

# My LPS Journey

**MY JOURNEY WILL BEGIN IF IT IS CONSIDERED I MAY LACK CAPACITY TO CONSENT TO MY CARE AND TREATMENT, AND I MAY HAVE A MENTAL DISORDER.**

The care and treatment that is proposed or that I am receiving mean that:  
1) I am or will be under continuous supervision and control; **AND**  
2) I am not free to leave the place where the arrangements are taking place; **AND**  
3) I do not have the capacity to consent to that care and treatment.

A Responsible Body will be responsible for authorising my care and treatment. This will be either a health board or a local authority. They will work together to determine which is responsible, applying a “no wrong door” principle.

**Is there a friend or family member who can help me as an Appropriate Person?**

**YES**

The Responsible Body will ensure my Appropriate Person is involved in my LPS journey and provide them with an IMCA if required.

**NO**

**Do I (or my Appropriate Person) need an Independent Mental Capacity Advocate (IMCA)?  
If yes then one will be appointed by the Responsible Body.**

The Responsible Body will **CONSULT** with anyone I chose e.g. friends/family/unpaid carers.

The Responsible Body will ensure I **AND / OR** my Appropriate Person understand the LPS process.

Assessments and Determinations to be carried out by professionals on the Authorisation conditions.

**Do I lack capacity to consent to the arrangements? **AND****  
**Do I have a mental disorder? **AND****  
**Are the arrangements necessary and proportionate to keep me safe?**

No to any of these questions requires review of care, support or treatment arrangements.

**Do I object, or not consent to the arrangements, or is it reasonable to think I might not?  
Or are the arrangements in an independent hospital?**

Responsible Body appoints an  
Approved Mental Capacity Professional (AMCP).

AMCP to meet with me and or my  
Appropriate Person.

AMCP to conduct  
Pre-authorisation Review.

Pre-authorisation Review to be  
arranged by Responsible Body.

**Do the Assessments and Determinations show that the Authorisation conditions  
have been met?**

Authorisation granted or  
renewed by the Responsible  
Body (my care or treatment  
can now start or continue).

Authorisation not granted or  
renewed (other arrangements for  
my care, support and treatment  
to be considered).

Authorisation Record sent to me and if relevant my IMCA and  
Appropriate Person within 72 hours.

Regular  
reviews of  
care, support  
and treatment  
plan.

Renewal of  
Authorisation.

Varying of  
Authorisation.

End of  
Authorisation.

Review of Authorisation.

Review of my  
care, support  
or treatment  
arrangements.

**MONITORING AND REPORTING**