Safeguarding Adults Review
7 Minute Learning Summary

West of Berkshire Safeguarding Adults Board
Reading, West Berkshire & Wokingham

Steven was a 78-year-old male living with dementia. Steven resided in the community with his partner who was his main carer. Steven had a package of care consisting of two calls daily from spring 2017 until it was cancelled in March 2020 by Steven's partner due to the Covid-19 pandemic.

Steven was found passed away in a public area in early 2021, after being identified by his partner as missing in the early hours of the morning; the evening before his death, Steven left home in a confused state and was not dressed appropriately for the cold weather.

It appears that there was a known risk of Steven leaving the house in a confused and disorientated manner from 2017, but it is unclear whether this (and other) information was used across the system to enable effective risk management.

Strengths:

Care Act 2014, section 9: Steven had an assessment of his care and support needs; section 27: Steven had regular reviews of his package of care; section 10: Steven's partner was offered a carers assessment in early 2021.

Mental Capacity Act 2005: Although no formal mental capacity assessments or best interest decisions were completed, there is consideration of mental capacity from various professionals.

Steven was able to remain at home with his cat which was the least restrictive option for him and was consistent with his wishes.

Just Checking was installed following the first episodes of Steven leaving the house.

Steven had a lot of health input from his GP to ensure his physical health needs were being investigated and agencies contacted the GP when required.

Steven's partner was living with him, and was able advocate on Steven's behalf.

At times, the risk of Steven leaving the house in a confused and disorientated manner was shared between professionals.

In early 2021, the involved professional spoke to Steven's partner about assistive technology and the Herbert Protocol (people with dementia at risk of going missing form, containing information to help the police if the person goes missing) https://www.thamesvalley.police.uk/notices/af/herbert-protocol/ Steven's partner installed a Ring doorbell.

Missed Opportunities:

Mental Capacity: No formal mental capacity assessments or best interests decisions were completed.

Annual Review: During the review in the summer of 2019, concerns raised by the carers were not discussed.

Carers Assessment: Steven's partner was not offered a carers assessment until early 2021. If a carers assessment had neem carried out earlier it may have identified carer stress and fatigue and support put in place to assist Steven's partner.

There was a lot of information on individual systems which was not shared between the different professionals. The information on different systems was also conflicting at times.

No formal risk assessment or risk management plan were completed; this would have been good practice to enable regular review and sharing of the risk.

Technology Enabled Care such as a door sensor with a pager or GPS locator could have been considered and may have alerted Steven's partner that he had left the house or may have allowed him to walk safely.

The Memory Clinic review in late 2019 was not completed; this could have identified ongoing risks.

When care was cancelled in March 2020, Community Older Adults Mental Health Service (COAMHS) and the GP were not alerted. In April and November 2020 when Covid welfare check calls to Steven were not successful, there was no follow up.

In December 2020, concerns raised with the GP by Steven's partner in relation to his dementia progressing were not shared with Adult Social Care. In early 2021, Adult Social Care were attempting to close Steven's case while the GP had referred back to COAMHS due to increased concerns. A joint review may have been helpful.

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Risk Assessment, Risk Management and Information Sharing

Professionals should be trained in risk management and there should be an appropriate risk assessment framework to include risk management. This includes seeking historical information from involved parties and being professionally curious.

Information sharing between agencies regarding risk requires improvement to ensure that the right information is shared at the right time.

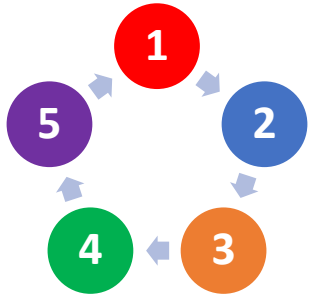
SAR Process Feedback:

"I must admit I have been worrying about this as I have never been involved in one before but you have a really calming way and made it easier for me so thank you"

Mental Capacity

Professionals would benefit from being alert to indicators that a mental capacity assessment may be required in relation to day-to-day decision making, including but not limited to: personal care, nutritional intake, medication, leaving home and undertake such assessments and best interests decisions if required.

A specific example would be to consider Steven's capacity to consent to use a GPS tracker to reduce the possible risk if Steven were to leave his home in a confused and disorientated manner.



Reviews

Annual reviews need to be dynamic and offer flexibility. If it is identified that a reassessment is needed, this should be completed dynamically and without further delay, regardless of the organisational structure, to ensure that a customer is not left with an unmet need.

Technology Enabled Care / Assistive Technology

Professionals would benefit from having an awareness of Technology Enabled Care (TEC), how it can support people like Steven and how to access it.

Carers

Carers need to be identified and offered a carers assessment in a timely manner to address any concerns, and also be offered regular reviews.

Thankyou for taking the time to read this practice note. If you would like to provide any feedback or have any questions regarding the Board please contact: Lynne.Mason@Reading.gov.uk