**EDINBURGH ADULT PROTECTION COMMITTEE**

OFFICIAL – SENSITIVE – PERSONAL

**LEARNING REVIEW NOTIFICATION**

Send completed Learning Review Notification forms via email to public.protection@edinburgh.gov.uk. You can also attach a single-agency Chronology.

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| **Request from:** |  |
| **Contact details:** |  |
| **Agency:** |  |
| **Date completed:** |  |

Any member of a Public Protection Committee, agency or practitioner can ask for a case to be considered for a Learning Review if they consider it meets the following criteria:

Any member of a public protection Committee, agency or practitioner can ask for a case to be considered for an Adult Learning Review if they consider it meets the criteria below or in appendix 1.

An Adult Learning Review Notification should be submitted for anyone over the age of 18.

For those aged 18-26 who are care experienced or in receipt of throughcare, aftercare or continuing care at the time of the incident(s) which triggered a Learning Review notification, a Child Learning Review Notification should be completed.

Which criteria for holding an Adult Learning Review do you consider apply in this case?

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| Criteria for Learning Review (please complete all criteria): |
| Which criteria for holding a Learning Review do you consider to have been met? |

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| **Criteria 1 – Person Subject to ASP and the incident or accumulation of incidents gives rise for reasonable cause for concern about how professionals and services worked together to protect the adult from harm, and** |
| **Person has died** **Criteria 1.1** | Person has not died but believed to have **experienced serious abuse or neglect.****Criteria 1.2**  |
| **Criteria 2 – Person Not Subject to ASP but…** | Has Died | Has not died |
| Reasonable **cause for concern** about lack of involvement / application of ASP**Criteria 2.1**  | There may be **learning to be gained****Criteria 2.2** |

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| NB. In the above section the person referring might consider both criteria 2.1 and 2.2 are relevant |

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| Immediate and General concerns: |
| Are there any immediate concerns? If yes:* What are the immediate concerns and have these been passed to the relevant agency for consideration/action?
* What action has been taken?
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| Have any general concerns been identified during this process of notification? If yes:* What are these general concerns and have they been passed to the relevant agency for consideration/action?
* What action has been taken?
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| Summarise the areas of concern / reasons that lead to the view that a Learning Review is or might be necessary? |  |

Where the referring agency or individual considers that a case meets the criteria above, they should complete and forward this Learning Review Notification form via email to public.protection@edinburgh.gov.uk

If the referrer wishes, they can discuss the case with the Adult Protection Lead Officer prior to submission: kieren.mcgrotty@edinburgh.gov.uk

The decision about whether a Learning Review will be undertaken will be made by the Adult Protection Committee’s Learning Review Panel after information from services/agencies/individuals who are/were involved with the adult has been gathered and considered.

**Information For Consideration of Learning Review**

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| Adult’s details: |
| Adult’s name/identifier: |  |
| Adult’s date of birth: |  |
| Adult’s date of death (if applicable): |  |
| Adult’s home address: |  |
| Adult’s current/last residence (if different): |  |
| Adult’s gender: |  |
| Please include key additional factors such as disability, ethnicity, religion: |  |
| Is/was the adult subject of any statutory powers at time of concerns arising in relation to Adult Support and Protection, Adults with Incapacity or the Mental Health (Care & Treatment) Act? *(Guardianship Orders, POA’s, Appointee’s, ASP Orders, ASP Plans / Activities)* |  |
| Contact details for any Guardian or Power of Attorney, if known:  |  |
| Contact Details for RMO (Responsible Medical Officer):*(under the Mental Health (Care and Treatment) (Scotland) Act 2003* |  |
| Contact Details for Named Person: *(under the Mental Health (Care and Treatment) (Scotland) Act 2003* |  |
| Carers’/next of kin details: |
| Names and DOB of Adult’s carers/next of kin: |  |
| Address if different to Adult’s: |  |

In case of more than one person for whom a Learning Review should be considered, please repeat or amend the relevant rows in the table above, making sure to present the information in a clear manner, with adequate differentiation (e.g. using Adult 1 or Adult 2 or Initials).

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| Parallel processes  |
| Are you aware of any parallel processes for any other type of review being undertaken for this case? If yes, please give details: |  |
| Are you aware of any criminal proceedings being undertaken in connection with this case? If yes, please give details: |  |
| Are any other local authority/health board areas involved with the adult?  |  |

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| Date of significant incident: *(if applicable, for example this might be the date of death or another significant event)* |
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| Brief Summary of the case: *(An objective account, please do not copy and paste case notes), please consider using initials to anonymise the summary)* |
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| Summarise key points / interactions of concern etc that have led to the conclusion that a Learning Review is or might be necessary: |
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| Is any call for information required? | **Yes**  | **No** |
| Police |  |  |
| Health |  |  |
| Social Work  |  |  |
| SFRS |  |  |
| Contracts |  |  |
| Care Provider |  |  |
| Housing |  |  |
| Other |  |  |

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| Name of service/agency/individuals involved with the person:  |
| Service: | Role with the Person:  | Practitioner name and title: | Contact details: |
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**For office use only:**

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| **Date LRN received** | DD/MM/YYYY | **Any other information**  |  |
| **Date LRN screened by LO** | DD/MM/YYYY | **Date of LR Panel** | DD/MM/YYYY |

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| An Adult Protection Committee will undertake a Learning review in the following circumstances:1. Where the adult is, or was, subject to adult support and protection processes **and the incident or accumulation of incidents gives rise for reasonable cause for concern about how professionals and services worked together to protect the adult from harm, and one or more of the following apply**:(i) The adult at risk of harm dies and:* **harm or neglect is known or suspected to be a factor in the adult's death**;
* **the death is by suicide or accidental death**;
* **the death is by alleged murder, culpable homicide, reckless conduct, or act of violence**.

**OR**(ii) The adult at risk of harm has not died but **is believed to have experienced serious abuse or neglect**.2. Where the adult who died or sustained serious harm was not subject to adult support and protection processes(i) When the findings of an inquiry or review by another organisation or court proceedings, or a referral from another organisation **gives rise to reasonable cause for concern about lack of involvement in relation to the Adult Support and Protection (Scotland) Act 2007****OR**(ii) The Adult Protection Committee determines **there may be learning to be gained through conducting a Learning Review**.Source: [National Guidance for Adult Protection Committees Undertaking Learning Reviews (2022)](https://www.gov.scot/publications/adult-support-protection-learning-review-guidance/) |