

Appendix One

Spotlight on a Social Worker

The Human Stories below are an illustration of the social work practice of one of our social workers and their involvement in supporting people in Halton. They have worked for Halton adult services since 2006, initially as a community care worker, then securing a Social Work Traineeship and gaining their Social Work qualification at Degree level. They qualified as a social worker in April 2018 and have gone through their progression with Halton.

Human Stories

The following human stories have been anonymised. These are not real names and are subject to other changes such as gender. The photographs used for Howard are not true illustrations from this person's *actual* home.

SIDNEY	
The situation	Sidney was had been living in a care home for some time when the social worker became involved in his case. He was an older person with dementia and a learning disability. When the social worker assessed his needs they found they were unable to determine what his skills and abilities were because everything was done for him in the care home and there was nobody to give information about what he could do before moving to the care home. He still owned a property but it was which was in a poor state of disrepair.
What we did	<ul style="list-style-type: none">• They co-ordinated the Multi-disciplinary Team to undertake “functional” assessments (occupational therapy/physiotherapy) both in the community and in the home to identify what Sidney was able to do for himself and what he would require help with.• Those assessments identified that Sidney would continue to need 24 hour support but that his independence could be maximised in a supported living setting where we could promote his independence, whilst he would be supported to carry out daily living tasks himself – cooking, cleaning, shopping, accessing the community.• A supported tenancy was identified and he was supported to meet the individuals living there, to see if they were compatible, and they actually got on great.• Mental capacity assessments were carried out in relation to Sidney’s finances and his long term care and support needs• His care and support in his new home was authorised by the Court of Protection

SIDNEY	
	<ul style="list-style-type: none"> Decisions were made that his house would be sold and he would move to a supported living setting in Runcorn.
Outcome for the individual	The Local Authority supported the clearance of Sidney's property, which was subsequently put on the market and sold. He resided in a supported living setting successfully for some time now, he has gained many skills and has a full and meaningful life in his new home. When asked about whether he would like to return to the care home Sidney said " <i>Tell the judge I don't want to move from here I'm here for all my life!</i> "

Ronald	
The situation	<p>Ronald is an adult living in rented accommodation and his tenancy was at risk due to the poor condition of the property, he was facing eviction due to self-neglect He has a mental health disorder - and a history of disengagement with services. Ronald has difficulties maintaining relationships and reluctance to let people in to see the extent of the difficulties he was having.</p> <p>Ronald had a bath that was filled with faeces (and had been for some years) and the property was in general poor condition. At the point of the social workers involvement the landlord had taken the case to legal services and a contract of expectations had been agreed.</p>
What we did	<ul style="list-style-type: none"> The social Worker supported arrangements for the bath being emptied (jointly with the housing provider), quotes were obtained and this work was contracted and completed. The housing provider had set out what other extensive work needed to be undertaken to prevent further action being taken and the social worker worked closely with Ronald and worked jointly with our mental health outreach team to achieve this. The previous chronology evidenced that "deep clean" approaches had been tried historically and been unsuccessful as the property had returned to poor condition. Relationship based practice, motivational interviewing, task centred approach (specific, measurable, achievable and realistic targets) was used to encourage Ronald to complete the tasks required to secure his tenancy to good effect.
Outcome for the individual	With support from the social worker Ronald was enabled to complete the tasks required and the legal process ceased.

Ronald	
	Ronald has since been supported by his housing provider to move to another property which is in line with his wishes. With his agreement Ronald was transferred to the mental health team for ongoing support to reduce risk of his home conditions deteriorating again. His difficulties with others are well understood by those supporting him and risks related to disengagement are reduced.

JANINE	
The situation	<p>Janine lives in a supported tenancy. She has profound and multiple physical disability and learning difficulties. She has complex physical health needs and needs full support with all personal care and daily living tasks, she requires assistance of two for all transfers and close monitoring throughout the day and night. Janine is unable to communicate verbally and her non-verbal communication could be misapprehended, therefore she needs others to anticipate her needs, manage risk on her behalf and make all decisions in her best interest.</p> <p>The social worker, worked under safeguarding arrangements regarding, Janine's mum who held a consistent belief that covid 19, is not dangerous; that restrictions / mask wearing was not necessary and was open, about not wearing masks at home or in the community. Mum held views about Janine's health needs that deviated from professional recommendation and could place her at risk if followed. There were also concerns that mum had possession of Janine's Motability vehicle and financial benefits, requests for access to either on behalf of Janine were refused.</p> <p>Janine is considered extremely clinically vulnerable and at the time of our involvement had not been vaccinated against covid 19 due to mum's objections.</p>
What we did	<ul style="list-style-type: none"> • Application to the Court of Protection was initially made to restrict contact outside the supported tenancy to safeguard Janine while other matters were further explored. • A full case chronology identified a pattern of disguised compliance, there was a lot of historical evidence that mum would agree to plans to appease professionals then deviate from them. • Through the Court of Protection process the following issues were addressed;

JANINE	
	<ul style="list-style-type: none"> ○ Janine was vaccinated against covid 19 ○ Contact with mum was restricted to supervised visits within the supported tenancy for Janine's safety ○ The Court awarded financial deputyship to the LA to ensure Janine had access to her money ○ Janine's Motability vehicle was returned to her and is now located at her supported tenancy ○ Janine's care and support is now fully funded by Continuing Health Care, ensuring she doesn't have to contribute towards it ○ The restrictions in Janine's support are authorised by the Court and reviewed regularly to ensure they remain the least restrictive option to meet her needs.
Outcome for the individual	<p>Janine continues to live in her supported living property with other co-tenants. She is no longer in arrears with her bills / rent and has access to her money. She goes out regularly in her Motability vehicle with staff support.</p> <p>She sees her mum regularly. A risk assessment and supervision is in place to ensure this contact remains safe for her. She gets great enjoyment from these visits.</p> <p>Janine did contract covid 19 however luckily this happened after she'd had her vaccination so she recovered well and was not admitted to hospital during the time she was unwell.</p>

Howard	
The situation	<p>Howard is an adult whose hoarding had led to his home becoming uninhabitable and was facing eviction through court proceedings. The Local Authority received a safeguarding referral, Howard's property had been found to be unsecure by the police and they had such serious concerns regarding the owner's welfare that they entered believing that they may find someone deceased.</p> <p>Over a period of time various services (Fire service, Public Health, Social care) had attempted to engage with him and the situation was considered to be high risk. Information shared identified that rooms were full of domestic rubbish, at shoulder height in places. He would not allow professionals to visit him.</p> <p>The individual had experienced a decline in their mental health following a bereavement and over a period of time this</p>

Howard

resulting in home living conditions deteriorating. Police and environmental health had also tried to engage with him without success

The social worker began using phone calls over a period of time to try and gain trust, with a lot of support and reassurance that they would not be judgemental or shocked by anything and that they did not need to be embarrassed. The social worker was able to undertake a home visit. Living conditions were noted to be very poor with the property in a state of disrepair.

What we did

As the social Worker gradually built a relationship with Howard, trust was developed. Use of social work theories, knowledge and skills had been successful in managing the balance of power and reaching this point with Howard that he consented to her arranging for some support to clear the accumulated items from his home. A team was organised, selected and introduced to him. He felt comfortable enough to remain in the property and took part in the clearing / cleaning – taking responsibility for one of the rooms themselves.

Using the “clutter image rating” (which is a standardised assessment tool), for reference the starting point for kitchen was the ‘Before’ image, following intervention it was the ‘After’ image.

This image is not this persons home

Before



Howard

After



There are no reference images for other rooms, but they would be in line with the illustrative images.

Outcome for the individual

- The individual is now in receipt of the correct financial support
- Living conditions were significantly improved
- Individual was motivated to start other jobs on the house –including some painting
- Property was assessed by fire service and risk assessed as being removed, they closed the case after fitting smoke alarms
- Grant applications were submitted for various household items successfully
- Howard has been able to save money and quotes are in progress for some of the repair work needed for the property