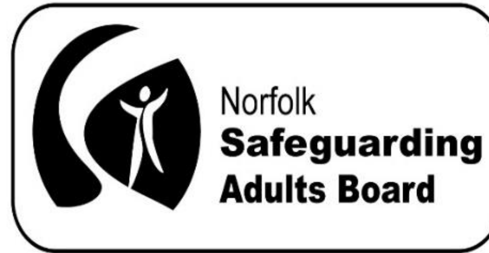
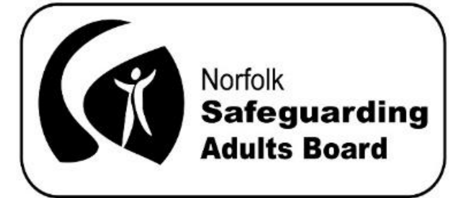


DHR Daisy

Published February 2022

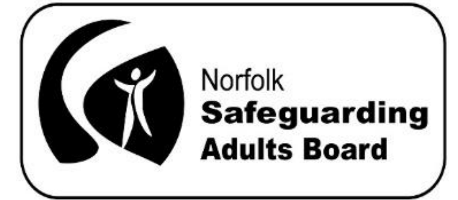
Presentation for Norfolk's multi agency Locality Safeguarding Adults Partnerships (LSAPs) March 2022

DHRs



- A Domestic Homicide Review (DHR) is a locally conducted, multi-agency review of the circumstances in which the death of a person aged 16 or over has, or appears to have, resulted from violence, abuse or neglect by a relative, partner or member of the same household.
- DHRs were established on a statutory basis by the Domestic Violence, Crime and Victims Act 2004, and those in Norfolk are completed by the Norfolk County Community Safety Partnership (NCCSP).
- Until this year they were published on the NSAB website, but they are now on a dedicated page https://www.norfolk-pcc.gov.uk/who-we-are/community-safety/domestic-homicide-reviews-dhrs/published-domestic-homicide-reviews

DHR Daisy



- “Daisy” was aged 89 when she was killed by her husband Richard (81) in 2019.
- Daisy and her husband were known to be a devoted and caring couple, who wished to maintain their independence and privacy for as long as they could
- They lived and had been active in their Norfolk village for over 40 yrs, they had both worked and travelled abroad regularly especially in their retirement
- Close friends describe Daisy and Richard as a devoted and very independent couple who over the years lived a more insular private life
- They had no children or close family – in the review 2 close friends were involved; and while Richard had an adoptive brother (who was included in the review) they had not been in contact since 2002

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- Daisy had many health issues including multiple sclerosis (MS) which was diagnosed in her 40s; also arthritis leading to joint replacements, asthma, heart and lung problems, chronic pain, frequent UTIs
- These had more of an impact as she got older, increasing her frailty and reducing her mobility
- Richard was her main carer, doing meals, housework, shopping and her personal care; but he had his own health needs too, which also increased as he got older, making it harder for him to care for Daisy

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- In early 2018, she had a fall and a brief admission to hospital - the ambulance crew who attended referred to Adult Social Care with safeguarding concerns about how the couple were managing
- Social work assessment took place alongside occupational and physio therapy – carer stress was identified rather than safeguarding
- Equipment was arranged – however no physical care or carer's assessment was arranged
- In June 2018 Daisy had a hip replacement, but in planning for discharge she declined any carers coming in to their home, saying they could manage between them

- In Feb 2019 she fell out of bed in the night, and Richard called 999 saying he was struggling to manage; this led to GP contacting Norfolk Escalation Avoidance Team who in turn arranged Norfolk First Support to go in the next morning
- A few days later she fell again and went to hospital where her needs were assessed and a full care package plus extra equipment organised; hospital staff did raise concerns about how well either Daisy or Richard would manage as they seemed to have difficulty retaining and understanding information
- Back at home carers went in x3 each day, and community nurses gave regular support around pressure care, fluid intake and catheter care

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- In April 2019 she had another fall and her mobility now so poor that Daisy was solely cared for in bed; she was offered physio but declined – she had lost confidence in the equipment and chose to stay in bed
- May 2019 GP spoke with both Daisy and Richard; Richard was worried that nothing was being done to make Daisy better, but also seemed to have forgotten previous conversations. Daisy had been offered morphine for pain relief but refused
- Ambulance crew raised another SG concern on a visit because she was in dirty clothes and lying in a wet bed – but when Daisy was telephoned she said she was fine and didn't need any more care – however double up care was noted as being needed

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- In late May Richard rang 999 as Daisy's breathing was very bad, and she was confused; she went into hospital, where after a week's treatment she was much more alert – although worried about how Richard would look after her – "she felt Richard was scared at the prospect of managing in the future"
- Richard met with a financial assessment worker to complete paperwork about care charges; they had concerns about his confusion and memory, but he refused any other services or support around finances – the hospital SW was alerted

- On 1 June 2019 she reported being low in mood and stated she was "only sticking around for my husband". Daisy is also recorded as saying she was "waiting to die". It was noted that she 'showed minimal understanding of her care needs but does appear to have capacity. Would prefer to return home with the care required to support this'.
- The care needed could not be found immediately, and so 4 weeks respite was arranged; they reluctantly agreed but health and care staff were concerned that Richard did not fully understand Daisy's needs
- In respite, from 26 June, Richard visited Daisy every day, and generally there were no concerns

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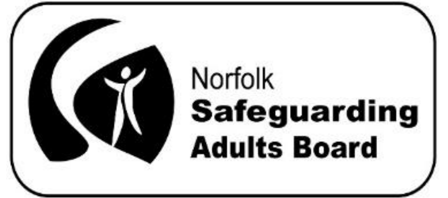
- However, at one point Richard approached a member of staff with a letter for a hospital appointment for Daisy for which he wanted her to book transport. The member of staff said she could not make the arrangement as it was past Daisy's discharge from respite care and so she would hopefully be home by then. Richard then raised his voice and said, "she is not coming home".
- Then in July 2019, very shortly after one of his daily visits, staff found her dead in her room – she had been strangled and had rat poison in her mouth
- Richard was later arrested in his car and found to have ingested rat poison. He maintained that he and Daisy had a suicide pact
- He was initially charged with murder, but at the trial in Jan 2020 he was found to lack capacity to go through the process due to dementia, and was instead sentenced to a Hospital Order under the Mental Health Act

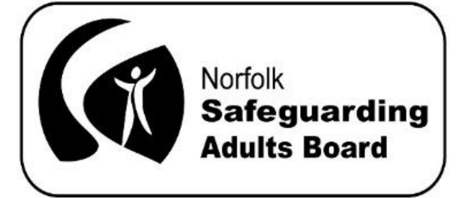
The DHR



- The review was completed in September 2020, but the criminal proceedings, pandemic, and Home Office review impacted on final publication date
- 9 different agencies were involved, as well as 2 close friends and Richard's brother by adoption, who had had no contact with the couple since 2002

- It was clear that no evidence of domestic abuse was found – the review stated "Richard's actions in killing his wife of many years appear to be out of character and to have been affected by his advancing dementia which had gone unrecognised until he was diagnosed during criminal proceedings."

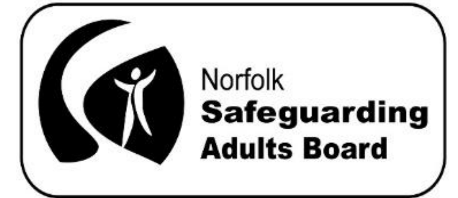
The DHR



- The review did highlight the necessity for professional curiosity and assessment in recognising carers, carer stress and the mental well-being of carers and the cared for - particularly in this case where the physical frailty of a carer limits their ability to look after a loved one

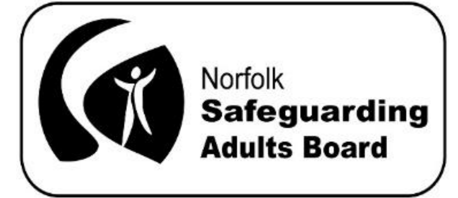
- It raises the question of the status of carers and older members of our communities, and how they are valued by services and society

The DHR - lessons



- Carer stress not recognised and assessed – Richard never had a carer’s assessment
- Carer status – the importance of recognising carers – especially where they don’t recognise themselves as carers
- Need for co-ordination where multiple or complex needs exist – e.g. MDT review
- Psychological well-being of those with life-limiting illness and their carers – in this case there had been no specialist MS review / support

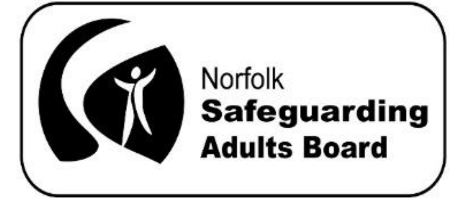
The DHR - lessons



- Recognising signs of dementia – Richard was only diagnosed through the criminal justice process
- Information sharing and record keeping – including referrers requesting feedback if they haven’t heard anything

- Other thoughts?
- How do we balance autonomy & right to a private life against prevention & protection?

More information & support



- Domestic Abuse | Norfolk Safeguarding Adults Board
- Norfolk's Domestic Abuse Services (norfolksafeguardingadultsboard.info)
- Home - NIDAS (createthefuture.live) (Norfolk Integrated Domestic Abuse Service)
- Published Domestic Homicide Reviews for Norfolk County (norfolk-pcc.gov.uk)