



# I was involved in the big decisions about me

## Julia's story

### About

Julia is 60 years old and lives in a supported living placement under a Deprivation of Liberty Safeguard (DoLs). Julia has a learning disability and a mental health condition. Along with Julia's dual diagnosis, she also has physical needs and is receiving treatment. Julia can also present with challenging behaviour at times and is known to make unfounded allegations.

Julia has been deemed to lack capacity regarding her care and support needs and requires support to make the big decisions about her life.

### Advocacy need

Julia was referred for advocacy support under the Care Act regarding the review of her placement. There were concerns raised about the lack of progress of some of the actions to be completed by the placement and so regular reviews were being held.

A referral was also placed under the Care Act regarding an organisational safeguard in relation to the lack of adherence to policies and procedures of the placement, and staff culture and attitude towards clients.

A referral for an IMCA 39D was initially placed by the local authority for advocacy to support Julia's family member in their role as relative persons representative (RPR) in relation to the DoLS.

A subsequent referral was placed by the local authority for a Paid RPR relating to the DoLS.

A subsequent IMCA referral was then placed by the hospital under Serious Medical Treatment.

### How we helped

As the advocates are multi skilled and qualified this enables Julia to be supported by the same advocate throughout all the different advocacy processes. Julia is well known to the advocacy service and the advocate has developed a strong advocacy

relationship, having knowledge and understanding of her history and what is important to her.

The advocate implemented a non-instructed approach using a range of reasonable adjustments to support Julia to share her views and participate within each process. For example, the advocate created picture boards to support Julia to share her views about her care and support within her reviews.

As the 39D IMCA, the advocate supported the family member to understand their role as RPR and utilised easy read information. The family member found this useful but felt that they were unable to take on the responsibilities and requested that advocacy support Julia as a Paid RPR instead.

Due to Julia's needs, she was unaware of the safeguard but was represented within the safeguard process. The advocate met with Julia in private on a regular basis in order for her to share her views about the placement, which were then fed back into the safeguard process.

Julia was referred for a serious operation in relation to her physical health needs. The IMCA referral was placed at very short notice but as the advocate knew Julia well, they were able to respond quickly to the referral. The advocate supported Julia to participate within the SMT meeting and was able to draw on their prior knowledge of Julia's views and wishes in relation to her health.

## **Outcome**

Julia was represented in each process and her rights were upheld. The safeguarding, and care and support issues were addressed by the organisation and Julia appears settled in her placement with the support of key staff.

Within the role of the Paid RPR, the advocate makes regular visits enabling Julia to share her views and any concerns about the placement.

Julia was able to contribute meaningfully in her SMT meeting due to the continuity of advocacy support. The longstanding relationship enabled her to be as in control of the meeting as much as was possible. It was important for Julia to be involved in the big decisions about her health and to feel in control, including signing the relevant documentation in the same way as other professionals in attendance at the meeting.