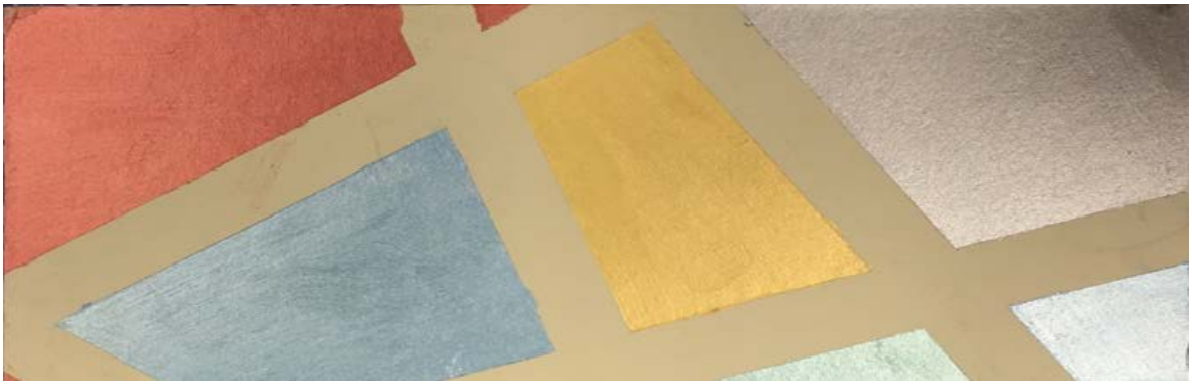

Welcome to the September 2024 Mental Capacity Report. Highlights this month include:

(1) In the Health, Welfare and Deprivation of Liberty Report: the Court of Appeal on belief and capacity, and both sexual and medical complexities before the courts;

(2) In the Property and Affairs Report: a guest post updating deputies and attorneys on important responsibilities;

(3) In the Practice and Procedure Report: which decisions are for doctors, and which for the courts; jury-rigging Article 5(4) compliance in community DoL cases, and transparency under the spotlight;

(4) In the Mental Health Matters Report: a Mental Health Bill on the way, the hard edges of the MHA 1983 and the CQC and Valdo Calocane;

(5) In the Wider Context Report: the limits of Article 3 in the context of the inherent jurisdiction, the CQC and covert medication and Lord Falconer's Assisted Dying Bill;

(6) In the Scotland Report: the Scottish Government consults on legislative measures to respond to the Scott Review and a report from the World Congress on Adult Care and Support.

There is one plug this month, for a free digital trial of the newly relaunched Court of Protection Law Reports (now published by Butterworths. For a walkthrough of one of the reports, see here.

You can find our past issues, our case summaries, and more on our dedicated sub-site here, where you can also sign up to the Mental Capacity Report.

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The picture at the top, "*Colourful*," is by Geoffrey Files, a young autistic man. We are very grateful to him and his family for permission to use his artwork.

Contents

Scottish Government consultation on AWI amendments

After carrying out considerable work in informal discussions over recent months, on 25th July 2024 Scottish Government published its "Adults with Incapacity Amendment Act: Consultation". The consultation document contains 99 questions. Here, I give a selective overview. 99 consultation questions raise many issues, and points picked out here may not necessarily be all of the most important ones. However, it is hoped that they give a flavour of the task ahead for consultees from now until the consultation closes on 17th October 2024.

There is clearly nothing yet that is prescriptive about the document. It seeks "thoughts on proposals for reform" to the 2000 Act. The consultation makes it clear that partial responses, replying to selected questions, will be just as welcome as more comprehensive responses. The document envisages a two-stage process, of which it addresses the first only: updating the 2000 Act in advance of the second stage, which will address wider reforms "that may take place over the next five to ten years" as set out in Scottish Government's response to the Scottish Mental Health Law Review ("the Scott Review", which was followed by "the Scott Report"). The stated aims at the outset of the consultation document probably do not give a full impression of the breadth and depth of coverage. The aims are stated as:

- Improve access to justice for adults affected by the AWI Act.
- Shift the focus of the AWI Act to one that truly centres on the adult.
- Enable adults to access rights more easily.
- Ensure adults are supported to make and act upon their own decisions for as long as possible.
- When an adult cannot make their own decisions despite support, ensure that their will and preferences are followed unless doing so would be to the overall detriment of the adult.

The consultation is set out in six Parts that correspond to Parts 1 – 6 of the 2000 Act, followed by Part 7 dealing with deprivation of liberty, and Part 8 ("which can be considered in isolation") addressing the topic of authority for research under section 51 of the 2000 Act, and associated regulations. The document acknowledges the need for changes in practice, and for training to help achieve that. It would be useful if there could be acknowledged from the start the need for an equivalent of the implementation steering group which oversaw implementation of the 2000 Act itself, extending far beyond training of professionals and others to general publicity, and including the details of leaflets in social work offices and GP surgeries, dissemination arrangements, and generally turning the words of statute into something that worked in practice. The steering group inevitably picked up needs for further adjustments, which after review were included in the Adult Support and Protection (Scotland) Act 2007 ("the 2007

Act"). A similar process could usefully be added to the agenda for the planned second tranche of reforming legislation.

What is however lacking from this document is any commitment to a timescale for legislation, albeit in two stages. The first stage is urgently required. The introductory material narrates the proposals on deprivation of liberty made by Scottish Law Commission in 2014, and the two much broader consultations in 2016 and 2018. It suggests that the long gap in progress since then was to allow the Scott Review to complete its work. One has to say that this suggestion is misleading. In March 2019 Scottish Government expressly undertook to continue work on deprivation of liberty, and on essential AWI reform generally, in parallel with the work of the Scott Review:

"*At the same time as the Review takes place, we will complete the work we have started on reforms to guardianship, including work on restrictions to a person's liberty, creation of a short-term placement and amendment to powers of attorney legislation so that these are ready when the Review is complete.*"

No such work was done. Nothing was ready by the time that the Scott Report was issued. But "we are where we are", and one has to acknowledge the considerable amount of work done since publication of the Scott Report, leading to this consultation.

Part 1: Principles and other provisions

The good news here is that just as the Scott Report, in Chapter 13, largely adopted the recommendations of the Three Jurisdictions Report, Scottish Government has followed suit. Specifically, the consultation document quotes and accepts the recommendation of the Three Jurisdictions Report that there should be a "*rebuttable presumption that effect should be given to the person's reasonably ascertainable will and preferences … Action which contravenes the person's known will and preferences should only be permissible if it is shown to be a necessary and proportional means of effectively protecting the full range of the person's rights, freedoms and interests*". The consultation proposes a shift from references to "wishes and feelings", to "will and preferences", following CRPD (the UN Disability Convention). The inter-relationship between will and preferences, and the difference between them, are not explored, but the intention is clear. There does not yet appear to be a proposal for an attributable duty to ascertain these. In parallel with this recommendation, however, it is envisaged that there should be clear obligations to ensure that all necessary support has been given to the adult in accordance with Article 12.3 of CRPD. Again, however, while there is an obligation for interveners (as defined in section 1(1) of the 2000 Act) to ensure these matters, there is not yet in the proposals any clear attributable duty to ensure provision of support.

An apparent flaw in the consultation document is that it refers to support for making decisions, failing to recognise the quite fundamental difference in this regard between the law of England & Wales, and the law of Scotland, and more generally this aspect of the significant difference between common law systems generally, and civil law systems generally. Law reform processes in the 1990s in England & Wales were encapsulated by the title of the consultation documents: "Who decides". The focus was on decision-making, and there was much debate between so-called substitute decision-making and so-called supported decision-making. That debate did not feature significantly in the Scottish process, focused on the wider concept of "acting and deciding" rather than deciding only. Likewise, CRPD does not once mention either supported decision-making

or substitute decision-making, and the travaux préparatoires demonstrate that the drafting committee stepped back from being drawn into making any rulings in favour of, or against, supposed "substitute decision-making". The requirement of Article 12.3 is to provide adults with the support they require in exercising their legal capacity, and one would hope that this wider concept will permeate any legislative proposals, once this exercise proceeds from the present rather generalised discussion to actual proposals for legislation itself.

Also, there needs to be greater clarity around how the principles are to be applied. The consultation document asserts that "the principles have parity", and then proposes as an intended change that an amended section 1(4)(a) would give clear priority to the adult's will and preferences. The consultation document, in asserting "parity", does not address the views of Sheriff Principal Stephen (as she then was) in *G v West Lothian Council*[1] that the benefit principle is "the essential principle" which should be addressed before consideration is given to the other principles. In a sense, both views are correct. On the one hand, to assess whether a proposed intervention will benefit the adult, or whether its purpose could be achieved without the intervention, is likely to require compliance with all of the principles. It is unlikely to be possible to judge whether a contemplated intervention will benefit the adult without knowing the adult's relevant wishes and feelings, or will and preferences. On the other hand, the principles do form a step-by-step process as one goes through them. If a proposed intervention will not benefit the adult, stop there. No further consideration is necessary. The same applies if the desired benefit can be achieved without the intervention; and to the requirement for the least restrictive intervention in relation to the freedom of the adult; and so on, all of these being questions to be answered in sequence.

In the context of Part 1, the consultation fails to address the points that jurisdiction in adult incapacity matters was given to the sheriff court, firstly, to facilitate a "one-door approach" for both incapacity and mental health applications, and, secondly, was predicated upon a recommendation that there should be specialist sheriffs. "One door" disappeared with the creation of the Mental Health Tribunal under the 2003 Act. Specialisation has happened *de facto* in some courts, but not in others, producing the disparity in standards that has attracted so much criticism. Scottish Government needs to grasp that nettle. Proposals have been "on the table" since responses to the 2016 consultation, to merge mental health and incapacity jurisdictions in a single tribunal. That does not need to await unified legislation. Indeed experience of such a tribunal, operating the two regimes, will be invaluable in shaping unified legislation.

Also needed without further delay is to apply the principles of the 2000 Act, and provisions such as the jurisdiction of the court under section 3(3) to give directions, to encompass woefully non-compliant, in human rights terms, procedures such as appointment of appointees to administer social security benefits. That can be done in relation to benefits now administered in Scotland. To make that extension would either persuade UK Government to allow the same for UK benefits, or at least – surely – shame them into addressing that situation.

Entirely commendable proposals in relation to section 3(3) involve allowing directions to be given to past holders of functions under the Act

[1] 2014 GWD 40-730 (see also case commentary by Eccles and Watson at 2015 SLT (News) 35).

(such as attorneys and guardians who have ceased acting) and to others with roles that would affect administration under the Act – the example is given of pension funds making payments to persons whose finances are administered under the Act.

The consultation document does suggest, surprisingly, that the distinction between financial and welfare powers "is made differently" as between powers of attorney and guardianship. That assertion is not justified. A difference in terminology is however addressed, helpfully. Scotland's reference to "continuing powers of attorney" to mean powers of attorney in property and financial matters is idiosyncratic and confusing. The suggested reform to call them "financial powers of attorney" should remove that confusion. A further consideration not mentioned is that, Europe-wide, "continuing power of attorney" describes any power of attorney that may enter into force, or continue in force, notwithstanding the granter's loss of relevant capacity.

A surprising feature of the discussion of Part 1 is to suggest that the investigatory role of the Office of the Public Guardian in relation to financial powers of attorney be transferred to local authorities. OPG would still investigate financial guardianships, issues under Parts 3 and 4, and so forth. Why not continue to use the considerable experience and expertise of OPG? Would one really have a situation in which OPG would supervise an attorney where that attorney has been put under the supervision of OPG under section 20 of the 2000 Act, but would not investigate malfeasance? One is prompted to remember the international presentations at the World Congress in Edinburgh in 2022 of the whole process of investigating and where necessary prosecuting financial fraud by attorneys and guardians. Without doubt, it is a highly skilled and highly specialised task. The most skilled fraudsters will certainly be likely to "pull the wool over the eyes" of any inadequately trained and experienced financial investigators. This writer is not aware of any significant previous consultation on this topic, nor of the views of OPG: it surely requires further thought as to basic operational practicalities.

Part 2: Powers of attorney

Recommendations regarding the certification process deserve consideration and probably development. Clinical psychologists may well be the best certifiers of capacity. The importance of safeguards against undue influence and other vitiating factors is mentioned, but not fully addressed. That is an obvious area for potential abuse: as successive Mental Welfare Commission investigations have identified.

Proposals for mandatory training of attorneys are commendable, but like other aspects require further thought. Clearly, the training should take place upon appointment, because the need to commence acting could arise suddenly. However, a young couple might appoint each other to be attorneys as a precaution, and it could be 40 years or more before either began to act. Likewise, the power of attorney document could appoint substitute and alternative substitute attorneys who might never act. Should they be trained, in advance of accepting appointment, or only after accepting appointment, with the problem that they may require to commence acting immediately?

The document does address the peculiarity that as matters stand granters require to confirm that they have considered what should be the trigger for commencing acting, but are not required to specify it. There perhaps requires to be greater clarity around the point that many granters, particularly elderly and frail granters, may wish an attorney to take over administration of their financial affairs upon appointment, regardless of

any question of impairment of capacity, and then to continue acting as their own capabilities gradually wane. A similar consideration in relation to welfare powers is that although they can only be exercised upon incapacity, or reasonable belief of the attorney, that is too simplistic. Frequently, capacity fluctuates, and capacity for different acts varies and fluctuates. That flexibility requires to be accommodated. It is notable that in many jurisdictions registration of a power of attorney only takes place once it is brought into force. Should Scotland introduce such registration, or at least a secondary noting on the register, when any provisions of a power of attorney come into force and the attorney begins to act?

So far, the proposals do not extend to revocations the attempts to simplify procedures and make them more workable. An attorney may simply wish to change a substitute appointment under an existing power of attorney. At present, the only way in which that can be done is to revoke the entire document and go through the process of replacing it. That surely needs to be changed.

Parts 3 and 4

It is proposed that Part 4 administration cease, and be taken over by Part 3 administration, with Part 3 improved. That would appear to be sensible, as are proposals to address the need – identified long ago – to facilitate transitions of financial administration among Part 3, intervention orders and guardianships, in each case in both directions. In a manner which seems strangely inconsistent with the proposals regarding powers of attorney, it is proposed that OPG "should actively supervise withdrawers" under Part 3. The unstated logic behind this is that withdrawers, unlike financial attorneys, are not appointed by the adult.

It is proposed to introduce greater flexibility in allowing adjustments to the arrangements without always requiring a formal fresh application. That should make the system more workable. It is also proposed that the scope of what a withdrawal certificate authorises should be widened.

Part 5

It is proposed that authority to treat under section 47 should be extended, where appropriate, to conveying a person to hospital to receive treatment, which could include treatment for a physical issue: there would be a new adapted section 47 certificate that would expressly allow a person to be conveyed to hospital and ensure that the process is authorised. A raft of related proposals would appear to be designed to subject this to the minimum necessary intervention principle; they are probably also designed to ensure compliance with Article 5, on deprivation of liberty, of ECHR (the European Convention on Human Rights), but that aspect is likely to require careful consideration.

There are further proposals for an enhanced section 47 certificate to prevent a person who is being treated for a physical condition from leaving hospital, whether temporarily or permanently. These again raise significant issues, including in relation to Article 5, and human rights compliance generally.

Scottish Government describes its concerns about authority to give medication for the purpose of alleviating serious suffering on the part of the adult, or to prevent serious deterioration in the adult's medical condition, while a dispute between a proxy and a medical practitioner is being addressed under the procedure provided for in section 50. The consultation document suggests that this be altered. This is an area to be entered with great

care, as the issues that led to the "section 50 compromise" were the one area of significant political concern in relation to the 2000 Act itself which could have derailed the whole legislation. The document appears to give no statistical evidence of the prevalence of such a situation. It is known that references under section 50 are relatively rare, though it is understood that the number approximately doubled during the pandemic, the point of contention in many of the extra cases being whether to vaccinate.

Part 6: Guardianships

The tentative proposals that have now emerged will without doubt lead to much discussion. It is asserted bluntly that "incapacity reports are not included in the GP contract and GPs are not obliged to carry them out". It is also suggested that "GPs are not experts in incapacity assessments, so may not feel confident, or may refuse because of the volume of their existing work". It also points out that "there are fewer psychiatrists, but they are experts at assessing incapacity where it results from mental disorder", and that "it is generally part of their contract to complete incapacity reports". It acknowledges that a psychiatrist may refuse to report if not already familiar with the adult. Scottish Government is accordingly considering reducing the number of medical reports from two to one. A welcome proposal is to add clinical psychologists to those who might provide them.

On mental health officers' reports, the proposals rather seem to duck the issue. Simplification of the form of reports is proposed. What is needed, plainly, is adequate allocation of resources to ensure at least doubling of the MHO workforce: in relation to remuneration sufficient to justify suitable social workers taking on the extra training and responsibility, and all areas of recruitment, training and retention.

The possibility of improving the form of report by a "person with sufficient knowledge" is also addressed.

There is discussion of allowing Part 6 applications to be considered even although the MHO report is outwith the current 30-day limit. One wonders, however, how a sheriff could be assured that the situation has not changed if the MHO does not confirm that. Here again, perhaps what is essentially a resources issue is being masked: in contrast to most other jurisdictions, Scottish Courts Administration gives remarkably low priority to the need to address and determine such applications promptly.

There are further proposals suggesting abbreviated reports for urgent applications seeking interim orders; and for simplification of requirements where financial powers are requested to be added to a hitherto welfare-only guardianship, or the opposite. However, there does not appear to be an attempt to reconcile the wider tension between the requirement of the principles that they be applied rigorously to all powers sought, and the understandable tendency in practice to seek a wide range of powers on a precautionary basis. What is surely needed, as has been proposed, is a two-tier arrangement under which "precautionary powers" may be granted, but there should be at least a minimum notification requirement if they are brought into operation. There is still a general tendency to seek, and renew, excessive powers: often coming to light at time of renewal when a guardian is asked, power by power, whether they have all been operated at all.

There are commendable proposals to eliminate the human rights violations of excessive duration of guardianship orders. There might be scope for strengthening the proposals, to ensure adequate independent judicial supervision. It is at this point that the notorious "Aberdeenshire case" is discussed, though it is not clear that all

of the lessons to be learned from it have in fact been learned.

There is a surprising section on adding substantially to the potential exclusions from powers that could be conferred upon a guardian. One would suggest that these proposals are clearly non-human rights compliant unless the intention is that the matters in question could be authorised by an intervention order. Proposed exclusions such as "making a Will", even when to do so would comply with the principles, would seem to be regressive unless (again) that may be done under an intervention order. Indeed, all of the proposed exclusions would appear to amount to preventing something amounting to exercise of legal capacity by or on behalf of the adult which would nevertheless satisfy the section 1 principles: that would appear to be regressive.

Part 7: Deprivation of liberty

Discussion of these proposals at this time and in this item is probably beyond the reasonable scope of this item. The proposals certainly require massive examination and consideration. One does not see any clear replication of the 2014 proposals from Scottish Law Commission. It is difficult to see that they adequately address the two-step requirements of ensuring compliance with Article 5 when someone is empowered to authorise a deprivation of liberty; and ensuring compliance whenever, in particular circumstances and in a particular way, such power is exercised. One would simply say at this stage that much more work on this seems to be necessary, but at least this consultation document will trigger that process.

Part 8: Participation in research

This specialist topic is not addressed in this article.

Adrian D Ward

World Congress on Adult Care and Support, Argentina, August 2024

The 2024 World Congress on Adult Care and Support took place in Buenos Aires, Argentina on 27th - 30th August 2024. This report has been prepared by Adrian D. Ward and Sarah G. Prentice immediately after the event.

Adrian attended as president of the last preceding World Congress in Edinburgh, 2022, and as one of the two members present in Buenos Aires of the steering group of the International Advisory Board that recommends the allocation of hosts for future Congresses, and provides necessary support to each. Sarah accepted an invitation to join him as an expert in the field, fluent in Spanish. The latter role expanded into facilitating endless cross-language conversations and introductions throughout the period of the Congress, at all times of day and night.

This was the largest Congress so far, with approximately 600 attendees, of whom 200 were speakers and presenters, over plenary and four parallel sessions throughout long days from 9am until 8pm. The vast majority of attendees and speakers were from Latin America, and new to these World Congresses. All of them participated with great enthusiasm, and if they can be encouraged to attend future congresses, they will represent a massive addition to the strength of these events, particularly in view of all the exciting recent developments across Latin America, focused on achieving compliance with the principles with the United Declaration on the Rights of Persons with Disabilities ("UN CRPD"). Several, however, reported a deficit between the standards required by their new legislation, and implementation, even by judges. It was necessary for Adrian to point out in the closing Plenary Session that passing laws is at most 50% of the task: there needs to be sustained and

planned effort to have them fully implemented in practice.

Beyond South America, there was representation from 32 countries across every inhabited continent. If there was a deficit, it was that despite major representation from Spanish speaking Latin American countries, and a significant attendance from Dutch speaking Surinam, there was only one delegate from the whole of Portuguese speaking Brazil.

Pleasing for Adrian and Sarah, as delegates from Scotland, was the repeated commendation from many who had attended the Edinburgh event in 2022 of the standards achieved there. Equally significant, though simply taken for granted by so many rather than explicitly commented on, was the extent of the continuity of development of the whole subject over the two years since Edinburgh. At the concluding session in Edinburgh, Wayne Martin, Professor of Philosophy at Essex University, gave a masterly summing up. He marvelled at the dynamic progress in our subject, worldwide, exemplified at that Congress. He suggested that the many and varied contributions to that Congress reflected "a shared understanding of a common challenge", to which he attempted to give this explicit formulation:

"How shall we devise new regimes of legal capacity which are respectful of the rights of older persons and persons with disabilities, and which are maximally inclusive of populations that were previously excluded from full recognition in society?"

At the 2024 Congress one could likewise marvel at how the dynamic progress identified in 2022 has been sustained, worldwide, with a broad consolidation of consensus as to how to meet that challenge, and real progress towards developing and enacting laws to give effect to it.

Unlike previous Congresses, there was much greater emphasis upon issues faced by older people as well as by people with disabilities. One could not escape the relevance of contemporary events in South America, and comments from speakers that there is worldwide focus on starvation among children, but little attention paid to starvation among older people. It was quoted that in Argentina the basic costs of living, including adequate diet, amount to about $700 per month. The current pension for old people is $200 a month. For those without significant family or other support, the consequences can be fatal, particularly since - as one delegate put it - "the first symptom of significant ill health" is "the last symptom in their lives". Yet, when during the course of the Congress a group of older people protested in Buenos Aires about their level of pension, they were brutalised by police with batons and tasers. With the unanimous support of all present, the dynamic President of the 2024 Congress, Prof Maria Isolina Dabove of the University of Buenos Aires, personally signed a declaration unequivocally condemning that action.

It was in this context that proposals for a United Nations Convention on the Rights of Older Persons featured significantly. Did this have a place in a World Congress focused on issues of Adult Capacity? Answers were emphatically provided, even by the very title of the book "Aging of the Oppressed: A Pandemic of Intersectional Injustice" by Silvia Perel-Levin, advocate for the human rights of older persons, billed as attending from "Geneva and Tel Aviv". She was one of several who made passionate contributions on this topic. Adrian publicly confessed his reservations about an accumulation of Conventions on the rights of particular categories of persons. There will always be those who fall between the cracks, and whose needs may be greatest of all. One contributor quoted the magnificent first

paragraph of the Universal Declaration on Human Rights: but when almost every subsequent paragraph commences "everyone" and "no-one", and if these words mean what they say, why should implementation be limited to particular groups? The answers provided at the Congress introduced the concept of "the whole universe around a Human Rights influence, regardless of content or ratification of particular Conventions". Thus, although the United States has not ratified the UN CRPD, it was narrated that to date 29 U.S. states have based reforms in law and practice upon its principles. Adrian publicly acknowledged that one of the successes of an event such as the Congress was when people - such as him in this matter - were persuaded to change their minds.

The venue for the Congress must surely have been the largest and most impressive Law School building anywhere, a massive rectangular block with an imposing presence on top of a small hill, a free university currently serving 14,000 law students, exceeding the most ever before encountered by Adrain anywhere in the world - the previous highest being 10,000 in mainland China.

That the Congress happened at all was a triumph for Isolina Dabove and her organising team. They built up to host the event in 2020, were defeated by the pandemic, postponed to 2021, then cancelled that also, eventually to step in two years behind the Scottish Congress of 2022. To have sustained the will and capability to deliver through all of that, on top of all the "normal" considerable demands of running such an event, is an achievement that may well never be equalled. Less visible but equally notable was the supporting role played by Jochen Exler-Konig, present of International Guardianship Network (IGN), now at least partially rewarded by a substantial increase in membership of IGN.

It was confirmed that the next Congress will take place in July 2026, jointly hosted in Amsterdam by Kees Blankman, Professor of Elder Law at the Free University ("VU") Amsterdam, and his colleague Dr Rieneke Stelma-Roorda, best known to a wider readership for her monumental recent book (in English) "*In anticipation of a future period of incapacity*".

It is likely that the 2028 World Congress will be held in Girona. It is notable that the large delegation from Catalonia in 2022 was repeated at the 2024 Congress. It is hoped that the involvement of Latin America generated by Isolina Dabove and her colleagues in 2024 may be sustained by the accessibility for Latin Americans of transport links to Amsterdam, and linguistic links to Spain.

Adrian D. Ward and Sarah G. Prentice

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Simon has wide experience of private client work raising capacity issues, including *Day v Harris & Ors* [2013] 3 WLR 1560, centred on the question whether Sir Malcolm Arnold had given manuscripts of his compositions to his children when in a desperate state or later when he was a patient of the Court of Protection. He has also acted in many cases where deputies or attorneys have misused P's assets. To view full CV click here.

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Adrian is a recognised national and international expert in adult incapacity law. He has been continuously involved in law reform processes. His books include the current standard Scottish texts on the subject. His awards include an MBE for services to the mentally handicapped in Scotland; honorary membership of the Law Society of Scotland; national awards for legal journalism, legal charitable work and legal scholarship; and the lifetime achievement award at the 2014 Scottish Legal Awards.

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Conferences

Members of the Court of Protection team regularly present at seminars and webinars arranged both by Chambers and by others.

Alex is also doing a regular series of 'shedinars,' including capacity fundamentals and 'in conversation with' those who can bring light to bear upon capacity in practice. They can be found on his website.

Adrian will be speaking at the European Law Institute Annual Conference in Dublin (10 October, details here).

Peter Edwards Law have announced their autumn online courses, including, Becoming a Mental Health Act Administrator – The Basics; Introduction to the Mental Health Act, Code and Tribunals; Introduction – MCA and Deprivation of Liberty; Introduction to using Court of Protection including s. 21A Appeals; Masterclass for Mental Health Act Administrators; Mental Health Act Masterclass; and Court of Protection / MCA Masterclass. For more details and to book, see here.

Advertising conferences and training events

If you would like your conference or training event to be included in this section in a subsequent issue, please contact one of the editors. Save for those conferences or training events that are run by non-profit bodies, we would invite a donation of £200 to be made to the dementia charity My Life Films in return for postings for English and Welsh events. For Scottish events, we are inviting donations to Alzheimer Scotland Action on Dementia.

Our next edition will be out in October. Please email us with any judgments or other news items which you think should be included. If you do not wish to receive this Report in the future please contact: marketing@39essex.com.

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