

# MCA/DOLS Training and support for GPs – MCA/DoLS Lead in post for 1 Year

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## Project method

Monthly: full training days were set up to provide specific information to GP's on carrying out mental capacity assessments, when, how, why, and who to involve and who to share with and the importance of recording. The sessions were facilitated at larger GP Practices with a free training room facility. Information included: 2 stage test, planning ahead, LPA's, Deputy's, ADRT's, IMCA referrals, DNACPR's. Use of real life scenarios were given for every subject matter.

MCA Q&A sessions have been provided at a number of GP surgeries across our region and more are scheduled for the coming year (up to end of May 2016) and these sessions are provided as part of their Protected Learning Time (PLT) these are short 1 – 2 hour bursts of MCA information specific to GP practice. Sessions are held in the GP surgery and other health staff attached to the surgery are also encouraged to attend.

Presentations have been given at Practice Locality meetings to Practice Managers to raise the importance the MCA especially that of LPA's, Deputy's, ADRT's, and DNACPR's, encouraging GP's to attend the training or have a PLT session at their surgery.

## Project results/evaluation

The IMCA service had reported that they had received a referral from a GP surgery in the area regarding a DNACPR and the person had no family or friends to consult following a training session. Another GP fed back *"to have MCA Assessment forms that were fit for purpose and not too onerous as the time they took to fill in were not practical, they said they need to be easily accessible"*. As a result we devised a 2 page MCA Assessment for GP's to use for less complex decisions. GP's were very engrossed and asked lots of questions, many were very interested in LPA's, Deputy's and DNACPR. Many GP's asked lots of questions around the Deprivation of Liberty Safeguards and what their role was within that, and asked "why are we not informed when a DOL is authorised and they requested to be informed as part of that process, for when that person died whilst under a DOL, they would be requested to suggest a cause of death report to the Coroner. GP's asked why families/carers the public have not had this information in the form of training days etc.

## Project area classification

|                    |   |                        |   |
|--------------------|---|------------------------|---|
| Hospital care      |   | Emergency care         |   |
| GP care            | X | Dementia               |   |
| Social care        |   | Learning disability    |   |
| Voluntary sector   |   | Other mental health    |   |
| Financial services |   | Palliative care        |   |
| Police             |   | Advance planning, LPAs | X |
| Legal              | X | Commissioning          |   |

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|                       |   |                               |   |
|-----------------------|---|-------------------------------|---|
| Community health care | X | Training                      | X |
| Nursing and care home |   | For professionals?            | X |
| Acute care            |   | For public and service users? |   |
| Chronic care          |   |                               |   |