

Mental Capacity Act Deprivation of Liberty safeguards (DoLS) Update

Summary

Members are asked to consider the updates against the implementation of the recommendations set out in the Action Plan following the review of the Mental Capacity Act Deprivation of Liberty Safeguards (DoLS).

Detail

1. Members agreed the Action Plan in January 2017 following the Scrutiny Review of the DoLS. The Action Plan included the submission of a full update report to Adult Services and Health Select Committee after six months.
2. This update report details progress against the Action Plan.
3. Members should consider the update report.

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DoLS Update for Adult Social Care and Health Committee

1. Resource allocation for the DoLS function was approved within the Medium Term Financial Plan in February 2017, following an update to Cabinet in January 2017. A permanent DoLS Team consisting of dedicated DoLS Best Interests Assessors, and a DoLS administration team has been established, effective from 1st April 2017.

2. Update on the continued review of processes to ensure DoLS processes are as lean as possible.

2.1. Implementation of the recommendations from the DoLS Lean Review

2.1.1. A Lean Review of the overall DoLS Function was completed in August/September 2016. It was identified that the improvement work completed to date had addressed a number of areas and resulted in the processes being as efficient as possible. However, some key actions were identified to support further efficiencies in reducing direct costs. Progress against these actions is noted below:

i. Increase the length of time that an equivalent DoLS Mental Health Assessment can be used

The period of time that the DoLS Mental Health Assessment can be used by the DoLS Best Interest Assessor in the further standard authorisation process has been increased from three to 12 months. This change was implemented in December 2016. Between January and April 2017, 59% (216/366) of authorisations used an equivalent Mental Health Assessment completed within the previous 12 months. In comparison, this figure was 21% (56/270) for the period January-April 2016.

ii. Increase the number of DoLS Best Interests Assessors in Stockton Borough Council

Stockton Borough Council support eight staff members to complete the Best Interests Assessor training annually. There are currently 25 staff members on the BIA rota (who are each allocated one assessment every four weeks), two whole time equivalent staff completing dedicated BIA work, and a further two BIAs completing further standard authorisations (“renewals”).

Four staff members are currently undertaking the BIA training, with results expected in June 2017. A further three staff members have been accepted onto the training cohort commencing in October 2017.

The starting pay grade for qualified Social Workers is Grade J. The Social Worker progression framework for the Council now requires that all qualified Social Workers must complete the BIA qualification in order to progress to Grade L. This will support an increase in capacity and retention of BIAs in the workforce. Work is underway to implement changes to the job description so that it will be an essential criterion for staff members to become a BIA within 12 months of appointment to the role where criteria for commencing training are met. Staff establishment reports have been reviewed, and priorities for completing the BIA training have been identified.

- iii. Increase the number of DoLS Signatories

An additional Service Manager (with the Wellbeing Team) will complete DoLS Signatory training in May 2017, which will increase the total number of Signatories to seven. Work to further increase the number of DoLS Signatories within Stockton Borough Council will be dependent on completion of the work to increase the number of DoLS Best Interests Assessors.
- 2.2. The report to Cabinet in December 2016 acknowledged the significant cost associated with the commissioning of individual DoLS Mental Capacity, Mental Health and Eligibility assessments, which must be completed by a Section 12 (of the Mental Health Act) approved doctor. Initial discussions were held with Tees Esk & Wear Valleys NHS Foundation Trust (TEWV NHS FT) to consider the options for the commissioning of Section 12 doctors for the completion of these assessments. A direct employment arrangement was identified as a potential option. Based on current levels of activity, this was identified as potentially being more cost-effective than the current arrangements, but the significant risks associated with attracting professionals to apply for the posts, and to ensure continuity of service, would need to be explored. Further work is being undertaken with Commissioning colleagues to consider the options available to commission the Section 12 doctor contribution.
- 2.3. Consideration will be given to the potential to introduce technology to reduce face-to-face contacts and/or enhance the assessment process. This may include the use of Skype/ Face Time and electronic Tablets by DoLS Best Interests and Mental Health Assessors.
3. Update on DoLS Improvement Work
 - 3.1. As detailed in previous reports to the Committee, focused improvement work was undertaken in 2016 in partnership with the North of Tees Dementia Collaborative. This work was led by Certified Leads in the North East Transformation System (NETS) Quality Improvement System (QIS). Improvement events were held to look in detail at the DoLS Administration process and the Best Interests Assessment process and targets were re-measured at 30, 60, 90 days and 12 months after the implementation of the changes. A mapping and planning session was also held to develop a new process for care-management reviews of people subject to an authorisation of DoL.
 - 3.2. DoLS Administration Process
 - 3.2.1. The targets were re-measured in March 2017, 12-months after the implementation of the changes. Improvements were evidenced against all baseline measures. However, there were some areas (forms from managing authorities containing errors and missed opportunities for obtaining a Relevant Person's Representative Signature) which saw a deterioration against the 90-day measurement. There has therefore been a subsequent focus on these areas, and measurements will be taken again at the 15-month point.
 - 3.2.2. In summary, the following improvements have been evidenced:
 - A reduction in processing time of DoLS applications to the Signatory stage from 54 minutes to 27.5 minutes.
 - A reduction in the number of unsigned authorisations from 8% to 0.5%.

- The number of managing authorities submitting applications containing errors reduced from 61% to 34%, and the total number of applications containing errors reduced from 34% to 12%.
- Efficiency gains for the DoLS Team (averaging just under 18 minutes per authorisation) were evidenced as a result of the new process for obtaining RPR signatures.

3.3. DoLS Best Interests Assessment Process

3.3.1 Data collection is underway for completion of the 12-month Target Progress Report. Measurements taken at 90-days post-implementation showed improvement against all but one of the metrics (the percentage of people who received information during the DoLS process who said they were not given information on how to challenge an authorisation). There has therefore been a focus on providing information to families, friends and unpaid carers throughout the DoLS process.

3.3.2. The following improvements have been evidenced as a result of this improvement work:

- A 49% reduction in the time taken to process a BIA assessment (from almost 11 hours to 6 and $\frac{3}{4}$ hours) and an efficiency gain of approximately 4 hours for each assessment completed.
- A reduction in the number of assessments submitted after the deadline (from 50% to 21%).
- A reduction in the length of time between the completion of assessments by each assessor (from an average of 9.5 days to 2.3 days).
- Fewer people reporting that they had not been informed of the DoLS prior to their use.
- A reduction in the number of Best Interests assessments containing errors (from 14% to 5%) and therefore a reduction in the number of assessments requiring re-submission.

3.4. DoLS Care Management Process

3.4.1. A new process for completing care-management reviews for clients with a DoL authorisation in place, was implemented in June 2016. This has resulted in a more streamlined process, which reduces the number of reviews for each client, and co-ordinates the DoLS Care-Management review with the client's annual review. As a result of the new process the need for dedicated resource for completion of DoLS Care-Management reviews was removed. A standard process has also been implemented for arranging these reviews and documenting this information on Care Director. A DoLS monitoring form has also been introduced for completion by managing authorities.

4. Further Improvement Work.

4.1 A Project Support Officer in the DoLS Administration Team completed the QIS for Leaders programme via the North of Tees Dementia Collaborative, in December 2016. This consisted of completing a small-scale improvement project, and focussed on the notification of DoLS authorisation decisions to care homes. A new process was implemented so that the relevant information is now sent electronically to the care homes, rather than being posted. This has resulted in:

- a reduction in processing time from 34 minutes to 7 minutes for each authorisation decision notification
- a reduction in stationery and postage costs from approximately £840.50 to approximately £634 per month
- reduced batching of authorisation decision letters (for Relevant Person's Representatives and interested people).

4.2. The DoLS Administration Team adopts the principles of continuous improvement and processes are reviewed and refined on an ongoing basis. Recent work has included:

- Implementation of a new process for progressing section 21a challenges (of the authorisation of DoL) to the Court of Protection.
- Updates to the DoLS database to collate data for the mandatory annual DoLS return to NHS Digital.
- Updates to the DoLS database to create an automated tool to identify deaths, thereby reducing the time spent searching through all records.
- Updates to DoLS monitoring forms and the process for following up outstanding information.
- Development of standard process descriptions across the DoLS process.
- Revision of the DoLS Family and Friends questionnaire.
- Effective from April 2017, all documents are now scanned and stored electronically, rather than filed (coinciding with DoLS Signatories using digital signatures on documents).
- Audit and housekeeping of electronic files to ensure that only required information is to hand.