Practitioner Learning Brief
Safeguarding Adults Review (SAR): John

2017

John's mother moved to her own accommodation in 2017, and John was rehoused in a series of properties where he reported anti-social behaviour and thefts. John's alcohol use led to falls, injuries and illness, and concerns about his welfare led to nine safeguarding referrals to the local authority.

He caused noise nuisance to his neighbours leading to the risk of eviction, but was also vulnerable to the criminal and anti-social behaviour of others. He was unable to maintain either his own personal care or his home environment, and at one point had a reablement care package, which was ended as he often cancelled care.

Background

- 50 years old male with two sons living overseas
- successful and varied career
- trauma led to mental ill-health and heavy drinking
- alcohol use resulted in care and support needs
- lived with his mother until behaviours posed risk to her safety

2018

John has frequent contacts with emergency services and regular attendances at A&E, together with involvement with social workers and his domiciliary care agency. The relevant district council and housing partnership continued to receive regular reports of John's anti-social behaviour, whilst John complained about noise and alleged crimes by another neighbour.

January - September 2019

During the first four months of 2019 John had no contact with police, but between May and July concerns were raised about his driving while intoxicated, culminating in his arrest, and then further arrest for failing to attend court. He had only two contacts with the ambulance service in this period.

The supported hospital discharge and admission avoidance service assessed John's needs for urgent help in September. John had no allocated social worker during this period, but he did have some contact with Adult Social Care (ASC) in January. The district council and housing partnership continued to receive regular reports of John's noise nuisance and began the formal process to evict him.

October & November 2019

In the last two months of John's life his mother became increasingly worried for his welfare, and called the police, GP and Adult Social Care asking for help.

Although John's neighbour continued to report noise nuisance, the emergency services were not called out due to injury or John's calls for help. John had involvements with the district council and housing partnership as the process of eviction continued, leading to a safeguarding referral in November 2019; the criminal justice process also progressed in relation to John driving while intoxicated.

John also had some contacts with his GP, and a drug and alcohol service, and his mother contacted ASC several times. John was last heard of being alive on 14th November 2019, and on 22nd November police found John, deceased, in his property.
John was in a state of decomposition and the cause of his death has since been certified as alcoholic liver disease. John was only 50 years old when he died.

Click here to view the recommendations from this review, which have been themed alongside 5 other concurrent reviews

9 contacts with ambulance services

31 safeguarding referrals in the last three to four years of John's life

45 times John had contact with the police

6 areas for improvement that were identified:

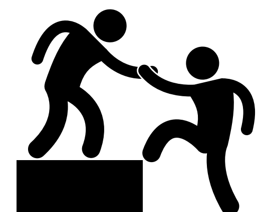
1. Building effective partnerships and improved information-sharing between professionals and individuals; and between professionals, agencies and systems.
2. Practice approaches and services that are built on the understanding of the impact of intersectional complex factors such as trauma, substance misuse, mental health issues, homelessness and criminal justice.
3. A personalised, empathetic approach to commissioning, which considers flexibility and innovation in service delivery, in order to maximise intervention opportunities.
4. An effective service delivery framework that is able to accommodate complexity and provide targeted support.
5. Recognition of the importance of carers; the need to engage and communicate effectively with them, and to offer support to them, in their own right.
6. A system that can respond in a coordinated way when urgent concerns about a very vulnerable person have been raised.

Good Practice:

There are examples of positive practice both in inter-agency collaboration and in hearing John's mother's concerns.

These examples are characterised by good existing working relationships, and positive attitudes to listening and offering support.

It is therefore essential that positive, proactive relationships are built between all agencies involved in supporting people with complex needs and their carers, supported by empathy and a commitment to helping people achieve change for the better.



Essex Safeguarding Adults Board