Safeguarding Adult Review Learning Brief – Adult P

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Case Summary

Following complaints from the public about Adult P's behaviour, Police Officers attended his home address and found that Adult P, who had previously suffered and addressed alcohol misuse, had relapsed and began to misuse alcohol again. Adult P was found to be living in very poor home conditions and neglecting his needs. He told professionals that his mental health was deteriorating and on occasion he reported feeling suicidal.

Upon receipt of a safeguarding referral the Multi-Agency Safeguarding Hub referred Adult P to mental health services which triggered the commencement of an initial assessment.

In the meantime, Adult P attended the hospital Emergency Department on several occasions under the influence of alcohol and feeling unwell. On all but one occasion, he left the hospital before being seen.

Within six weeks of professionals learning of Adult P's decline, a neighbour reported a concern having not seen him for a while. Police officers attended the address and sadly found Adult P's decomposed body.

The review highlighted several key themes and areas of learning which are explained below. It is anticipated that a copy of the SAR report will be made available on the LSAB website.

Key Themes and Learning Points

Covid:

Adult P did not cope well with the pandemic lockdown and cited the social isolation as a factor contributing to his return to alcohol. Staff assessing the subsequent safeguarding referrals found themselves, due to the pandemic, working remotely from their homes. This resulted in a reduced level of engagement with partner agencies, and staff, isolated from members of their own team, found themselves without the reassurance that working alongside colleagues and supervisors brought. Although not conclusive, referrals may have been treated differently if staff assessing them had been able to discuss the content with other professionals in the multi-agency office.

Multi-Agency Safeguarding Hub Referral Processes:

The safeguarding referrals informed that the concerns surrounding Adult P's neglect mainly stemmed from alcohol misuse and mental health concerns. Consequently the Multi-Agency Safeguarding Hub referred to mental health services. Had a referral also been sent to Adult Social Care, additional support would have been offered in a timely manner.

Recognising and Addressing Dual Diagnosis:

Identification of dual diagnosis is hindered when a person presents with acute intoxication but once a dual diagnosis is established there are robust multi-agency arrangements in place to support individuals. The timeframe and rapid escalation of Adult P's circumstances, did not allow for his dual diagnosis to be progressed through the mechanism.

Understanding the Mental Health Act / Mental Capacity Act:

Adult P left the emergency department before being treated on several occasions. There is no clear record of how his mental capacity to make decisions about his healthcare was determined. Good, safe record keeping would demonstrate how a conclusion about capacity has been reached.

The Mental Health Act sets out a comprehensive scheme for admission of non-compliant patients. As such it could have also been considered to support an assessment of Adult P's mental state and risk of self-harm, but

because there are limited holding powers within an Emergency Department setting, it would have proved difficult to have held Adult P had he been intent on leaving before a mental health assessment had been completed. Professionals from most agencies reflected honestly that they would welcome further training around mental health and capacity, particularly regarding capacity and alcohol.

Alcohol Dependency:

Dependency is classified as a medical condition but despite modern-day health care professionals starting to study and understand it, some of society appear to continue to view people who are alcohol dependent with disdain and blame. Any unconscious bias from the public or professionals towards individuals under the influence of alcohol who are being abusive, disruptive or presenting as unkempt, is understandable but needs addressing.

Professional and Public Knowledge of Available Support

A member of Adult P's community expressed a concern for him to police officers and contacted some charities in an attempt to get him some support. The general public are not always aware of who best to contact when they become concerned for an adult in their community.

Professionals were not aware of the full range of available support services. There could be benefit from an online directory of support group work.

Multi-Agency Models and Convening Multi-Disciplinary Team Meetings:

It is recognised that Adult P suffered a rapid deterioration with his alcohol misuse and mental health. His circumstances demonstrate the importance of convening timely Multi-Disciplinary Team meetings. Had a Multi-Disciplinary Team meeting been held, professionals would have shared their information and concerns effectively and been better positioned to consider his circumstances holistically.

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