Northamptonshire Safeguarding Adults Board

Learning from Multi-Agency Case Audit

Key findings and learning from Multi-Agency Case Audit – Mental Health – February 2021

The Purpose of a Multi-Agency Case Audit (MACA) is to review specific cases/themes to identify good practice, and to support professionals to adjust their working practice in light of the lessons learnt from the audit. MACA complements other activities outlined in the Northamptonshire Safeguarding Adults Board (NSAB) Quality Assurance Framework, such as single agency audits. Themes for MACA are agreed by NSAB's Quality & Performance Sub Group in line with the NSAB Strategic Plan.

MACA is carried out by way of a detailed audit where a case/cases is/are analysed in a meeting of key agencies.

Sharing Learning

Following the MACA, a detailed action log is developed that includes any recommendations for NSAB's Strategic Board (where appropriate). Progress is monitored via the NSAB Quality & Performance Sub Group.

This briefing summarises the key findings from the review and managers should discuss this with their teams to ensure that the learning is used to enhance existing good practice and to make improvements where necessary. Feedback will be sought from partner agencies via the NSAB Learning & Development Sub Group to ensure that the learning has been cascaded.

Multi-Agency Case Audit Referral

The referral concerned an individual who, following a recent unrelated incident, attacked his neighbour leaving the victim with life changing injuries. The offender is now subject to a hospital order.

Six agencies responded to the request to complete the audit and a meeting was held in February 2020 to discuss the audits.

The following agencies provided audits for this MACA:

East Midlands Ambulance Service (EMAS);
GP Medical Practice;
Northamptonshire County Council Adult Social Care;
Northamptonshire County Council Customer Service Centre;
Northamptonshire Healthcare Foundation Trust (NHFT); and
Northamptonshire Police.

Findings

Information Sharing

- Agencies should better understand the importance of information sharing with partner agencies.

Live Risk Assessment

- Agencies should consider how best to risk assess in real-time and to understand the potential severity of risk including:
  - The safety and protection of the adult at risk and others;
  - The pattern of pertinent events;
  - The balance of the right to independence against the likelihood of significant harm arising from the situation;
  - Assessment of mental capacity; and
  - The involvement of other colleagues and partners to gain a holistic approach to risk assessment.
- Two days prior to the incident, the individual had called the Police to report an energy beam was going through his body. This was referred to the Operation Alloy Team[1]. Op Alloy subsequently sent a non-urgent task (message) to inform the GP of this.

[1] Operation Alloy is a service provided by Northamptonshire Healthcare Foundation Trust (NHFT) in partnership with Northamptonshire Police to deliver triage to people experiencing mental health distress.

Findings

- During the incident the day prior to the attack, agencies undertook actions based on information provided at the time from the GP (who hadn't seen the patient for a number of years).

Timeliness of Safeguarding Notifications

Safeguarding notifications were not received in a timely manner.

Mental Health

- Whilst the GP was aware of the individual's historic mental health issues, no recent assessment/diagnosis had been made as the individual had not attended any mental health appointments.
- At the time of the incident, Northamptonshire Police were using Public Protection Notices (PPNs) to report safeguarding concerns and there was often a few days' delay in presenting these to Northamptonshire County Council's Customer Service Centre.
- Greater consideration could have been given regarding using police powers under section 135 and 136 of the Mental Health Act.

General Observations

- There was a lapse in timeline for this audit as the individual had a period living out of county.
- The GP informed EMAS that the patient had called the Police 2 days prior to the first incident and they tried to contact him without success.
- Paramedics contacted the Acute Mental Health Liaison team based at Northampton General Hospital but were informed that there was no one available to help at the scene but they would be happy to see the individual in the emergency department if the patient would travel and that the Police used their powers under the Mental Health Act section 135/136 if needed.
- Whilst police were using PPNs to report safeguarding concerns at the time of the incident, they are now using the countywide online safeguarding notification process, SA1.

Key Points for Learning

- Police officers and staff need more knowledge of Mental Health issues and an understanding of what actions can be taken when dealing with an incident at a time of crisis such as section 135 and 136 of the Mental Health Act. *Update from Northamptonshire Police:*
  - There is a now a two tier approach for police mental health training, namely; Mental Health Tactical Advisor training for those on Op Alloy, and "Time To Listen" training for all other officers.
  - Mental Health guides are also available via an App on police devices (including sections 135 and 136).
  - Police officers and staff have better access to Op Alloy operated with Northamptonshire Police and Northamptonshire Healthcare Foundation Trust and the Mental Health Hub is in now also in place.
  - This information will be communicated to Police officers and staff under the 'Operation Marvel' banner.
- There needs to be clarity about what responsibilities different agencies have in making a decision about whether or not to detain someone under the Mental Health Act.

Recommendations

1. The Quality & Performance Sub Group should consider how agencies can risk assess effectively in real-time and what tools could be used by frontline professionals such as Paramedics and Police officers at the point of mental health crisis.
2. The Learning & Development Sub Group should consider developing a multi-agency briefing session(s) using a real-time case study.
3. More information is needed about the mental health referral pathway. The Quality & Performance Sub Group should consider what information can be shared with the partnership including the Integrated Mental Health Hub.

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