		DHR	2014-Mary-Action P	lan				
Combined Action for George Eliot Hospital, South Warwickshire NHS Foundation Trust and A Warwickshire CCG								
Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress		
GEH and SWFT should jointly review the issues about discharge planning, referral systems and failures of inter-agency communication, which have been highlighted by this DHR. The review should aim to:  • Establish the facts of what actually occurred, including whether or not the referrals to SWFT (as stated in GEH's IMR and chronology) were in fact sent by GEH and / or received by SWFT.	Local	Joint meeting held with GEH and SWFT Safeguarding leads to establish facts	Michelle Norton Executive Director of Nursing at GEH and Kathy Wagstaff Safeguarding Adults Lead at SWFT	Referral data from SWFT	September 2017	On 28/02/16 a joint meeting was held with the Safeguarding Leads at both GEH and SWFT. At this meeting, it was established that the referral form located in GEH notes was for the District Nurse service and was faxed to the Virtual Ward –X. The referral was followed up with a phone call but was not allocated. This could have been due to a user error with the newly introduced GAP tool but this may never be ascertained for sure as there is no record of SWFT having received the referral. As a result, all referrals for community care should be made to the Integrated Single Point of Access, GEH to raise awareness of this to clinical staff.		
Having established the facts, to identify the root causes of no ICT service (now known as Community Emergency Response Team) being provided and the District Nursing service only commencing as a	Local		Michelle Norton Executive Director of Nursing at GEH and Kathy Wagstaff Safeguarding Adults Lead at SWFT					

		1			1	<u>,                                      </u>
result of a direct						
request by Peter,						
following Mary's last						
discharge.						
						COMPLETED
<ul> <li>Establish a multi-</li> </ul>	Local	CCG Safeguard Lead has	Michelle Norton	GEH and SWFT	01/04/2016	CCG Safeguard Lead has requested
agency action plan		requested this action be	Executive Director of	Safeguarding Meeting		this action be put on the agenda at
(for implementation		put on the agenda at	Nursing at GEH	Minutes		the GEH and SWFT safeguarding
by GEH, SWFT and		the GEH and SWFT	and			meetings.
any other relevant		safeguarding meetings.	Kathy Wagstaff			_
parties) to address			Safeguarding Adults Lead			
the root causes. This			at SWFT			
is likely to include						
work to ensure that						
that future hospital						
discharge plans are						
clearly recorded and						
agreed between GEH						
and partner health						
and social care						
providers, for services						
to be delivered within						
time frames specified						
in the discharge plan.						COMPLETED
						DHR action plans are now
This recommendation	Local	CCG Safeguard Lead to	XX			discussed at the safeguard
should be overseen by A		liaise with GEH and	Executive Nurse,			meetings held with GEH and SWFT
Warwickshire Clinical		SWFT and coordinate	A Warwickshire CCG			which the CCG safeguard lead
Commissioning Group, who		response and				attends. GEH and SWFT met in
should report to		subsequent reporting to				February 2016 and agreed that a
Warwickshire Safeguarding		the WSAB				Single Point of Access for referrals
Adults Board (SAB) on the						with regard to discharge planning is
findings of the GEH/SWFT						put in place. This is now the
review and on						process that is used and awareness
implementation of the						to clinical staff has been
resulting action plan. Lead						completed.
<u> </u>	•	•	•	•	•	

involvement by the SAB is indicated, as the issue of discharge planning is recognised as a wider safeguarding adults concern, rather than being specific to issues of domestic abuse or homicide, which would have indicated a lead role for the Community Safety Partnership (CSP).						
			Warwickshire Partnershi	<u> </u>	1	
Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress
To re-iterate within care planning training and via a learning alert across the Trust the importance of effective communication between professionals, services and agencies and the need for the patient and their experience to be at the centre of this where agencies hold differing views as to the source of the ill health	Local	Designated Lead for safeguarding to meet with Lead Nurses for Adult Community Services to ensure the context of the recommendation is understood and embedded as a core principle of clinical training packages delivered in CWPT.      Lead Nurses to review training	Designated Lead for Safeguarding	Feedback from lead nurses to confirm the	Feb 2016	The summary of the factors relevant to this DHR was shared with Service leads in March 2016 for consideration in the respective Integrated Practice Units. A further session on the relevance of personalisation and considering the needs of an individual was delivered by the Designated Lead for Safeguarding to the Service Development session of the all community leads in the Community Integrated Practice Unit on the 18th August 2016. (Further details on the specific factors of this DHR will be shared on publication of

		delivered to ensure this message from the recommendation is embedded in training.		principle is embedded in training.		the DHR) An evaluation of how personalisation and ensuring the client is at the centre of activities being taken forward is now being planned as part of the audit programme for the CWPT Safeguarding Team for 2016-2017.		
			George Eliot Hospital					
Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress		
GEH should further review the questions raised by this DHR (see section 3.6) about Mary's mental capacity to consent to treatment, during her admissions in May and June 2014 and the A&E attendance on 14 June. This review should consider whether or not clinicians worked appropriately and in line with the MCA Code of Conduct and Deprivation of Liberty Safeguards. GEH should advise the relevant CCG of the findings from this review and any action plan which may follow.	Local	MCA and DoLS training on mandatory framework for all clinical staff	Michelle Norton Executive Director of Nursing  Sally Wilson Safeguarding Lead	MCA and DoLS mandatory training since September 2015 and compliance reports available	90% Compliance by December 2016	This has been on the clinical framework since September 2015		
	A Warwickshire Safer Communities Partnership							

Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress
Key learning from this case should be shared and utilised within Warwickshire and more widely, with a specific reference to the key learning points relating to:  • Hospital discharge planning • Raising awareness about the needs of older and 'hard to reach' carers who may refuse help and / or go to considerable lengths to conceal the need for carer support services.	Local		XX Community Safety Manager, A Warwickshire Council		March 2016	This action will be taken up when the report is approved by the Home Office.
The CSP Chair should write to the Care Quality Commission (copied to the relevant Warwickshire CCG) drawing their attention to the findings of this DHR, with specific reference recommendations 1 and 2.	Local		XX Community Safety Manager, A Warwickshire Council		March 2016	Completed November 2017

South Warwickshire NHS Foundation Trust								
Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress		
As a response to this review awareness will be highlighted in the safeguarding adults training when it is reviewed in April 2015.	Local	Safeguarding training to be updated to reflect awareness	Kathy Wagstaff Safeguarding Adults Lead	Incorporated into trust training	April 2016	Incorporated into training in January 2016.		