

Learning Report – Mr & Mrs Jones



What were the circumstances that led to this SAR?

- The subjects of this review are Mr and Mrs Jones, an elderly couple who became ill through chronic self-neglect.
- They were unknown to agencies apart from their GP and had been proudly self-sufficient and independent.
- Deteriorating physical and mental health adversely affected their ability to care for themselves and each other, material standards in the home also declined which contributed towards their ill health.
- They declined help and as far as possible, avoided the services which were offered to them.
- The couple became known to agencies following the hospitalisation of Mrs Jones following a fall.

What was the nature of the abuse?

- Self-neglect, there was no evidence of coercion by either party towards the other in regard to declining help.
- Increasing levels of physical frailty and confusion also affected their ability to care for each other.

What should you do?

Some good examples of positive practise were identified in this review:

- Agencies worked well together; communication was timely and effective between agencies in the community (GP, Social Care, Home Care Agency, Police, Older Adult Mental Health Team).
- Respect for Mr. & Mrs. Jones's wishes to be together at home.
- Shared strategy to engage Mr. & Mrs. Jones.
- Decisive action to undertake S42 Enquiry.

Lessons Learned included:

- There were several occasions, both in Hospital and in the community when both Mr and Mrs Jones were noted to be confused and this may have indicated the need for a formal assessment of their Mental Capacity.
- It would have been good practice to consider whether an Independent Advocate might be necessary.
- Mr and Mrs Jones had different needs and differing capacity in expressing them. Mr Jones was able to express his opinion of what was in his own and his wife's best interests, and for many older couples these may seem indivisible. However, it was clearly not in Mrs Jones's best interests to be cared for by her husband when he was incapable of providing the care she needed and obstructed the Care Plan.
- Working and supporting people who show a degree of self-neglect can result in conflict between professional values of rights to self-determination and a wider Duty of Care.
- When services fail to engage with individuals it would be useful to have a Multi-Agency discussion of the perceived barriers to engagement, with the aim of understanding why the service offer is not acceptable and what can be done to support their being better able to work with individuals.

Learning identified	What will help?
<p>Use of the Mental Capacity Act - while there is an awareness of these procedures comma they are not embedded in practice.</p>	<p>There has been a comprehensive multi-agency training programme in Worcestershire training programme ion the Mental Capacity Act, yet this review suggests that it's use is not embedded in practice.</p> <p>What would help would be the opportunity for agencies to identify experienced workers who can support those undertaking Mental Capacity Assessments.</p>
<p>Working with self-neglect.</p>	<p>Working with Self-Neglect is complex and sensitive work. The current guidance is long (and in the process of being reviewed) and a short aide memoir might assist practitioners in identifying thresholds and supporting people to change.</p>
<p>Following up missed appointments.</p>	<p>Failure to attend appointments may be evidence of further Self-Neglect and should be considered in that context. This requires good inter-agency cooperation and sharing of information.</p>
<p>The provision of advocacy.</p>	<p>The raising of awareness through training and supervision of the requirement to utilise appropriate advocacy, for example, the use of Independent Mental Capacity Advocates.</p>
<p>Acknowledging concerns from neighbours.</p>	<p>Although Mr Mrs Jones neighbours had no legal status or family connection with Mr Mrs Jones, they were the only independent source of information about what the couples day to day lived reality was like.</p> <p>The neighbours opinion could have been helpfully shared between agencies.</p>
<p>Convening a Multi-Agency Meeting.</p>	<p>All practitioners are reminded that they are able to convene a Multi-Agency Meeting to enable co-ordination of a plan of care and support to meet an individual's needs.</p>