DEPRIVATION OF LIBERTY FORM No. 11

RECORD THAT AN EQUIVALENT ASSESSMENT IS BEING USED STANDARD AUTHORISATION PROCEDURE

In certain circumstances, it may not be necessary to carry out one or more of the six assessments usually required for a standard authorisation. This form should be used to record that a previous equivalent assessment has been used instead.

Where a previous assessment is relied on, it is treated as having been carried out in connection with the current request for a standard authorisation. Because it stands in place of the one usually now required, it must be copied to the people entitled to receive copies of the assessments used in connection with the current request for a standard authorisation.

Any equivalent assessments being used should be securely attached to this form.

PART A — BASIC INFORMATION

Full name of the person being assessed	Name
Name of the hospital or care home where it is proposed to deprive the person of their liberty	Name
Name and address of the supervisory body	Name
	Address
The present address of the person being assessed	As stated on the request for a standard authorisation
(Place a cross in the relevant box and, where applicable, state the address)	As stated immediately below
	Address
Address of the hospital or care home where it is proposed to deprive the person of their liberty (Place a cross in the relevant box and, where applicable, state the address)	As stated on the request for a standard authorisation
	As stated immediately below
	Address

PART B — FORMAL STATEMENT

The assessments indicated in Part C of this form are not required.

In each case where an equivalent assessment is being used:

- (a) the supervisory body already has a written existing assessment of the person
- (b) the existing assessment complies with all of the requirements that an assessment of that kind must comply with in relation to a standard authorisation
- (c) the existing assessment was carried out within the previous 12 months or is an age assessment
- (d) the supervisory body is satisfied that there is no reason why the existing assessment may no longer be accurate.

If an equivalent best interests assessment is being used, before deciding that it was satisfied that there is no reason why the existing best interests assessment may no longer be accurate, the supervisory body took into account any information given, or submissions made, by:

- (a) any relevant person's representative appointed for the person
- (b) any IMCA instructed for the person in relation to their deprivation of liberty.

PART C — THE EQUIVALENT ASSESSMENTS BEING USED

Where an equivalent assessment is being used, place a cross in the middle column next to the relevant assessment. Then give a brief description of the equivalent assessment in the right-hand column. For example, write 'The attached mental capacity review assessment dated ... which was carried out in connection with a review under Part 8 of Schedule A1 to the Mental Capacity Act 2005'.

Assessment	Equivalent being used?	Description of the equivalent assessment
Age assessment		
Mental health assessment		
Mental capacity assessment		

No refusals assessment		
Eligibility assessment		
Best interests assessment		
Please sign and date this form. Please make sure that any equivalent assessments being used are securely attached to this form.		
Signed	Signature	
(on behalf of the supervisory body)	Print name	
	Position	
Dated	Date	
NOTES You should give a copy of this form to the person who is co-ordinating all of the assessments required following the recent request for a standard authorisation. This is because the supervisory body may not give a standard authorisation unless and until it has written copies of all the assessments. This includes having copies of any equivalent assessments that are being used in place of those usually required.		