

CASE  
NUMBER

Mental Capacity Act 2005

DEPRIVATION OF LIBERTY FORM No. 21

## SUPERVISORY BODY'S DECISION AS TO WHETHER ANY QUALIFYING REQUIREMENTS ARE REVIEWABLE

A person may only be deprived of their liberty under the Mental Capacity Act 2005 if they meet all of the six 'qualifying requirements'.

In general terms, a review should be carried out if it is possible that the person no longer meets a particular qualifying requirement.

With one exception, dealt with in Part D of this form, the supervisory body must arrange for assessments to be carried out for each qualifying requirement that appears to be reviewable.

### PART A — BASIC INFORMATION

Full name of the person being deprived of their liberty	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	
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	

**PART B — WHETHER ANY QUALIFYING REQUIREMENTS ARE REVIEWABLE**

The supervisory body must decide whether it has evidence that the person may no longer meet one or more of the qualifying requirements, or that they are entitled to a review on some other ground.

**Place a cross next to any qualifying requirements that are reviewable (B1–B6).**

**If no requirements are reviewable, place a cross in row B7**

**B1 THE AGE REQUIREMENT**

The age requirement is reviewable on the ground that:

<b>A</b>	The person might not meet the age requirement.	<input type="checkbox"/>
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**B2 THE MENTAL HEALTH REQUIREMENT**

The mental health requirement is reviewable on the ground that:

<b>A</b>	The person might not meet the mental health requirement.	<input type="checkbox"/>
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<b>B</b>	The reason why the person meets the mental health requirement might be different from the reason stated in the standard authorisation.	<input type="checkbox"/>
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**B3 THE MENTAL CAPACITY REQUIREMENT**

The mental capacity requirement is reviewable on the ground that:

<b>A</b>	The person might not meet the mental capacity requirement.	<input type="checkbox"/>
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<b>B</b>	The reason why the person meets the mental capacity requirement might be different from the reason stated in the standard authorisation.	<input type="checkbox"/>
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**B4 THE NO REFUSALS REQUIREMENT**

The no refusals requirement is reviewable on the ground that:

<b>A</b>	The person might not meet the no refusals requirement.	<input type="checkbox"/>
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<b>B</b>	The reason why the person meets the no refusals requirement might be different from the reason stated in the standard authorisation.	<input type="checkbox"/>
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**B5 THE ELIGIBILITY REQUIREMENT**

The eligibility requirement is reviewable on the ground that:

<b>A</b>	(a) the standard authorisation authorises the person's deprivation of liberty in hospital; <b>AND</b> (b) the person is subject to guardianship under the Mental Health Act 1983 <sup>1</sup> <b>OR</b> meets the statutory criteria for being detained under section 2 or 3 of the Mental Health Act 1983; <b>AND</b> (c) the person objects to being accommodated in the hospital for the purpose of being given some or all of the proposed medical treatment for their mental disorder; <b>AND</b> (d) no donee of a lasting power of attorney or deputy appointed by the Court of Protection has consented to each matter to which the person objects.	<input type="checkbox"/>
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<b>B</b>	The reason why the person meets the eligibility requirement might be different from the reason stated in the standard authorisation.	<input type="checkbox"/>
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**B6 THE BEST INTERESTS REQUIREMENT**

The best interests requirement is reviewable on the ground that:

<b>A</b>	The person might not meet the best interests requirement.	<input type="checkbox"/>
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<b>B</b>	The reason why the person meets the best interests requirement might be different from the reason stated in the standard authorisation.	<input type="checkbox"/>
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<b>C</b>	There has been a change in the person's case, as a result of which it might be appropriate to vary the conditions to which the standard authorisation is subject (whether by amending or omitting an existing condition, or by adding a new condition).	<input type="checkbox"/>
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**B7 NO REQUIREMENT IS REVIEWABLE**

None of the qualifying requirements appear to be reviewable:

<b>A</b>	The supervisory body has decided that none of the qualifying requirements appear to be reviewable and that therefore the supervisory body is not required to take any action in respect of the standard authorisation. This review is therefore complete. <b>(Give your reasons in Part C and then sign and date this form. There is no need to complete Parts D and E.)</b>	<input type="checkbox"/>
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<sup>1</sup> References in this form to provisions of the Mental Health Act 1983 include provisions of other enactments that have the same effect.

**PART C — REASONS FOR REFUSING A REVIEW**

Where a review was requested on a ground that the supervisory body has rejected, the supervisory body’s reasons for rejecting the request, or that part of the request, are as follows:

**PART D — VARYING THE CONDITIONS OF THE STANDARD AUTHORISATION**

**Note:** there is one exception to the rule that the supervisory body must arrange a separate assessment (a ‘review assessment’) for each qualifying requirement it decides is reviewable.

This is where it has been decided that the best interests requirement (B6 above) is reviewable on the **SOLE** ground that there has been **A CHANGE IN THE PERSON’S CASE** (ground C in B6), as a result of which the conditions of the standard authorisation may need varying.

**Part D of this form should be completed ONLY if this one situation applies. In all other cases, do not complete it and proceed instead to Part E.**

**How to complete Part D**

Part D should only be completed in the circumstances described in the note above.

If Part D requires completion, the supervisory body must decide whether the change in the person’s case is significant, having regard to its nature and the period for which it is likely to last.

If the change is significant, you should place a cross in box D1 below, and then arrange a best interests review assessment by also placing a cross in box E6. The best interests assessor will recommend any appropriate variations of the conditions once they have completed their assessment.

If the change is not significant, it is not necessary to arrange a best interests review assessment. You can simply use this form to vary the conditions, whether by amending or omitting an existing condition, or by adding a new condition. Place a cross in box D2 and then list the new, varied, conditions immediately below.

<b>D1</b>	There has been a significant change in the person’s case and a best interests review assessment is therefore required.	<input type="checkbox"/>
<b>D2</b>	Although there has been a change in the person’s case, as a result of which it is appropriate to vary the conditions, the change is not significant and a best interests review assessment is not required. The new amended conditions are those set out below.	<input type="checkbox"/>

The standard authorisation is hereby varied to take account of the change in the person's case. The person is now subject to the following conditions:

<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	
<b>5</b>	
<b>6</b>	

**PART E — DETAILS OF THE REVIEW ASSESSMENTS TO BE CARRIED OUT**

Subject to the one exception mentioned in Part D, the supervisory body must arrange a separate review assessment for each qualifying requirement that it decided in Part B is reviewable.

The usual assessment forms for a new standard authorisation should be used by the assessors. In general terms, the assessor must follow the same assessment process, and comply with the same duties, as they would if carrying out an assessment for a new standard authorisation.

Having regard to the decisions in Part B of this form as to which (if any) of the qualifying requirements are reviewable, the supervisory body will now arrange for the following assessments to be carried out:

**Place a cross in one or more box(es) below (E1–E6), or leave them all blank if you decided that no review assessments are required.**

<b>E1</b>	An age review assessment	<input type="checkbox"/>
<b>E2</b>	A mental health review assessment	<input type="checkbox"/>
<b>E3</b>	A mental capacity review assessment	<input type="checkbox"/>
<b>E4</b>	A no refusals review assessmen	<input type="checkbox"/>
<b>E5</b>	An eligibility review assessment	<input type="checkbox"/>

<b>E6</b>	A best interests review assessment	<input type="checkbox"/>
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Signed  (on behalf of the supervisory body)	Signature	
	Print name	
	Position	
Dated	Date	