

## The Position of Conwy County Borough Council and Deprivation of Liberty Safeguards (DoLS) during the Covid-19 period.

### DOLS assessments

There is now a requirement for residents returning to their care home from hospital to be isolated in their room for a period of 7 days.

If the individual has capacity, then they will be able to consent to this.

Where the individual lacks capacity, there are issues such as first of all – the availability of a Best Interest Assessor (BIA), and the availability of section 12.2 Doctor's. Potentially, exposing the BIA, resident and Doctor to risk of infection by undertaking a DOLS assessment.

The advice of Conwy Council as a Supervisory Body is:

- The aim is to protect the individual's rights under Article 5 (Human Rights Act 1998) as much as possible if there isn't a Standard Authorisation in place.
- Use **Urgent Authorisations (UA)** in each case as a starting point and renew, so that there is at least some assessment / justification for the Deprivation of Liberty (DOL). Urgent Authorisations are only meant to be renewed once under legislation, however it is better to have a UA in place than nothing at all at times like this.
- Prioritise cases to assess e.g. if an individual attempts to leave / wander and stronger measures to detain are needed to isolate them, these cases will need to be considered a priority for a Standard Authorisation (SA), if a BIA is available.
- If a BIA is available, even with the most urgent/serious cases, there will be a need to assess the risk of infection to the resident and to the BIA. There may be a decision that the risk of infection outweighs the benefits of a full assessment for the time being, but at least the decision has been considered and recorded if any issues arose in future. The majority of Care Homes in Conwy are currently in 'lockdown' following government guidance making visits virtually impossible.
- Every DOL care plan, whatever the circumstances in terms of completing a Standard Authorisation, should be shared with a member of the family or Independent Relevant Person Representative (RPR), so that they are aware of the measures in place, and why, and questions can be raised or issues challenged if needed – this is one way of working towards ensuring that the individual's rights are protected in the absence of a full assessment.
- In the absence of an RPR, there should be an attempt to appoint an Independent Mental Capacity Advocate (IMCA) under s39c or 39D, (Mental Capacity Act 2005) and make that person aware of the measures in place as with the RPR above.
- If the RPR /IMCA cannot visit the resident, sufficient information about the care plan / background will need to be shared enabling professional colleagues to consider the matter as a starting point. Also whether it is appropriate to hold a meeting with the resident via phone / skype etc. It may not always be appropriate, but at least it has been considered and recorded.