

## APPENDIX 2

### PETERBOROUGH ADULT SAFEGUARDING BOARD SERIOUS CASE REVIEW OVERVIEW REPORT: *SUMMARY FOR PUBLICATION*

#### **What is a serious case review?**

1. The Peterborough Safeguarding Adults Board has a November 2008 protocol for undertaking serious case reviews. There is no statutory requirement to undertake such reviews but there is widespread acceptance in England that it is good practice to do so.
2. The Peterborough protocol identifies three purposes to be filled by a serious case review:
  - To establish whether there are lessons to be learned about the way in which local professionals and agencies worked together to safeguard a vulnerable adult;
  - To establish what any such lessons are, how they will be acted upon and shared across the wider health economy, and what is expected to change as a result; and
  - To improve practice and inter-agency working and better safeguard vulnerable adults.
3. The protocol also states that serious case reviews are not inquiries into how an adult died, or suffered injury, or who may be culpable.
4. The process of undertaking a review in Peterborough is:
  - The Safeguarding Adults Board's case review panel considers the case and identifies what needs to be looked at;
  - Agencies involved with the case are asked to write an independent management report about their agency's involvement;
  - The independent chairperson of the panel produces an overview report on behalf of the panel.

#### **The focus of the review**

5. Concern about an older person in Peterborough in autumn 2009 led to a serious case review in 2010.
6. The review process showed that some of the agencies involved with the older person since 2007 could have done better in some respects. The main areas for improvement were identified as:
  - Care management assessment and review by adult social care;
  - The direct payments arrangements;
  - Recognising safeguarding concerns;
  - Occupational therapy assessment; and
  - The approach by primary and community health care.

7. The review also highlighted that Housing Options' contribution was an example of good practice.

### **Recommendations from the review**

8. The overview recommendations of the independent chairperson of the panel were:

**9. Peterborough City Council (who are accountable for adult social care in the city) and the NHS in Peterborough should jointly ensure that:**

- i. Interpreters are used when it is important to communicate with service users who do not speak English;
- ii. Awareness of and sensitivity to cultural diversity enhances and does not detract from ensuring rigorous assessment, review and safeguarding by adult social services professionals;
- iii. The adult social services care management arrangements always result in a sufficiently thorough assessment – with a review of the care plan and the service user's needs at least once a year;
- iv. The direct payments arrangements have:
  - Effective monitoring and review of how the money provided is meeting the assessed social care needs of the individual; and
  - A well thought out assessment of risk that balances innovation and safeguarding;
- v. Adult social care staff, who assess, review and monitor, look for opportunities to speak with service users on their own and to gain their confidence, in order to best understand the service user's perspective;
- vi. Safeguarding arrangements always identify and respond to communication from other professionals about significant concerns about a vulnerable adult;
- vii. The occupational therapy service reviews the criteria for when someone needs a whole-person assessment;
- viii. GPs and nurses working in the community (for example, as district nurses or within intermediate care) consider whether this case has lessons about how best to ensure quality and continuity of health care for vulnerable older people; and
- ix. Adult social care staff, community nurses, occupational therapists and GPs, who serve the Peterborough community, operate as members of one integrated team that undertakes, for each individual service user (or patient), ongoing joint activity in assessment, care planning, service delivery and review.

**Gerald O'Hagan 10 January 2011**