

# 7-minute Learning Summary

## Reflective Practice – Drew



### Case Summary

Drew, a 65-year-old White British man, lived alone in Wandsworth with his cat. He had lost his brother and mother, which had a significant impact on the support available to him, and on his wellbeing. Though bedbound for the last year of his life, he wanted to stay at home with his cat, who was an important support and focus for Drew. He received five daily support calls from a care agency and some help from a neighbour.

Drew could be very challenging at times, and whilst he would initially establish relationships with staff, he was not always able to work in collaboration with them, refusing medication and other support. Despite this, the care agency had a remarkable rapport with him and remained positive in their engagement.

Sadly, Drew passed away in a fatal fire caused by a fault in his bed's panel board, which the London Fire Brigade's investigation ruled accidental, with no similar incidents found elsewhere.

The case did not meet the mandatory criteria for a Safeguarding Adults Review as his death was accidental and not a result from abuse and neglect, however the Safeguarding Adults Board felt there was multi-agency learning in risk management and robust application of mental capacity assessments which could benefit from a Reflective Practice review. Below are the findings and lessons from the session, aided by an external facilitator.

### Summary findings and lessons



1. **Multi-agency discharge planning and pathways** – could be more “joined up”.
  - Some misunderstanding and uncertainty about the pathways out of hospitals for people with complex needs and where responsibility sits between teams and agencies.
  - The risk of re-admission to hospital remained – more robust multi-agency risk planning was needed post discharge.
2. **Best interests and capacity assessments** – *Mental Capacity Assessments were completed, but it was at times unclear which specific decisions were being assessed. Different teams and agencies had differing views about the same issue. How well did partner agencies balance the issues on best interest decision and risk management?*
  - Early legal discussion and advice should be sought regarding complex risks and capacity.
  - Best Interest decision makers have the authority and responsibility to assess holistically whether any proposed restrictions are in the individual's best interests and proportionate to the assessed risks.
  - Risks were assessed, and mitigating plans put in place, however it is unclear whether these were developed in the context of other ongoing risks and in Drew's Best Interests.
  - Drew should have been considered as Priority 1 on the Community Deprivation of Liberty pathway, which is in place for people who live in the community and lack capacity to consent to their support, where they may be deprived of their liberty.
3. **How can individual agencies and the multi-agency approach support staff in managing these highly complex and risky cases?**
  - Encouraging and supporting early multi-agency working when complexity and risk is first identified.
  - Early sharing of information and encouraging open inquiry and challenge.
  - When convening multi-agency meetings around a complex case, staff should put effort to ensure that the right professionals are invited.