Paulette SAR Family Statement

The following is a statement from Paulette's family, in response to the findings of the Safeguarding Adult Review. The views and opinions expressed in this statement are those of the family and do not necessarily reflect the views of the Haringey Safeguarding Adults Board or the agencies involved. The family's contribution to the review is embedded in the Safeguarding Adult Review report and has helped to shape the recommendations to be taken forward following publication of the report.

General observations of report

- 1. It is apparent that there was a lack of resources within the LA borough for people with complex medical needs such as Paulette's. The family feel strongly that where it is clear that needs cannot be met within the borough, the LA should be clear, open and transparent with families about this. It appeared that the family were on a wild goose chase trying to advocate for appropriate resources (both health and housing) that would meet Paulette's needs. Family expectations were falsely raised in relation to what could practically be provided to Paulette to support her needs within or outside of the borough.
- 2. Following on from the above point, the need for Paulette to have physiotherapy was identified as early as in 2019 and Paulette received intensive physiotherapy whilst in hospital between July and October 2019. On her discharge the hospital recommended a programme of exercise to continue to maintain her mobility. The family note the professional opinion that suggested that the decline in Paulette's mobility could have been attributed to the progression of her dementia. However in absence of evidence that this programme of exercise (or any exercise) was implemented by the Care Home it remains unclear if it was neglect or the progression of her dementia (or both) that was the cause of the loss of her mobility (and subsequently pressure area damage). The family believe that any learning should consider the need for agencies to be accountable for implementing advice/recommendations of other agencies such as health. There appears to have been a lack of a coherent professional approach to understanding and meeting Paulette's complex health needs. No one agency/professional appeared to have seen her needs holistically.
- 3. The Care Act 2014 sets out the statutory responsibility for the integration of care and support between health and local authorities. Local Authorities have statutory responsibility for safeguarding and in partnership with other agencies such as health, the police and housing, etc have a duty to promote wellbeing within local communities. It is apparent from the report the 6 core practice principles of Safeguarding outlined in the Care Act 2014, were not fully embedded in the practices of the agencies that were involved in the care and protection of Paulette. The family would like to be reassured that along with the recommendations of the report that there is reference to ensuring that these principles are fully embedded in practice throughout the LA borough. It is crucial that agencies work together and that there are systems in place that support this. Good practice guidance outlines that" it is

vital for effective safeguarding that system partners and professionals work with one another to achieve the best outcome for individuals, taking into account their full set of needs and wishes". This was crucial in Paulette's care in ensuring that she was safeguarded. The family feel strongly that there is a need to develop effective multi-agency partnerships that are embedded within the local authority safeguarding processes. These principles have been part of the legislation that guides adult safeguarding for some significant years and there should be no excuse given as to why these are still not embedded in the LA agency practices. The family feels strongly that this should be a priority for the LA.

4. As a family we cannot dispute that the pandemic restrictions made it even more challenging to achieve safeguarding for Paulette and many, many other vulnerable adults. The family do not doubt that health and wellbeing impacts were carefully assessed, and difficult choices made by agencies about going into care settings such as Paulette's, however, that said, we should not be complacent with identifying the impact of the pandemic restrictions as a reason for the multiple missed opportunities to raise potential safeguarding concerns in Paulette's case. This is because the pandemic and the restrictions that were implemented are the exact type of environment where, abuse, neglect, human cruelty, and other factors that can impact good physical and mental health, flourish. The care home doors were either closed or closely restricted to Paulette's family who would have naturally acted as that additional layer of protection to Paulette. The role of safeguarding in adult social care was probably never more critical in protecting the vulnerable like Paulette during the pandemic. It was even more important for those professionals that came into direct contact with Paulette to demonstrate a higher level of professional curiosity – the family feel that there were too many missed opportunities to raise concerns about possible abuse and neglect and a lack of professional curiosity. The report should recognise that the decision for professionals to replace direct contact with telephone calls and or virtual visits would have reduced the opportunity to monitor the level of care and safeguard Paulette.

Paulette's legacy must encompass safeguarding practice where:

- Professionals across a wide range of services collaborate and share information or concerns sensitively to prevent and address cases of abuse or neglect regardless of the setting.
- Lessons are shared across all LA organisations, through Safeguarding Adults Boards, that encourages and creates a culture of continuous learning and practice improvement.
- The 6 core principles of adult safeguarding are central to all agencies practices.
- Professionals are reminded of the need to demonstrate professional curiosity and the definition of adult safeguarding as outlined in The Care Act statutory guidance and that this should be central to their practice:

"Protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views,

wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear, or unrealistic about their personal circumstances".

Family Conclusion:

Safeguarding policies were devised specifically to protect people exactly like Paulette who had care and support needs that made her more vulnerable to abuse or neglect.

"A local authority must act when it has 'reasonable cause to suspect that an adult in its area (whether or not ordinarily resident there) has needs for care and support (whether or not the authority is meeting any of those needs), is experiencing, or is at risk of, abuse or neglect, and as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it." (Care Act 2014, section 42)