

Information Brief

Date: 15 March 2011

Coverage: Wales

Theme: DoLS

Deprivation of Liberty Safeguards (DoLS)

The information brief on Deprivation of Liberty Safeguards (DoLS) produced by the Welsh Assembly Government CSSIW and HIW was released on 15 March 2011. Information on DoLS includes data for Wales for the period 1 April 2009 to 31 March 2010.

Summary

Requests for DoLS authorisations

Table 1: Requests for authorisation by type of referral

	Request for standard authorisation		Request for standard authorisation, where an urgent authorisation is already in place		All requests	
	Number	Per cent	Number	Per cent	Number	Per cent
Local Authority	163	40	249	60	412	75
Health Board	51	38	84	62	135	25
Total	214	39	333	61	547	100

- In total, there were 547 requests for DoLS authorisations from managing authorities – the 547 requests relate to 448 people.
- Of the 547 requests, 412 or 75 per cent were from social care and 135 or 25 per cent were from health.
- Requests for standard authorisation where an urgent authorisation is already in place accounted for 333 or 61 per cent of the total requests. There was no deprivation in place for the remaining 214 or 39 per cent.
- For social care settings, there were fluctuations in the numbers of referrals during the year. The largest proportion of requests occurred during April 2009 and referrals increased again towards the end of the year.
- In health settings, referrals were fairly evenly spread throughout the year.

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Next Update: March 2012 (provisional)

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Authorisations granted and not granted

Table 2: Number of requests for authorisation granted and not granted

	Granted		Not granted	
	Number	Per cent	Number	Per cent
Local Authority	177	44	229	56
Health Board	77	57	58	43
Total	254	47	287	53

Due to missing data, totals do not reflect total number of requests

- 254 or 47 per cent of referrals for DoLS authorisation were granted
- 287 or 53 per cent of referrals for DoLS authorisation were not granted.
- Of these, 229 or 80 per cent were in social care and 58 or 20 per cent were in health.
- In total, 61 per cent of authorisations ran between 29 days and 6 months.
- 72 per cent of authorisations that completed during the year ran for the full period authorised by the supervisory body.

Time between requests and decisions

Table 3: Time between request and decision

Time between request and decision	Standard authorisation		Standard following urgent authorisation already in place		All requests	
	Number	Per cent	Number	Per cent	Number	Per cent
1-7 days	75	45	225	75	300	65
8-14 days	35	21	50	17	85	18
15-28 days	45	28	20	7	70	15
Over 28 days	10	6	*	*	10	2
Total	165	100	300	100	465	100

Due to missing data, totals do not reflect total number of requests

Figures have been rounded

- The majority of decisions (65 per cent) were made within seven days whether a request came from a social care or health setting.
- Where the request for a standard authorisation is made where an urgent authorisation is already in place, the legislation requires this to be completed within seven days, or in prescribed circumstances where an extension is granted, fourteen days. This was met in most cases.
- Nearly all requests for time extensions for assessment for standard following urgent authorisations were granted.

Characteristics of individuals involved

- 61 per cent of requests concerned females.
- 99 per cent of requests concerned white people.
- 73 per cent of requests concerned people who were over 65 years.
- 2 per cent of requests came from a third party.
- In 65 per cent of requests where the individual had a relevant person's representative, the relevant person's representative was a carer, relative or friend.
- The relevant person's representative was paid in 35 per cent of cases. The majority of these relevant person's representatives were professionals rather than a family member.

Location of the relevant person

- For 428 requests, the relevant person was located in the same area as the Local Authority or Health Board supervisory body dealing with the case.
- Of the 361 social care cases where this information was provided, 52 or 14 per cent of the relevant persons were in care homes in Wales outside the Local Authority in which they were normally resident. Six were in care homes in England.
- Of the 135 health cases where this information was recorded, fewer than five of the relevant persons were in hospital placements in England which had been commissioned by the reporting Health Board.

Rate of DoLS authorisations per 100,000 population

Table 4: Proportion of authorisations per 100,000 population

Local Authority	Population 18+ (thousands)	Number of authorisations (a)	Proportion per 100,000 population
Carmarthenshire	143	35	24.5
Rhondda Cynon Taf	184	35	19.0
Merthyr Tydfil	43	10	23.3
Blaenau Gwent	54	10	18.5
Torfaen	71	5	7.0
Denbighshire	77	5	6.5
Powys	105	10	9.5
Swansea	186	15	8.1
Flintshire	118	10	8.5
Newport	108	5	4.6
Pembrokeshire	92	5	5.4
The Vale of Glamorgan	97	5	5.2
Neath Port Talbot	109	5	4.6
Cardiff	268	10	3.7
Wrexham	105	*	*
Ceredigion	63	*	*
Caerphilly	134	*	*
Monmouthshire	69	*	*
Conwy	89	*	*
Bridgend	105	*	*
Gwynedd	95	0	0.0
Isle of Anglesey	55	0	0.0
All Local Authorities	2,370	175	7.4
Health Board			
Cardiff and Vale	365	30	8.2
Cwm Taf	227	15	6.6
Aneurin Bevan	436	15	3.4
Betsi Cadwaladr	538	10	1.9
Abertawe Bro Morgannwg	400	5	1.3
Hywel Dda	298	*	*
Powys Teaching	105	*	*
All Health Boards	2,370	75	3.2

(a) Figures rounded

Summary of key terms

Deprivation of liberty	Deprivation of liberty is a term used in the European Convention on Human Rights about circumstances when a person's freedom is taken away. Its meaning in practice is being defined through case law.
Deprivation of Liberty Safeguards (DoLS)	The framework of safeguards under the Mental Capacity Act 2005 for people who need to be deprived of their liberty in a hospital or care home in their best interests for care or treatment and who lack the capacity to consent to the arrangements made for their care or treatment.
Health Board (HB)	There are 7 Health Boards in Wales. Health Boards fulfil the supervisory body function for health care services and work alongside their respective local authorities in planning long-term strategies for dealing with issues of health and well-being.
Local Authority (LA)	There are 22 Local Authorities in Wales. In the deprivation of liberties context, the local council responsible for social services in any particular area of the country. Social services fulfil the supervisory body function for social care services.
Managing authority	The person or body with management responsibility for the hospital or care home in which a person is, or may become, deprived of their liberty. They are accountable for the direct care given in that setting.
Referral	Request for deprivation of liberty of a relevant person.
Relevant person	A person who is, or may become, deprived of their liberty in a hospital or care home.
Relevant person's representative	A person, independent of the relevant hospital or care home, appointed to maintain contact with the relevant person, and to represent and support the relevant person in all matters relating to the operation of the deprivation of liberty safeguards.
Standard authorisation	An authorisation given by a supervisory body, after completion of the statutory assessment process, giving lawful authority to deprive a relevant person of their liberty in the relevant hospital or care home.
Supervisory body	A local authority social services or a local health board that is responsible for considering a deprivation of liberty request received from a managing authority, commissioning the statutory assessments and, where all the assessments agree, authorising deprivation of liberty. They must also respond to concerns from third parties, who believe that a person is being deprived of their liberty without authorisation.
Third party request	If anyone (in addition to the relevant person themselves) is concerned a person is being deprived of their liberty without authorisation they should draw this to the attention of the managing authority. This term applies to anyone other than the relevant person themselves. The Code of Practice sets out guidance for addressing matters with the managing authority and if matters are not quickly resolved, with the relevant supervisory body.
Urgent authorisation	An authorisation given by a managing authority for a maximum of seven days, which subsequently may be extended by a maximum of a further seven days by a supervisory body, that gives the managing authority lawful authority to deprive a person of their liberty in a hospital or care home while the standard deprivation of liberty authorisation process is undertaken.

Notes

1. Source of statistics

The information in this brief was collected at individual level by CSSIW and HIW from Local Authorities and Health Boards.

The Care and Social Services Inspectorate Wales (CSSIW) encourages the improvement of social care, early years and social services by:

- regulating
- inspecting and reviewing
- providing professional advice to Ministers and policy makers.

Healthcare Inspectorate Wales (HIW) is the independent inspectorate and regulator of all healthcare in Wales. HIW's primary focus is on:

- Making a significant contribution to improving the safety and quality of healthcare services in Wales.
- Improving citizens' experience of healthcare in Wales whether as a patient, service user, carer, relative or employee.
- Strengthening the voice of patients and the public in the way health services are reviewed.
- Ensuring that timely, useful, accessible and relevant information about the safety and quality of healthcare in Wales is made available to all.

2. Timing

All references made to 'year' relate to the financial year which runs from 1 April to 31 March and 2009-10 should be understood as 1 April 2009 to 31 March 2010.

3. Data quality

As this data refers to a new requirement from April 2009, this is the first time that the data was collected and there was some missing information. Where there is a lot of information missing from a particular theme that that theme has been excluded from the publication. We will work with the Local Authorities and Health Boards to improve the quality of the data.

4. Symbols

The following notation is used in these tables:

- . = the data item is not applicable
- .. = the data item is not available
- = the data item is not exactly zero, but estimated as zero or less than half the final digit shown
- * = the data item is disclosive or not sufficiently robust for publication

5. Disclosure and rounding

All tables where disclosure risks exist have been rounded to the nearest 5 and numbers between 1 and 4 have been suppressed.

In tables where figures have been rounded there may be an apparent discrepancy between the sum of the constituent items and the total.

6. Revisions policy

As the data is part of an annual collection by Local Authorities and Health Boards, the data will not be revised.

7. Uses of statistics

We believe the key users of information on DoLS (apart from CSSIW's and HIW's core use) are:

- Ministers and the Members' Research Service in the National Assembly for Wales
- Department of Health and Social Services
- National Health Service
- Local government unitary authorities (elected members and officials)
- Registered providers of relevant health and social care settings
- Students, academics and universities
- Other areas of the Welsh Assembly Government
- Other government departments
- Individual citizens and private companies.

Apart from CSSIW's and HIW'S core use of the information these statistics are used in a variety of ways. Some examples of these include:

- Advice to Ministers
- Monitoring policies
- Unitary authority and Health Board comparisons and benchmarking
- To inform debate in the National Assembly for Wales and beyond
- To provide information to planners and commissioners of health and social care services

8. Feedback

We actively encourage feedback of our statistics. If you have any comments or queries, or if you don't think the list adequately reflects the range of users and uses, then please contact us using the contact details on the front page of this bulletin.

9. Related publications

This brief accompanies the CSSIW DoLS Monitoring Report and HIW DoLS Monitoring Report which were published on the same date. These reports can be found at the following links:

CSSIW report -

www.wales.gov.uk/cssiwsuite/newcssiw/publications/ourfindings/allwales/2011/?lang=en

HIW report -

www.hiw.org.uk/page.cfm?orgid=477&pid=13323

A set of more detailed information is also being made available in Excel format and this can be found at the Monitoring Report links above.

10. Further information

Further information is available from the CSSIW and HIW web sites:

www.cssiw.org.uk

www.hiw.org.uk