

LPS Glossary

Appropriate Person	The appropriate person is a non-professional who provides representation and support for the cared for person during the LPS process and throughout the duration of any authorisation given. This is a key role in securing the person's views, wishes and feelings about their care, treatment and support.
Approved Mental Capacity Professional	The approved mental capacity professional (AMCP) is a new, specialist role providing enhanced oversight for those people who need it most. AMCPs will be independent, trained, registered professionals.
	In some cases, AMCPs will carry out pre-authorisation reviews to determine whether the authorisation conditions are met.
	AMCPs will normally be employed by a local authority, NHS hospital trust, local health board or clinical commissioning group.
	They do not all have to be employed by the local authority, but the local authority will need to have arrangements for approving them before they can practise.
Assessment and determination	There are two steps in relation to the three key conditions for LPS. One is assessment, carried out by someone suitably qualified, the second step is to determine or decide whether and when to rely on that assessment. For the Mental Capacity and Medical assessments, determinations can be made by someone else. For the Necessary and Proportionate assessment, the same assessor must also make the determination.
Authorisation Record	A record of the arrangements which have been authorised. This will include the period of time, a programme for reviews, details of advocacy and may contain other elements or requirements. Standard templates will be made available but are not mandatory
Cared for person	The way of describing the person at the heart of the LPS process who needs the protection of the safeguards
Excluded arrangements	The mental health exclusions are the same as for DoLS and broadly exclude those detained in hospital for treatment of a mental disorder or subject to mental health arrangements which conflict with the LPS, or where an application for detention could be made and the person is objecting.
Medical assessment	To determine whether the person has a mental disorder as defined by the MHA and as currently used for the DoLS criteria.
Mental capacity assessment	To determine whether the cared for person has mental capacity to make decisions about the arrangements for their care or treatment.



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Necessity and Proportionate Assessment	To determine whether the arrangements are necessary to prevent harm to the person and proportionate to the likelihood of and seriousness of that harm.
Pre authorisation review	Once the consultation and assessments and determinations have taken place, a pre-authorisation review will be completed. During the pre-authorisation review, all available evidence should be evaluated. The Responsible Body can then decide whether to authorise the arrangements or not.
Responsible Body	Replaces 'Supervisory Body' in DoLS. The Responsible Body will authorise arrangements that amount to a deprivation of liberty to enable care or treatment. Which organisation is the Responsible Body will vary according to where the arrangements are mainly carried out.
Renewal	The process for renewing an LPS authorisation at the end of its authorisation period. Renewals can be for up to twelve months the first time and up to three years thereafter. Renewals do not necessarily require further assessment in every situation.
Review	There will be two types of reviews: scheduled reviews which are planned in advance and identified in the authorisation record and unscheduled reviews carried out where a reasonable request is made. A review must also be carried out where a variation is requested.
Variation	An authorisation can be varied after consultation has been carried out and where it is reasonable to make a variation