

CASE
NUMBER

Mental Capacity Act 2005

DEPRIVATION OF LIBERTY FORM No. 17

UNAUTHORISED DEPRIVATION OF LIBERTY

ASSESSOR'S REPORT

For these purposes, there is an unauthorised deprivation of liberty if:

- (a) a person is kept in a hospital or care home in circumstances that amount to depriving them of their liberty, and
- (b) their deprivation of liberty has not been authorised by an urgent or standard authorisation under the Mental Capacity Act 2005, by detention under the Mental Health Act 1983¹ or by the Court of Protection, and nor is a relevant authorisation presently being sought from that court.

PART A — BASIC INFORMATION

Name, address and profession of the assessor	Name	
	Address	
	Profession	
Full name of the person being assessed	Name	
Their date of birth (or estimated age if unknown)	DOB	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>
	Est. age	<input type="text"/> Years
Name and address of the relevant hospital or care home	Name	
	Address	
Name and address of the supervisory body	Name	
	Address	
Person to contact at the supervisory body	Name	
	Telephone	
	Email	

¹ References in this form to provisions of the Mental Health Act 1983 include provisions of other enactments that have the same effect

PART B — RECORD OF THE ASSESSMENT

I have assessed whether or not the person is being kept in the hospital or care home in circumstances that amount to a deprivation of their liberty.

In carrying out this assessment, I have taken into account any information given to me, and any submissions made, by any IMCA instructed for the person under section 39A of the Mental Capacity Act 2005

Place a cross in EITHER box B1 OR box B2 ↓

B1	I have concluded that the person IS being kept in this hospital or care home in circumstances that amount to a deprivation of their liberty.	<input type="checkbox"/>
B2	I have concluded that the person IS NOT being kept in this hospital or care home in circumstances that amount to a deprivation of their liberty.	<input type="checkbox"/>

My reasons for concluding that the person is, or is not, being kept in the hospital or care home in circumstances that amount to a deprivation of their liberty are as follows:

PART C — INFORMATION AS TO WHETHER ANY DETENTION IS AUTHORISED

Only complete Part C of the form if you concluded that the person IS being kept in this hospital or care home in circumstances that amount to a deprivation of their liberty.

Although not required by the Mental Capacity Act 2005, the following information is provided to the supervisory body to assist it in deciding whether or not the person's deprivation of liberty is authorised under the Mental Capacity Act 2005.

Place a cross in ONE of the boxes below (C1–C4) ↓	
C1	<p>It appears to me that the deprivation of liberty of the person is authorised under the Mental Capacity Act 2005.</p> <p>I am satisfied that a Court of Protection order, standard authorisation or urgent authorisation is in force in relation to the person's deprivation of liberty, or that a relevant authorisation is presently being sought from that particular court.</p> <p>If C1 applies, describe the authority in the box below, e.g. you might write 'a standard authorisation given by A N Other PCT on 1 January 2009 for a period of 12 months'.</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>
C2	<p>It appears to me that the deprivation of liberty of the person is not authorised under the Mental Capacity Act 2005, and nor has it been authorised under the Mental Health Act 1983 or by some other authority or court (such as the High Court).</p>
C3	<p>The person's deprivation of liberty in the hospital is authorised under the Mental Health Act 1983 or by some other authority or court (such as the High Court).</p> <p>If C3 applies, describe the authority in the box below, e.g. the relevant section of the Mental Health Act 1983.</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>
C4	<p>I am unable to say whether or not the person's deprivation of liberty is authorised under the Mental Capacity Act 2005, or under some other Act or authority, and further enquiries by the supervisory body need to be made.</p>
<p>PART D — PROVIDING COPIES OF THIS ASSESSMENT</p> <p>If you have received a copy of this assessment, it is because the law requires the supervisory body to give copies of this assessment to:</p> <ul style="list-style-type: none"> (a) the person who was the subject of the request to decide whether or not there was an unauthorised deprivation of liberty (b) the managing authority of the hospital or care home (c) any section 39A IMCA. 	
Signed	
Dated	