ISLINGTON
For a more equal future

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By email only

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Dear Assistant Coroner Lee,

London Borough of Islington response to the Regulation 28 Prevention of future death report into the death of Derrick Frederick Tully (died 20 March 2024)

In response to the concerns raised in the Prevention of Future Death report, that states there was a failure by Islington Council Adult Social Care (ASC) and Housing Departments to consider a number of issues relating to Mr Tully's support and housing requirements. Islington's Council ASC and Housing Department have considered the report and have addressed the following elements under the headings provided in the report.

Islington Housing Options:
Award of Medical Points

Islington Council acknowledge that no medical points were awarded to Mr Tully. An email was received by the Housing Needs Team on 5 March 2024 from an NHS email address. The attachment to the email could not be opened. On 24 April 2024 a letter was sent to Mr Tully explaining that the attachment could not be opened and that no medical points had been awarded. A request was made for the information to be re-sent in another format. The information was not re-sent and there was no social care letter of support on the file. Upon subsequent investigation following receipt of the PFD report, it transpires that the attachment to the email dated 5 March 2024 included a 'Supporting letter for rehousing' dated 29 February 2024 from an OT who the letter head refers to as being within the Social Care and Rehabilitation Team (Incorporating Islington REACH), which is a part of Whittington NHS Heatlh Trust not the London Borough of Islington's Adult Care Services.

Islington council has a corporate deadline of 10 working days in which to respond to general correspondence. If this is not possible, officers should contact the sender to explain that there will be a delay in responding and inform them when they will provide a substantive response. That deadline was not adhered to in this case and as such the following action has been taken.

On 16 May 2025, Housing Needs Managers were asked to remind all officers, no later than by 27 June 2025, of the following:

1/ All staff should aim to respond to written correspondence within the council's corporate deadline of 10 working days. If this is not possible, officers should alert the sender of a delay in responding and inform them when they will respond to their correspondence.
2/ All communication in writing must be indexed to the resident's records/file.
3/ Any correspondence with attachments that cannot be read due to formatting issues should evidence attempts to contact the sender of the issue. The sender should be asked to resend any attachments in a readable format.
4/ If written correspondence is received by a Housing Needs Council officer that is relevant to another team in the service or Council, this must be passed on to the relevant team within 2 to 5 working days (maximum) or sooner. If an email is incorrectly received by a team and passed to the relevant team, the original email sender must be copied in to ensure they are able to follow the audit trail.

In addition to the guidance above, all Housing Needs Managers were also reminded on 16 May 2025 of the following:
1/ Housing Needs managers must carry out monthly file checks on a sample of cases that includes noting whether correspondence is responded to within the Council's corporate targets and if not, whether a holding response has been sent to the sender.
2/ All file checks should be recorded via the case audit logs appropriate for their team.

Once new medical information is provided regarding a resident, the Housing Needs Team aim to process the information within 6 weeks.

If the letter received on 5th March 2024 had been opened/read on time and a medical assessment had been conducted, it would sadly not have led to Mr Tully having been housed any sooner as he passed away within 15 days of receipt of the OT report. Regrettably, this is due to the severe shortage of social housing available in Islington.

Provision of a Key safe

The Housing Needs Team have been unable to evidence any requests made to the team for a key safe, by Mr Tully, his family or anyone involved in his care. If a resident, or anyone on their behalf, ask the Housing Needs Team about a key safe, they would be signposted or referred to a service that would be able to advise and assist further, such as ASC, Telecare or Age UK. As no such requests were made to the Housing Needs Team on behalf of Mr Tully, no such signposting or referral was undertaken.

Islington Adult Social Care:

Provision of a keysafe:

ASC acknowledge that there was no keysafe in place, when Reablement support commenced. Mr Tully was assessed as being able to provide access to the property. This assessment would have been made in the context of Islington Council's ASC practice model for promoting strengths-based practice and that Mr Tully had the mental capacity to make a decision about how he supported access to his property.

ASC have been unable to evidence repeated requests from Mr Tully's family for a keysafe as stated. Our records do highlight that on the 27 February 2024 the Reablement Team noted the potential need for a key safe. There is no documentation detailing the follow up to the 27 February 2024 record.

A key safe was also mentioned on the 20 March 2024 in a conversation between the Emergency Duty Team and Mr Tully's family when access to the property could not be gained, when he was later found deceased on this day.

ASC had, as part of Mr Tully's telecare arrangement, ensured that in the event of an incident, two family members were listed as emergency contacts to support access. These emergency contacts were contacted on a number of occasions when Mr Tully did not reply to the care workers at the door and had gone out.

Islington Council recognise the important role key safes can play in managing risk to individuals, as well the importance of resident consent, risk management and promoting independence and strength. In response to the PFD Notice Islington Council will inform the workforce through the Principal Social Worker the importance of considering access to people's property in the event of risk, as well as the importance of contingency planning. In addition, Islington Council will undertake a review of its Key safe Policy which will include the factors to be considered when deciding to install.

Islington Adult Social Services:

The PFD Notice states that the Coroners Court has determined that Derrick was not suitable for reablement because of his declining cognition and progressive dementia.

The decision to support Mr Tully move to Reablement was made by a Take Home and Settle case manager, on the basis that Mr Tully had no formal care previously and his family advised he was largely independent prior to hospital admission. Mr Tully's case records summarise a meeting held on the 12 February 2024, where the decision to refer to Reablement was made with his daughter present. The notes under a section headed 'Cognition' states that Mr Tully was able to communicate his views and wishes, this is also reflected in the referral to Reablement. Islington Council maintain that this was an appropriate decision and in line with practice and legal

requirements, which also include not excluding people with cognitive challenges from the opportunity to be supported by Reablement.

Reablement provides support, on a daily basis, with activities of daily living. Intervention can range from direct care delivery to confidence building and guidance with activity.

Adult Social Care records state that the Community Health OT from REACH (Whittington Health NHS Trust) who advised the ASC Single Point of Access Physio on the 28 Feb 2024 that the resident *'is likely an unsuitable candidate for rehabilitation due to his cognition'.* Rehabilitation is a different service offer to Reablement, with Rehabilitation considered a health service focussed on periodic clinical intervention to restore function, opposed to Reablement which is care led focussing on improving skills in activities of daily living. Section 22 of the Care Act 2014 prevents local authorities providing health services and to that end Rehabilitation.

Care was provided throughout the period from Mr Tully's discharge to his death, which included support with meal preparation. Mr Tully was considered to have the mental capacity to make decisions around his care and support needs.

In response to the coroner's findings, Islington does support its workforce through training, audit and the support of the principal social worker with the skills to identify issues relating to residents' cognitive abilities, their capability to identify risk and the management of that risk in line with the Mental Capacity Act 2005 and its principles. Islington Council will revisit this training in the light of the coroner's findings.

Daryel Care & Islington Adult Social Services:

Daryel Care were commissioned to provide support as part of the Take Home and Settle provision prior to Reablement. This support was provided to Mr Tully between the 2 – 22 February 2024. The Coroner's Report raises concern about the lack of reporting by Daryel Care of a fall experienced on the 20 February 2024.

It is ASC's understanding that Daryel Care was not requested to provide evidence to the coroner's court of their recording and reporting of the fall on the 20 February 2024. As part of ASC's response to the the PFD Notice, we have engaged Daryel Care who have provided their records. These evidence that on the 20 February 2024 at 19:12 *'Derek sustained an injury on his face. He said he had an accident when he went out. The injury was plastered. I prompted his medication from the medication box, and he asked me to leave'.*

The Assistant Coroner states in the PFD that the fall and subsequent bruising and swelling... 'was not recorded in his care notes by his carers and not escalated by Daryel Care...' however

the Coroners Statement and case notes shared by ASC with the Coroner do highlight that Daryel Care did report the occurrence of the fall to Adult Social Care on the 21 February 2024.

Reviewing the London Care Record, it is evident that London Ambulance Service attended Mr Tully's address on the 20 February 2024 at 9:47am and conveyed him to Whittington Hospital for treatment at Accident and Emergency. Health Professionals had already responded to Mr Tully falling on the 20 February 2024 and facilitated treatment, this is reflected in Daryel Care's reporting of the same day and will have determined their level of response.

Islington Council has a robust process in place to monitor the quality of care of our providers. We work closely with CQC and across the system to ensure a system wide approach. This is overseen by the Islington Provider Quality Oversight Board (IPQOB), which reports to the Senior Leadership Team within Adult Social Care and the Independent Adults Safeguarding Board.

The council undertakes an annual audit of home care providers. The audit is based on CQC Key Lines of Enquiry, which provides robust assurance around the suitability of providers who work with Islington residents. This includes reviewing the care plans, staff files and reviewing key policies to ensure that people are receiving a safe service in line with the standards.

The council leads quarterly provider forums with the aims of fostering a supportive learning environment to share, reflect and shape best practice across the sector. It's also an opportunity to hear from commissioning colleagues about any key trends, important information to share, including presentations from other areas to share learning. It is in this forum that commissioners share important information and key trends. The forum is supplemented by a regular provider bulletin, which provides updates and news stories that may be of interest to providers, as well as reminders of changes in regulation.

Contracts and commissioning colleagues work closely with safeguarding and operational social work teams to share intelligence about providers, to ensure a coordinated approach to decision making and agreeing the proportionate approach to address concerns. Operations colleagues submit "service issues" to providers where they have identified issues with an individual's package of care. The provider is expected to investigate and report back to the Council within 10 days. Service issues are a useful source of intelligence to identify if there are wider quality concerns about a provider. This process also enables general trends to be identified, which feed into provider forums to share learning that may be useful for all home care providers.

Where providers are found not to be performing well, the Council can enact its Provider Concerns Process. This process is supported by CQC who attend meetings. The process supports the provider to identify areas of improvement.

Further, it seeks assurances that these changes are embedded to ensure that Islington residents are receiving safe care. Where a provider is not assessed to be making the necessary changes to ensure a safe service, the Council may then seek to move individuals to another provider. This board reports to the Islington Safeguarding Adults Partnership Board so that the whole system can review and consider concerns, this has also helped refine the process to ensure we are effectively capturing and addressing concerns.

Integrated Community Aging Team, Whittington Health

Islington Council note that the Prevention of Future Death Notice requests that the Integrated Community Aging Team, Whittington Health NHS Trust, respond to the Coroners' concerns in that Mr Tully did not want to engage with their home assessment of him and that this was compounded by problems he'd experienced with neighbours and cuckooing concerns meaning that at times, he didn't feel safe at home. It does not appear that these were factored into his inability to engage with the team.

Islington Council feel it would be helpful to note that Safeguarding Concerns were raised on the following dates and by the following professionals:

05/02/2025 - District Nursing – Whittington Health

- The referral considers concerns about the noise from neighbours and the neighbour's property being a drugs den, impacting on Mr Tully's ability to sleep.

08/02/2025 - Whittington Hospital Staff

- The referral considers concerns about Mr Tully's ability to care for himself and the risk of falls. It does note the same concerns about his neighbours as highlighted on the 05/02/2025.

26/02/2025 - Whittington Hospital Staff

- The referral considers concerns about Mr Tully's ability to care for himself and the risks this poses to his well-being. The referral notes that Mr Tully is scared around other residents in the hostel, but no incidents had occurred. The Hospital at this time offered to admit Mr Tully however the referral suggests the family declined.

The concerns were considered in line with Islington Council's Safeguarding Policy, with none of the concerns being taking forward to a Safeguarding Enquiry. These decisions were made on the basis that Mr Tully was considered to have mental capacity to make decisions around his care, support and accommodation. Mr Tully clearly did not like living in the accommodation at that time due to the noise and the behaviour of other residents, however, he reported that there had been no direct incident and on two occasions reported that the alleged perpetrators had moved out. The concerns in relation to his care needs were being actively considered through ASC case management and he was being supported to consider alternate independent accommodation. I

hope this clarification is supportive in considering Whittington Health's response to the Prevention of Future Death Notice.

Adult Social Care recognise the importance of interagency working and sharing information in relation to people being supported in the community. ASC work closely with Whittington Health and will explore opportunities to improve these working relationships and information sharing through its integrated front door and integrated neighbourhood strategy. These programmes of work seek to consider people's referrals and needs more holistically, with health and social care staff working more collaboratively.

Islington Adult Social Care and Housing Department have considered the Section Regulation 28: Prevention of Future Deaths report and have identified several areas of learning that will be shared across the organisation. Should the Coroners Court wish to discuss any element of the response, then please contact Islington Council at the address above.
Yours sincerely,

Corporate Director of Health and Social Care
Islington Council