

Safeguarding Adult Review

7 minute brief Ruth and Daniel



1. The Care Act 2014

Section 44 of the Care Act 2014 stipulates that the Safeguarding Adult Board (SAB) has a responsibility to:-

- authorise the commissioning of a Safeguarding Adults Review (SAR). A review is required to be undertaken if the Board considers that there is significant learning to be gained across partner agencies.

2. Background

Due to the marked similarities of 2 SAR Referrals screened by TASPb in 2023, it was concluded that a themed SAR would be commissioned.

Two significant factors that these separate care scenarios share:-

- a vulnerable adult with care and support needs who lacked capacity (under the Mental Capacity Act) and could not generally communicate their needs or experiences
- a sole family carer who was providing a very intensive level of care and support, typically across a 24-hour period on most days.

3. SAR Themes

1. How the Best Interests of vulnerable adults without mental capacity (under the Mental Capacity Act) reviewed, particularly if the level of care they require changes or intensifies and/or they are entirely dependent on one main carer for their care needs?
2. How was independent IMCA advocacy or other advocacy utilised in these situations e.g. extended family?
3. How is dignity in care and quality of life considered for such adults?
4. How were Carers Assessments and/or ongoing observations of the care scenario used to inform professional judgement? e.g. medication management including non-adherence to prescribed medication, neglect of the home environment/hoarding considered by professionals
5. How do professionals judge when care by a family member may be escalating into neglectful or unsafe care – whether this is intentional or unintentional?
6. Is contingency planning discussed with carers and families, including their ongoing capacity to provide care safely/cope with the demands of caring?
7. What avenues are open to professionals and practitioners to raise or escalate legitimate concerns about carer capacity to continue to care, including proactive use of the safeguarding system?
8. To what extent did the availability of suitable 24-hour care for the adults influence or affect care?
9. When the main carer appears to obstruct access to the adult with care and support needs, what is expected best practice?
10. Is there any learning from this case about how to constructively challenge a carer's refusal of support

4. Good Practice

- In both care situations it was evident that some practitioners knew the care scenario well and understood the dynamics
- Practitioners recognised the pressure on carers and were proactive in their response
- Instances evident of practitioners advocating and referrals made to speech and language therapy to assist with communication abilities
- There was an evident acknowledgement of the importance of maintaining a good working relationship with the carer and professional to provide continuity for the family

5. Key Learning

- Safeguarding the needs and interests of vulnerable adults who lack capacity
- Assessment, support and intervention for lone carers managing very intensive care scenarios
- Balancing the needs and best interests of the adult with the carer's wishes/views in complex care scenarios

6. Recommendations

The SAR Report provides detailed recommendations that respond to:-

- Using the provisions under the Mental Capacity Act (MCA) and the safeguarding framework
- Assessment, support and intervention for lone carers managing very intensive care scenarios
- Balancing the needs and best interests of the adult with the carer's wishes/views in complex care scenarios

7. Learning Resources

Link to [SAR-Report-Ruth-and-Daniel.pdf](#)