

| Oldham Council ASC learning from working with MF | | | | | | |
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| Item | Learning | Key Actions | Proposed commencement date | Responsible Officer | Outcomes | Progress and Evidence RAG |
| 1. | <p><u>Participation in medical best interests' decisions under MCA</u></p> <p>Where Adult Social Care have a long-term role in a person's life, they will be considered interested persons to be consulted in medical best interest's decisions.</p> <p>Where the medical best interest decision constitutes:</p> <ul style="list-style-type: none"> a life changing decision or relates to article 1 and 2 human rights <p>Adult social care should prioritise attendance at any medical best interest</p> | <p><u>MCA Strategy</u></p> <p>7 Minute briefing to be created and disseminated across ASC re: Learning from the case of MF.</p> <p>Risk rating framework to support practitioners to make safe and informed decisions regarding attendance at medical best interest's meetings led by other organisations to be created and disseminated across ASC.</p> <p>Documents to be added to ASC SharePoint site as ongoing practitioner learning and guidance.</p> <p>Learning to be added to MCA theory to practice training,</p> | June 25. | <p>Head of Service for Safeguarding and Principle Social Worker</p> <p>Supported by:</p> <p>MCA and Safeguarding Lead</p> <p>Quality improvement Officer</p> | <p>Adult Social Care will consistently and effectively fulfil their role as interested persons in medical best interests' decisions.</p> <p>Adult Social Care will support partner organisations to make high quality best interests' decisions/</p> <p>Adult Social care will support the best possible outcomes for individuals subject to medical best interests' decisions.</p> | |

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| | decision meeting it has been invited to attend. | | | | | |
| 2. | <p><u>Information sharing regarding other interested persons</u></p> <p>Where Adult Social Care have commissioned a care provider for an individual subject to a medical best interest decision, the carers may also be considered interested persons to be consulted in medical best interest's decisions.</p> <p>When Adult Social Care are invited to attend medical best interests' decision meeting, they should share information with the organisation leading the best interest's decision process about the care provider, to ensure that they too can be invited to the best interest meeting.</p> | <p><u>MCA Strategy</u></p> <p>7 Minute briefing to be created and disseminated across ASC re: Learning from the case of MF.</p> <p>Risk rating framework to support practitioners to make safe and informed decisions regarding attendance at medical best interest's meetings led by other organisations to be created and disseminated across ASC.</p> <p>Risk rating system to include the need to consider if any information about other interested persons including care providers should be shared with the decision-making organisation.</p> <p>Document to be added to ASC SharePoint site as ongoing practitioner learning and guidance.</p> | June 25. | <p>Head of Service for Safeguarding and Principle Social Worker</p> <p>Supported by:</p> <p>MCA and Safeguarding Lead</p> <p>Quality improvement Officer</p> | <p>Information held by Adult Social Care on other interested persons will consistently be shared with partner agencies to support partner to effectively carry out best interests' meetings.</p> | |

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| 3. | <p><u>Tracking hospital admissions for people open to the specialist teams within Adult Social Care</u></p> <p>Where people are known to specialist teams within Adult Social Care, the specialist team need to proactively case track the hospital admissions for these individuals.</p> <p>Case tracking will support the responsible team to participate in effective multiagency working around the adult.</p> <p>This proactive approach will support:</p> <ul style="list-style-type: none"> • attendance at and participation in any upcoming best interests' meetings • effective hospital discharge planning. | <p>Learning Disabilities and Autism Team to assign responsibility for hospital discharge work to a named worker within the service.</p> <p>Named Learning Disabilities and Autism hospital discharge worker to proactively track people open to the team who are admitted to acute hospital and fully engage in multiagency working.</p> <p>Learning Disabilities and Autism Team to train duty workers to cover this role when the named worker is not available.</p> <p>ASC Mental Health teams to review how acute hospital admissions and discharges are managed by their area of service.</p> <p>ASC Mental Health Teams to ensure individuals open to their teams are appropriately tracked and full engagement in multi-agency working is in place from ASC re the hospital admission and discharge planning.</p> | June 25 | Head of Service for Learning Disabilities and Autism and Head of Service for Mental Health | <p>Specialist teams within Adult Social Care will have robust processes in place re hospital admissions and discharges.</p> <p>Specialist teams within Adult Social Care will be aware of any upcoming multi agency meeting for the individuals they support and be able to plan for appropriate attendances.</p> | |
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