Quality Compliance Systems
AN RLDatix COMPANY

REAL STORIES FROM SOCIAL CARE

SHEENA

Dementia Nurse Specialist

Some years ago, a family member approached the person in charge to say that £5 was missing from her mother Rose's (name changed) purse. Rose was a resident in a specialist dementia care unit in the UK. She always liked to keep a small amount of money in her handbag, which she carried everywhere each day.

In case the £5 note had been misplaced, searches were carried out, drawers, cupboards, pockets, laundry and waste bins were checked, and the money could not be found. The service manager replaced the lost money, but a week later, Rose's daughter reported £5 was once again missing. The same procedure was followed and the police service was informed. The following week, the same concern arose a third time, and again, Rose's money could not be found. Once more, the home covered the loss, and replaced the £5 note.

A few days later, I was passing Rose's door. It was open, and in that moment, I observed Rose handing a £5 note to the visiting Catholic priest. In the moment, Rose was doing as she had always done throughout her life - reaching for her purse when the priest came visiting. However, just minutes after the priest had left, she was no longer able to recall his visit. It was also apparent that Rose no longer understood



the value of her donation and could not could not distinguish between banknotes of different denominations.

A capacity assessment and care planning review was undertaken in relation to Rose's ability to manage money and make charitable donations. A meeting involving Rose, her daughter, the named nurse, key worker and

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the person in charge agreed a consistent approach that balanced Rose's right to donate to the Church as she had always done with protection from financial risk.

A capacity assessment was undertaken in relation to Rose's ability to manage money and a best interests decision was made in line with the Mental Capacity Act 2005. A meeting involving Rose and her daughter, her named nurse, key worker, and the person in charge agreed a consistent and least restrictive approach that balanced her right to religious expression with the need to protect her from financial risk.

A small agreed donation was prepared and documented in accordance with the home's financial procedures. During the priest's weekly visit, staff supported Rose by providing her with the agreed donation in an envelope marked with his name, so that she could hand it herself to him. The priest was informed of the agreed process to ensure transparency and to safeguard all parties from any potential misunderstanding or concern in relation to financial abuse. This approach maintained Rose's dignity and right to give a donation as an intrinsic part of her spiritual life, and prevented further concerns about missing money.

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