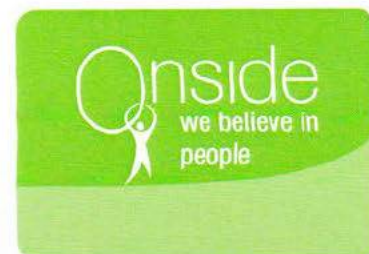


Mr C B [REDACTED]



28th November 2016

Dear Mr B [REDACTED]

Complaint re advocacy support provided to DB

Further to your letter of the 6th November 2016 setting out the complaint you wish to make in relation to B [REDACTED] S [REDACTED], IMCA Advocate.

I have now had an opportunity to carry out an investigation into the matters you raise. I have set out the key issues and my findings below.

1. The recording of Information concerning D and weight

I have investigated this element of your complaint through an examination of notes and correspondence and an interview with B [REDACTED] S [REDACTED].

As part of his role as a Care Act advocate B [REDACTED] looked at a number of issues. These included concerns expressed about D's weight and its impact on his health, as well as weight management approaches in relation to D's other health issues.

In gathering information relating to this B [REDACTED] spoke to the manager at H [REDACTED] House who provided the information that D had lost 3 stone in weight since January and this was subsequently included in B [REDACTED]'s report. B [REDACTED] did not substantiate this information through an examination of the Care Notes.

You are absolutely right to state that this information subsequently proved to be inaccurate and this came to light following an assessment carried out by the BIA where all records were examined.

B [REDACTED] completely accepts that this fact was wrong and that he relied on information provided by H [REDACTED] House that proved to be incorrect. He accepts fully that an examination of the Care Records would have provided the correct facts and that this should have been carried out. He is clear however that there was absolutely no intention to mislead or falsify information and the information was included in his report in good faith.

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Finding Your complaint that information regarding D's weight loss in the report written by B S was inaccurate is upheld. I am confident however that this was an error on B's part based on information that he believed to be accurate and was not an attempt to mislead or falsify information.

Action This matter has been discussed with B and he has accepted responsibility for the error. We will review training for all advocates and provide further guidance concerning the scope and requirements for examination of records.

2. Failure of B S to challenge or question, at the meeting of the 14th September, the rigid restrictions imposed on your brother D by H House

I have investigated this element of your complaint through an examination of notes and correspondence and interviews with B and with his line manager as well as a discussion with Ds Social Worker.

B believes that he appropriately raised a number of issues at the meeting on the 14th September in his role as Care Act advocate. These included issues relating to appropriate and comfortable clothing, the need for an assessment in relation to communication and the requesting of a medical review to address on-going health and medication concerns. He also raised issues related to home visits and contact with Ds family. These latter matters, while they formed part of the review, were related to B's original role as a Relevant Persons Representative. B made suggestions relating to family contact and Ds visits home and an approach was agreed that B suggested be reviewed after 3 months.

Ms G (Social Worker) is fully confident that B fulfilled his role as both a Care Act advocate and RPR satisfactorily and appropriately raised issues and concerns during the meeting. I also note that in a letter from you following the meeting on the 14th September you do acknowledge B's contribution and express your gratitude to B for supporting D at the meeting.

I am aware that you clearly continue to have on-going concerns relating to home visits and restrictions on D. In response to this B advised you in an email on the 3rd of October that if you continued to have concerns about restrictions placed on your brother and believe that his article 8 rights are being infringed or his liberty is being obstructed then you have the right to apply to the Court of Protection accordingly.

Findings I am satisfied that B appropriately advocated for D and acted in his best interests within the parameters of his role as a Care Act advocate and as an RPR.

Action To look at our current practice and ensure that we look on a case-by-case basis at the pros and cons of using the same advocate in two distinct roles. There are obviously some benefits to this as the advocate knows the person concerned and their situation but I believe that in this case it may have created some confusion around the scope and role of the advocate.

3.B■S■'s failure to report your concern about the documented misuse of medication administered to your brother D.

I have investigated this element of your complaint through an examination of the notes and an interview with B■. My understanding is that you yourself had already raised these concerns to professionals involved in your brother's care and support. They are included in notes you made in preparation for the meeting, headed up "D – Best Interest Concerns". As these concerns had already been tabled and noted B■ did not therefore believe there was a need for him to raise these matters separately. This matter was discussed at the Review meeting on the 14th September where it was stated that the GP did not have any concerns about the administration of medication by H■ House. B■ did however recommend that a medical review be carried out.

Findings I am satisfied that B■ acted appropriately. His role was to represent and safeguard the interests of your brother D and he was satisfied that you had already expressed these concerns clearly to professionals involved in the care, support and safeguarding of D.

Action No further action.


I am obviously very sorry that you have been dissatisfied with the service provided to your brother by Onside. B■ is a very dedicated and committed advocate, with high standards of personal integrity. He feels passionately about safeguarding the interests of people who, like your brother, are vulnerable and I believe that in this case he worked within the parameters of his role to achieve this aim for D. He is a very experienced and professional member of our IMCA team and is of course very sorry that there was a factual error in his report.

Thank you for raising these concerns. I can assure you that we are totally committed to providing a service of the highest quality and we take seriously any complaint and dissatisfaction expressed and look to learn from it.

If you are not satisfied with the findings outlined above then you may write to our Chair of Trustees and request that they review this investigation. Their contact details are set out below.

R■ A■
C/o Onside
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Yours sincerely


K■ H■
Chief Executive