

WMADASS DoLS signatories newsletter 1 January 2025

Welcome to this first edition (catchier titles welcome!)

The intention of this newsletter is to keep DoLS signatories /authorisers up to date with practice changes and case law.

WMADASS forms

WMADASS reviewed DoLS Forms last year and updated practice guidance to the forms

[DoLS forms | WMADASS](#)

The main changes were

- A report style Form 3. The aim of this change was to reduce duplication and get assessors to focus on being succinct and analytical rather than historic and narrative
- A Form 5 without the need for written scrutiny. This returned the forms to the original state as those produced by the Department of Health in 2009. This maintains the same standards and expectations from the persons signing the authorisation but removes the need to create a record of it.
- A form 6 which only needs to be used when assessments have been carried out and does not need to be scrutinised or signed by anyone in a senior position such as a signatory/authoriser

Practice update Form 3 Report style

Please note that the Schedule for DoLS only requires the following of a BIA

1. They must consult the managing authority
2. They must have regard to
 - a. The needs assessment
 - b. The care plan
 - c. The conclusions of the Mental Health Assessor
3. They must record the name and address of every interested person they have consulted (NB: no requirement to consult any or all interested persons)

The new form allows the assessor to write a report proportionate to the situation. We do not recommend that they adopt headings as this returns the form to the old state rather than the new. The headings at the top of the best interests section are to some extent an aide memoire for the assessor and can even be deleted once the report is written.

Individual Councils may of course choose to set their own requirements.

The aim in the WM is to produce clear, succinct reports which families are also able to understand. We have considered the following advice by Sir James Munby:

*“All too often [...], local authorities are filing enormously voluminous materials which – and this is not their fault – are not merely far too **long**; too often they are narrative and historical rather than analytical.*

I want to send out a clear message: local authority materials can be much shorter than hitherto and they should be more focused on analysis than on history and narrative.

*In short, the local authority materials must be **succinct** and **analytical**. But they must also of course be **evidence-based**.”*

Sir James Munby, View from the President's Chambers: Expert Evidence (Family Law, 2013)

WMADASS Priority tool and beyond

The priority tool for identifying which applications should be processed first was also updated last year and adopted by the wider ADASS group. This change mainly puts acute hospitals on the same footing as care homes in having to demonstrate additional factors in order for the assessment to be prioritised.

New version of Form 5 checklist

A new version of the Form 5 checklist is currently being consulted on by DoLS Leads and is to be circulated with this newsletter. Please feed views back to me by email

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Interesting case – ‘Stop saying on a dols!!’

[“On a DoLS” – mythbusting by a \(rightly\) exasperated Court of Protection – Mental Capacity Law and Policy](#)

A great case to read and share with colleagues in Children’s services. It explains clearly that the origin of any restrictions is the care plan not the DoLS or DOL Order. A DoLS or DOL Order is permissive not mandatory.

Para 52 52. Unfortunately, when the Court authorises such a care plan that amounts to a “dol” it is seen as being mandatory, like the Court has imposed a prison sentence. That gives rise to an unfortunate misconception on the part of the people who are the subject of these orders that the order, while it remains in place, requires those providing care to keep them actually locked in and locked up.

Essential reading for anyone involved in DoLS work

[Health, Welfare and Deprivation of Liberty | 39 Essex Chambers](#)

[Mental Capacity Law and Policy](#)