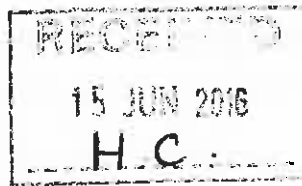


Joanne Kearsley
Area Coroner
Coroner's Court
1 Mount Tabor Street
Stockport SK1 3AG



Dear Miss Kearsley,

Ref [REDACTED] Regulation 28 Report to Prevent Future Deaths following the inquest into the death of Marjorie Wood who died on the 02.12.2015.

I am writing to you to respond to the concerns raised by your investigation into the circumstances surrounding the death of Mrs Wood.

Kingsley Care Homes takes very seriously it's responsibility to ensure that there is a full understanding of the legal status of individuals within our care homes.

Our Deprivation of Liberty Safeguards Policy and Procedure is used to guide staff in conjunction with our Mental Capacity Act 2005 Policy and Procedure and local guidance from the relevant supervisory body.

These documents were in place in Timperley.

An excerpt of our policy is detailed below:

Deprivation of Liberty Safeguards Policy and Procedure

Purpose

- To comply with The Deprivation of Liberty Safeguards (DOLS) regulations, which are an amendment to the Mental Capacity Act (MCA) 2005.
- To prevent breaches of the European Convention of Human Rights. "The safeguards provide a framework for approving the deprivation of liberty "for people who lack the capacity to consent to treatment or care in either a hospital or care home that, in their own best interests, can only be provided in circumstances that amount to a deprivation of liberty." The safeguards legislation contains detailed requirements about when and how deprivation of liberty may be authorised. It provides for an assessment process that must be undertaken before deprivation of liberty may be authorised and detailed arrangements for renewing and challenging the authorisation of deprivation of liberty." (Dept. of Health 2008).

Scope

- Anyone dealing with people aged 18 year or over who has a mental disorder and who lacks the ability to give consent, who may be deprived of their liberty.

Policy

- The Deprivation of Liberty Safeguards Code of Practice, published by the Ministry of Justice, will be followed in respect of all Service Users. A link to the Code of Practice can be found at the end of this document.
- The Deprivation of Liberty Safeguards - Forms and Record Keeping Guide for Managing Authorities in England (Hospitals and Care Homes) will be used to manage DOLS. A link to these forms can be found at the end of this document.
- This policy should be read in conjunction with the following policies (where applicable):
 - Supervisory Body/Local Authority Policy and Procedure.
 - Mental Capacity Act 2005 Policy and Procedure.

Procedure

- Good practice indicates that the care home should take reasonable steps to try and avoid a deprivation of liberty occurring. These steps include:
 - Effective Care Planning that is reviewed regularly;
 - Involvement of the Service User's family in decision making;
 - Exploring alternative and less restrictive ways of providing care consistent with protecting the person from harm;
 - Assessing the person's capacity to make decisions about their care.
- Where a Service User may be being deprived of their liberty, the managing authority has responsibility for applying for an authorisation of the deprivation. In the case of the Service User being in an NHS hospital, the managing authority is the NHS hospital. In the case of the Service User being in a care home or private hospital, the managing authority is the person registered as manager under part 2 of the Care Standards Act 2000. The managing authority should apply to the supervisory body for the area in which the person is ordinarily resident.
- In England and Wales, for people in care homes, the supervisory body is the local authority. For people in NHS hospitals in England the supervisory body is also the local authority. For people in hospitals in Wales, the supervisory body is the Local Health Board in the area where the hospital is situated.
- In applying for an authorisation the care home or hospital should use the forms and procedures produced for the purpose of application and management of a Deprivation of Liberty Safeguard authorisation which are contained in The Deprivation of Liberty Safeguards - Forms and Record Keeping guide for Managing Authorities in England (Hospitals and Care Homes) which can be found in the Useful Documents section of the QCS system (in your Quick Links box). A recent review of these forms has reduced the number of forms necessary and these can be found at the link below. These revised forms include a new form for informing the Coroner in the event of a death.
- **The managing authority must keep a written record of each application, reasons for the request and authorisation. This should be recorded centrally within the home and in each individual's care plan.**
- The managing authority should tell the Service User's family, friends and carers, and any Independent Mental Capacity Advocate (if there is one already involved) that it has applied for

an authorisation, unless it is impractical or impossible to do so, or it would be undesirable in the interest of the Service User's health or safety.

- If a standard authorisation is given, the supervisory body must appoint a relevant person's representative (RPR) to maintain contact and support the person. The managing authority must make sure the person and their RPR understand the nature of the authorisation.
- Where someone dies whilst subject to a Deprivation of Liberty authorisation, the care home or hospital should report the death to the Coroner, in accordance with the Coroners and Justice Act 2009 and subsequent guidance given by the Chief Coroner in December 2014 regarding deaths of people deemed to be in state detention. There is a link at the end of this policy to statutory forms which includes a form for reporting a death to the Coroner. There is also a link to the Chief Coroner's guidance regarding people subject to Deprivation of Liberty Safeguards.


Ms Cank had previously completed training in relation to MCA and DoLS. She has undergone supervision with her line manager in respect of the concerns raised by your investigation and is due to undertake further training.

Timperley had failed to follow policy and keep a written record of each application, reasons for the request and authorisation.

This information is now checked during audits of the home and is available on shared file to line managers.

I hope that the information provided offers assurances that the findings of your investigations and the areas you have highlighted for the prevention of future deaths have prompted action and been the focus of our continued commitment to providing quality care for individuals living in our homes.

Yours sincerely,

 P.P. *Quarland*
Director of Service Quality
Kingsley Care Homes