

# DoLS & Dental: Sophie, 28

## Part A: Trainer Notes (Full Detail)

### 1 Exploring the Person's Voice

- Sophie has severe learning disability but communicates with Makaton, picture cards, hospital passport.
- Initially dismissed — professionals assumed she couldn't engage.
- Supported communication enabled her to express fears (hospitals) and hopes (to feel better, smile again).

#### Trainer prompts / discussion

- How did the hospital passport ensure Sophie's voice was heard?
- How do we avoid assuming non-verbal = non-communicative?

#### Activity

In groups, design a short hospital passport for Sophie (likes, dislikes, triggers, support needs).

### 4 Professional Reflections

- Professionals initially overlooked Sophie's ability to engage.
- Coordinator persisted with creative, accessible communication.
- Mum felt heard for the first time → trust improved.
- Reflection: are restrictive plans used because we haven't tried enough alternatives?

#### Trainer prompts / discussion

- What assumptions were challenged here?
- How did the coordinator's approach shift outcomes?

#### Activity

**Reflective writing:** describe a time restrictions were applied – could they have been reduced with creativity?

### 2 Impact on the Vulnerable Person

- Untreated abscess = life-threatening risk.
- Emotional distress compounded by fear of hospitals.
- Without preparation, risk of coercion, unnecessary sedation, or trauma.
- Positive adjustments (passport, preparation, family involvement) enabled safe treatment without sedation.

#### Trainer prompts / discussion

- How do physical health needs and emotional barriers interact?
- What difference did preparation make to Sophie's care?

#### Activity

**Case-mapping:** trace journey from crisis → restrictive option → least restrictive plan.

### 5 Ethical & Emotional Dilemmas

- Mum felt sidelined ("I'm just her mum").
- Ethical tension: urgent health needs vs dignity, autonomy, and family involvement.
- Positive resolution: mum recognised as partner, not bystander.

#### Trainer prompts / discussion

- How do we support families who feel excluded?
- What ethical challenges arise when legal safeguards clash with emotions?

#### Activity

**Discussion:** unpack statement "I'm not just a mum, I'm a carer."

### 3 Safeguarding and Duty of Care

- Professionals must safeguard Sophie's health and rights.
- DoLS application provided legal safeguards, but least restrictive principle guided decisions.
- Involving mum and adjusting environment reduced need for coercion.
- Safeguarding = protecting wellbeing and dignity.

#### Trainer prompts / discussion

- Why was DoLS required even without sedation?
- What does "least restrictive" mean in practice?

#### Activity

**Mock best-interests meeting:** compare 3 options (1) sedation/isolated, (2) DoLS with restrictions, (3) DoLS with passport + family support.

### 6 Practical Learning Points

- DoLS is a safeguard, not punishment.
- Always seek least restrictive alternative.
- Communication tools (Makaton, pictures, passports) reduce restrictions.
- Family knowledge is vital (hidden triggers, routines).
- Partnership improves safety, compliance, dignity.

#### Trainer prompts / discussion

- How did the hospital passport reduce restrictions?
- What lessons from Sophie's case apply more widely?

#### Activity / role-play

**Before-and-after role-play:** (1) sedation & exclusion vs (2) passport & family support → compare outcomes.

### Wales: Key Law & Policy

- Mental Capacity Act 2005 (applies in Wales) – principles of capacity, best interests, least restrictive option.
- Deprivation of Liberty Safeguards (DoLS) – still in force in Wales (LPS not yet implemented, 2025).
- Wales Safeguarding Procedures (2019) – adults at risk, capacity, best interests.
- SSWBA 2014 – advocacy duties, safeguarding framework.
- NHS Wales: Health Profiles & Hospital Passports for LD patients

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## Part B: Handout

### Aim

Balance urgent health needs with rights, dignity, and least restrictive practice.

### Exploring the Person's Voice

- Sophie communicates via Makaton, pictures, passport.
- Always assume capacity to express needs.

### Impact on the Vulnerable Person

- Abscess = life-threatening.
- Fear of hospitals worsened distress.
- Adjustments enabled safe treatment without sedation.

### Safeguarding & Duty of Care

- Safeguard health and rights.
- Apply DoLS if restriction unavoidable.
- Always seek least restrictive option.

### Professional Reflection

- Initial assumptions limited Sophie's voice.
- Creativity and persistence enabled success.

### Ethical & Emotional Dilemmas

- Mum sidelined → emotional harm.
- Partnership restored trust and dignity.

### Practical Learning Flow

1. Assess capacity & communication.
2. Create hospital passport.
3. Involve family as partners.
4. Apply DoLS if restrictions necessary.
5. Choose least restrictive option.
6. Review and reflect.

### Wales: Key Law

- MCA 2005; DoLS; SSWBA 2014; Wales Safeguarding Procedures