Council Offices, Dinas Isaf East, Williamstown, Tonypany, CF40 1NY
Telephone: **01443 425410**

**This information can be made available in other formats
(large print, Braille and disk in English, Welsh and other languages)**

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