Mental Capacity & Safeguarding

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Eastman Dental Hospital





University College Hospital Macmillan Cancer Centre



University College Hospital at Westmoreland Street

National Hospital for Neurology and Neurosurgery



Grafton Way Hospital



University College Hospital Elizabeth Garrett Anderson Wing

National Hospital for Neurology and Neurosurgery at Cleveland Street





Hospital for Tropical

Diseases



Institute of Sport, Exercise and Health



Royal National Throat, Nose and Ear Hospital

Royal London Hospital for Integrated Medicine



Points for discussion

- 1. Safeguarding risks & triggers
 - Multi agency working, information sharing
 - Advocacy & identifying risks
 - Professional curiosity
 - Confidence to challenge practice
 - Supporting Learning Disabilities & Autism
 - Learning lessons: Safeguarding Adult Reviews, Domestic Homicide Review, Serious Incidents, Inquests, LeDER Reviews
 - > Statutory responsibilities, NICE guidance
- 2. Making decisions & consenting for treatment
 - > Applying MCA principles
 - Restrictive practice & Deprivation of Liberty safeguards
 (DoLS) > Liberty Protection Safeguards (LPS)
 - > The supporting role of Therapies teams

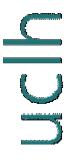






Care Act 2014





Safeguarding categories:

- 1. Physical
- 2. Sexual abuse
- 3. Organisational abuse
- 4. Financial or material abuse
- 5. Neglect and acts of omission
- 6. Discriminatory abuse
- Psychological abuse –control, coercion, isolation
- 8. Self Neglect
- Domestic Violence
- 10. Modern Slavery



Mental Capacity Act 2005 – 5 principles

1.A presumption of capacity

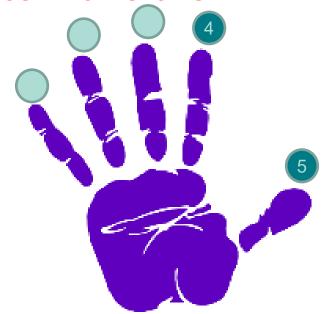
2.Individuals supported to make their

own decision

3. Unwise decisions

4.Best interests

5.Less restrictive option







#1 Mr Flowers

62 yo, Motor Neurone Disease, loss of weight, swallow problems, reduced mobility, refuse to engage with medical interventions

- Capacity & consenting
- 2. Making unwise decision
- Safeguarding protective measures: self neglect, care assessment & package of care for safe discharge home or elsewhere
- 4. Multi- agency working & support is key



#2 Mrs Meadows

49 yo, Multiple Sclerosis, deteriorating health & disabilities, communication issues

- Request for IUD contraception implant
 - Safeguarding concerns control & coercion
 - Professional curiosity & responsibilities
 - Capacity to consent to sexual relationship & birth control
 - Use of communication tools
 - Ongoing monitoring & safeguarding by multi-agencies, advocacy
 - Refer to case laws



#3 Mr Rose

75 yo, history of stroke, hydrocephalus, schizophrenia, mental decline, increase physical difficulties, requires urgent shunt, is refusing treatment

- Supporting decision making, capacity to consent
- Making an unwise decision

The Best Interest process, if he lacks capacity:

- Wishes & beliefs
- LPA for Health or an Advance Decision to refuse treatment (ADRT)
- o IMCA, if there is no nok or Advocate
- Mental Health Act & Mental Capacity Interface
- Multi Agency working & safeguarding



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4 Pansy

17 yo, encephalitis, seizures, aggressive behaviour, weight loss, require urgent NG/ PEG

- Decision making, capacity & consenting
 - Consenting for 16-17y yo (MCA)
 - Parents refuse to consent to PEG, religious beliefs
 - Safe restrictive practice sedation, physical, DoLS or COPDOLS11(Court of Protection)
- Best Interest process
 - Support decision making, advocacy
 - Multi agency working input
 - Supporting parents
- > Safeguarding -managing risks, protective measures

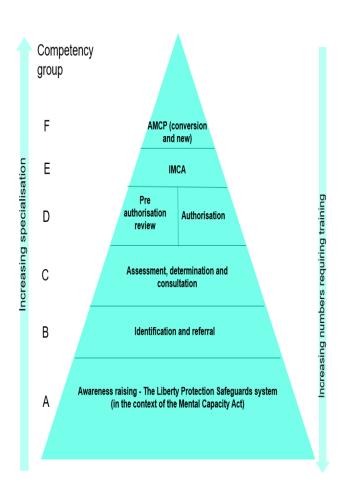




Liberty Protection Safeguards – where are we?

- New statutory roles & responsibilities for organisations & professionals
- Department of Health & Social Care:
 - MCA & LPS Code of Practice
 Consultation > Parliament
 - Training Framework
 - Factsheets
 - Capacity & Resources
 - Implementation -? 2023/24

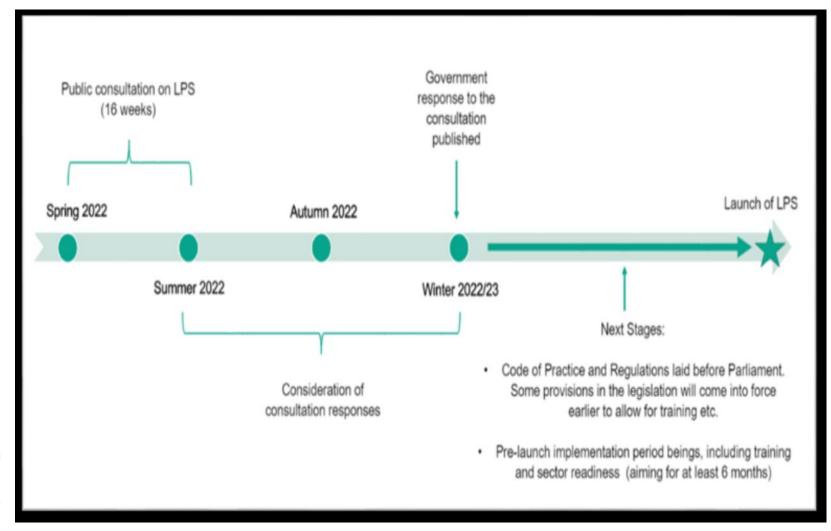
<u>Liberty Protection Safeguards (LPS) Workforce and Training Triangle</u>







DHSC Timeline 17 March 2022





Learning objectives

- √ Patient freedom of choice
- √ The MCA principles
- ✓ Unwise decisions
- ✓ Respecting wishes & beliefs
- Safeguarding and positive risk taking
- ✓ Professional curiosity
- Confidence to challenging practice & act as the patient's advocate
- Very Know who & how to escalate risks

 Output

 Description

 Description

 Line 1. L
- Multi agency working, information sharing & comms



> Mental Capacity (Amendment) Act 2019

http://www.legislation.gov.uk/ukpga/2019/18/enacted

National Mental Capacity Forum

https://www.scie.org.uk/mca/directory/forum

NICE Guidelines – Advance Decision & Mental Capacity

https://www.nice.org.uk/guidance/ng108

General Medical Council (GMC)
http://www.gmcuk.org/guidance/ethical guidance/consent guidance making decisions patient lacks capacity.asp

NHS England

https://www.england.nhs.uk/ourwork/safeguarding/

Adult Safeguarding: Intercollegiate Training Framework 2018 (RCN)
https://www.rcn.org.uk/professional-development/publications/pub-007069

Essex Chambers

39 Essex Chambers | Health, Welfare and Deprivation of Liberty Report – July 2022 - 39 Essex Chambers | Barristers' Chambers









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