

CASE  
NUMBER

Mental Capacity Act 2005

LOCAL DEPRIVATION OF LIBERTY FORM BC 1

## Notification to Coroner Death of resident detained under MCA DoLS (Mental Capacity Act Deprivation of Liberty Safeguards)

### PART A — BASIC INFORMATION

Full name of the person who was deprived of their liberty	Name		
Their date of birth	DOB	<input type="text"/>	<input type="text"/>
The date and time of their death	Date	<input type="text"/>	Time
Name and address of the relevant hospital or care home where the person was being detained under a DoLS Authorisation	Name		
	Address		
Name and address of the supervisory body	Name		
	Address		
Person to contact at the supervisory body	Name		
	Telephone		
	Email		
Name and address of the Doctor responsible for certifying death	Name		
	Telephone		
	Address		

**PART B — SUBMITTING THIS NOTIFICATION**

**In accordance with SECTION 8 OF THE CORONERS ACT, before the doctor has signed the Death Certificate the Managing Authority must send a copy of this notice to the Coroner.**

**PART C — PROVIDING COPIES OF THIS NOTIFICATION**

As soon as practicable, the Managing Authority must also give a copy of this notice to the following:

- (a) the supervisory body for the hospital or care home
- (b) any IMCA instructed for the person under section 39A of the Mental Capacity Act 2005 in relation to the request for a standard authorisation
- (c) every person named by the best interests assessor in their report as an interested person whom they have consulted in carrying out their assessment

Signed  (on behalf of Managing Authority)		Signature	
		Print name	
		Position	
		Date	