IMCA and Older People

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IMCA overview

- Introduced in April 2007 through MCA 2005
- Commissioned by local authorities
- Provided by over 60 organisations
- Mainly a safeguard for people who don't have family and friends who can represent them.
- The person needs to lack capacity to make a specific decision to access the IMCA service.

IMCA decisions

Duty to instruct an IMCA

- Accommodation
- Serious medical treatment

Power to instruct an IMCA

- Care reviews
- Adult protection

Deprivation of Liberty Safeguards

- Introduced April 2009
- Aims to prevent people being unlawfully deprived of their liberty.

Additional IMCA roles

- 39A supporting a person who is being assessment for a standard authorisation or potential unlawful DOL.
- 39C covering gaps in persons representative
- 39D supporting person and /or their unpaid representative

Some IMCA services received additional resources to undertake these roles.

Training of IMCAs

- Local authorities determine training and any qualification requirements.
- MCA CoP specified attending a four day course
- IMCA DOLS training two days commissioned by Department of Health
- Certificate in Independent Advocacy (IMCA)
- Diploma in Independent Advocacy
- DH provided funding to IMCAs for NAQ.

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IMCA statistics

- IMCAs required to log all cases on DH website
- Year 1 figures published in first annual report of the IMCA service.
- Some concerns about validity and accuracy of the data.

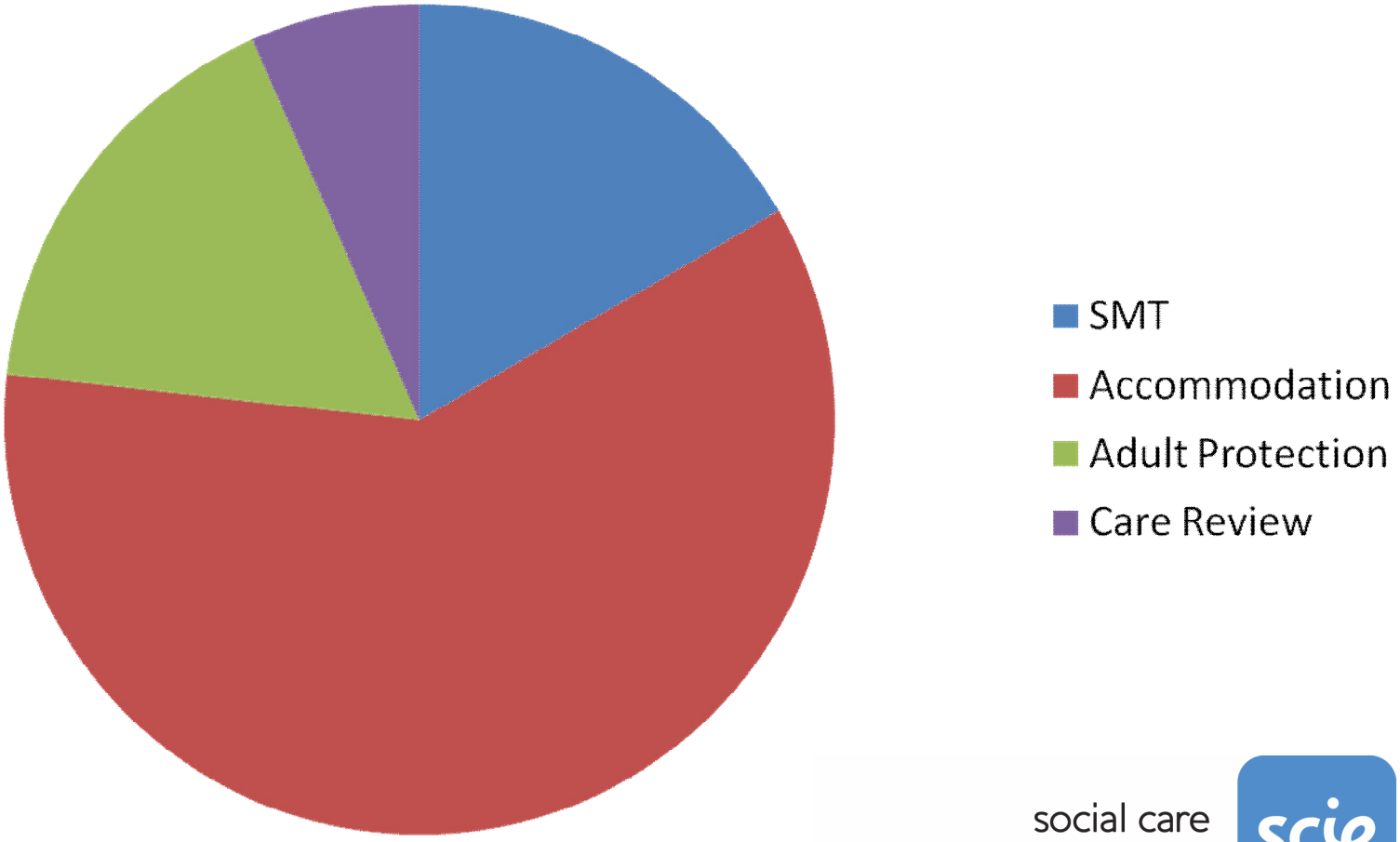
England referrals year 2

- Eligible referrals 6583
- This is a 24% increase from year 1
- Ineligible referrals 1745
- This is a 24% decrease from year 1
- The most common reasons were ineligible was the person was befriended (40%)

Age profile year 2

- 60% eligible referrals for people over 65.
- 24% between 66 and 79 years old
- 36% over 80 years old
- This is consistent with year 1

Eligible referrals all ages



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People over 66 compared to younger referrals

- 60% of all eligible referrals.
- More likely to be referred for accommodation or care reviews (66%)
- Less likely to be referred for adult protection (56%)
- Significantly under represented in SMT (42%)
- Second medical opinion obtained in 80% of cases.

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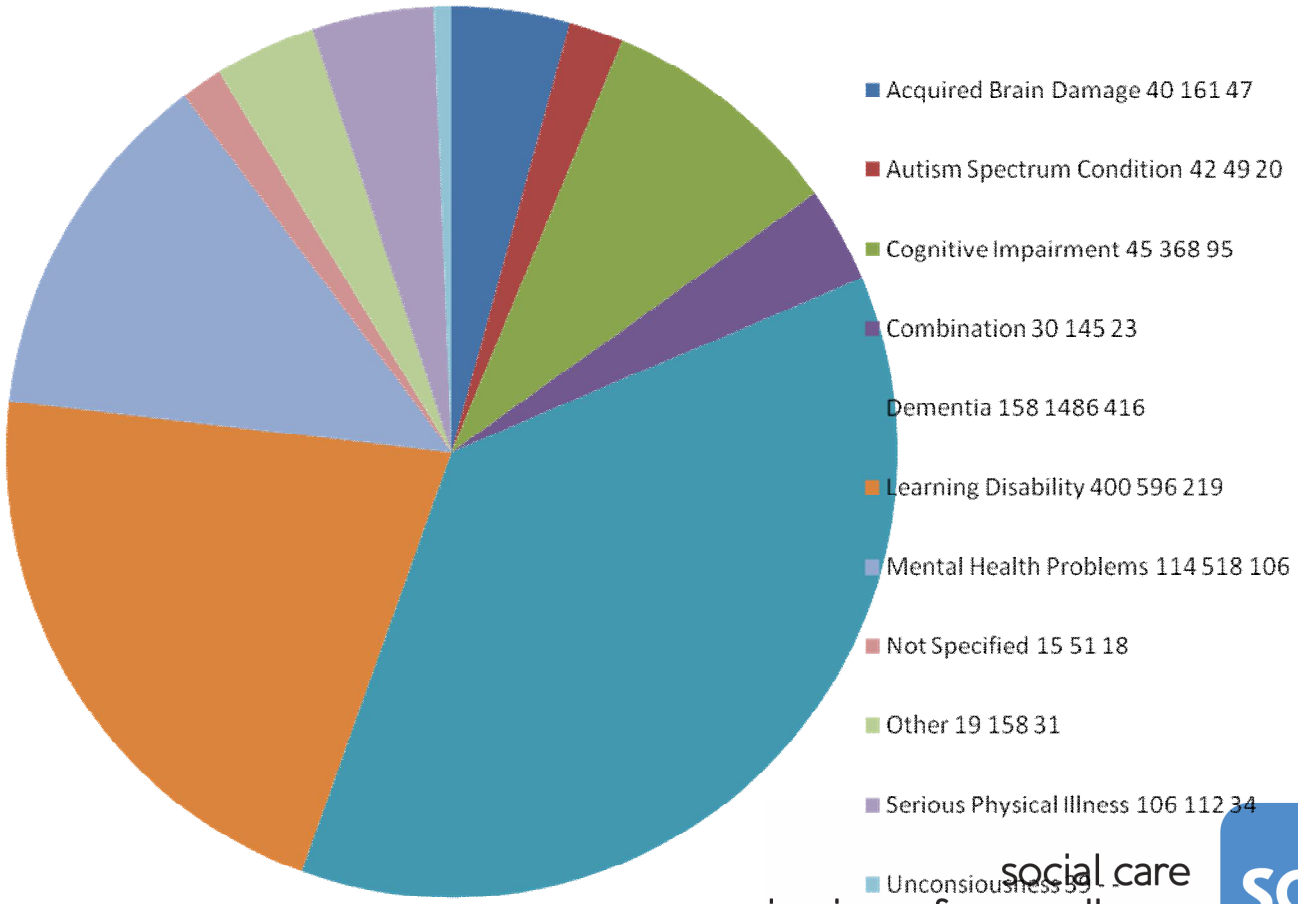
Mental impairment



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Dementia

- Identified for 37% of eligible referrals
- 41% of accommodation decisions
- 43% of care reviews
- 41% of adult protection cases
- But only 16% of SMT decisions
- Being older and having dementia is associated with being less likely to access an IMCA for SMT decisions.

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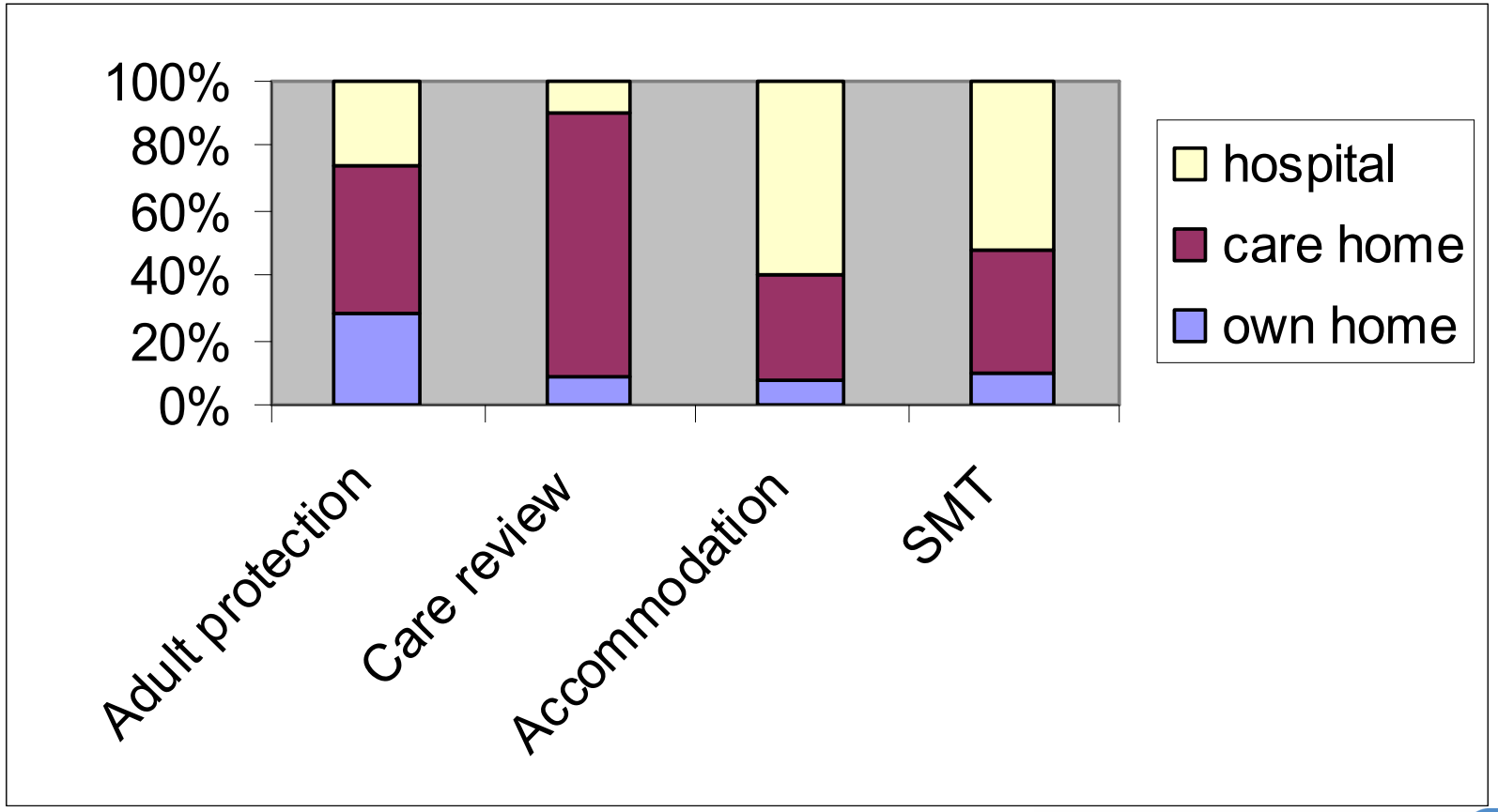
Where were people on referral?



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Accommodation moves

- 90% from own home to a care home
- 82% Care home to care home
- 85% from hospital to a care home

- Could IMCAs be doing more to keep people out of care homes?

Issues to discuss

- How can we ensure more older people access the IMCA service?
- How should IMCA relate to other older people's advocacy services?

Issues to discuss

- How should we measure the quality of IMCA services for older people?

- Contact details
- From 21st May 2009 www.scie.org.uk/imca
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