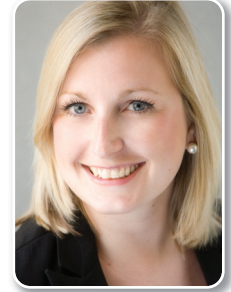


Undue influence – spot the signs



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Care home staff have an important role to play in safeguarding their residents from undue influence. Beneficiaries of wills often feel that their deceased loved ones may have been influenced while making their will, so that on their death it no longer represents their wishes. It is important that care home staff spot any warning signs and support their residents to manage risks.

Undue influence occurs when the deceased's decision-making process in making the will is undermined by the influence of another person, which ultimately leads to the will being declared invalid. It is notoriously difficult to prove because it's impossible to know what someone – who is no longer around to tell you – was thinking when he or she made their will. Often, proving that undue influence has occurred will come down to the testimony of a witness. In this respect, courts often hear people who have knowledge of the relationship between the deceased will-maker and the person who is alleged to have exerted the undue influence – this could include care home staff.

If a care worker suspects that someone in their care is being unduly influenced they should suggest that the testator seeks

professional guidance from a solicitor, as in some scenarios it may even be a criminal matter. It is also important to note that undue influence cases can be brought while the person thought to be influenced is alive, so it is important to look out for signs of a controlling relationship and advise accordingly as soon as possible.

In the case of *Edwards v Edwards* [2007], the deceased had initially executed a will leaving her residuary estate in equal shares to her three sons, before making a new will leaving her entire estate to her third son shortly before her death, despite not being particularly close to him. In this instance, the deceased was removed from her nursing home (against medical advice) and taken back to her home, where the aforementioned third son attempted to persuade her to alter her will, leaving everything to him. The Judge asserted that there was “no other reasonable explanation” for the deceased's behaviour other than her mind had been deliberately poisoned by her third son and he concluded

that the deceased had been unduly influenced.

Many elderly people who fall victim to such abuse are usually brainwashed so effectively by their abusers that they deny being coerced to change their wills in any capacity. Signs to look out for are:

- Actions that are inconsistent with past longstanding beliefs and values
- Sudden changes in financial management with regards to one specific person
- Isolation from close family and friends
- Power imbalances in relationships and severe mood changes.

Equipping employees with the tools to spot potential cases of undue influence will ensure that the needs and demands of those within their care are met far more effectively. If any of the above signs become prevalent it is important that a professional is brought in to ensure the situation is addressed. **CT**

Visiting care home residents – the good and the bad

For many care home residents, visits from family and friends are a special time – possibly the highlight of the day and regular contact and visits from significant others should be encouraged by care home workers. However, visits can sometimes be problematic and it is important to be aware of the rights of residents should any visitors cause a disturbance. Understanding and safeguarding their rights can help secure their mental, emotional and physical well-being.

Supporting social health

Frequent and sometimes unannounced visits from family and friends are valuable to residents of care homes, making them feel loved, remembered, and appreciated. Knowing there is someone who is concerned for their health and happiness can go a long way towards improving their self-worth. People are social beings and many of us gain a great deal of pleasure from socialising with others. Indeed, research indicates that increased family involvement and social engagement in care homes is associated with positive psychosocial outcomes and decreased mortality, infection, and hospitalisation. For

some residents, social engagement can even facilitate discharge to the community.

Dealing with feelings of rejection

Residents can feel neglected when they are first placed in a care facility, especially if they either receive no visitors or the visits are less frequent than they would like. This becomes particularly painful when they see other residents receiving regular visitors. Providing a distraction for these residents is paramount, and activities organised by care staff can lessen the sting of rejection and lift spirits. Exercise classes, a community garden project, or caring for a resident pet, are some ideas. Don't assume all residents who aren't receiving visits will need consoling, however – sometimes the visitors of other residents contribute to the social well-being of those residents not receiving visits.

Unwanted guests

Some residents might receive unwanted visits from demanding relatives, which can make them anxious and depressed. This can place care staff in an awkward situation as their concern is for the well-being of the residents, but their involvement can be resented by visitors. It is the residents' prerogative to decide who can visit them and for how long.

Sometimes an unwanted visitor will respond

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when care staff explain the harm their behaviour is causing and will cooperate by either changing their behaviour or limiting the length of their visit. If they remain unruly and unresponsive, however, a warning or restraining order can be initiated. This action needs to be carefully considered, as limiting access can put care homes in violation of the law. Furthermore, the resident may resent the loss of social interaction, even if it was causing them distress.

In the main, most residents look forward to visits from family and friends and care staff can't attend to all of a resident's social needs, especially if the facility is understaffed. Indeed, visits are a vital component of health and well-being and a consideration of visits – or lack of – should be incorporated into individual care plans. **CT**

■ *Dr Nicola Davies is a psychologist and writer*