

Inherent Jurisdiction Training – Case Studies

Safeguarding Training 14.02.20 Eliza Sharron –Kings Chambers

Case study 1

- P is a chronic alcoholic grieving loss of partner. Refusing all support. Depressed. Various health conditions. Living conditions are squalid.
- P is admitted to hospital following collapse due to intoxication, where he remained for 3 weeks.
- P wishes to discharge himself. Its mid winter and freezing. His flat has been deep cleaned during admission. Heating and utilities not yet back in place.
- Local authority and health professionals strongly advise against.
- MHA 1983 assessment carried out – no basis to detain.
- MCA 2005 assessment – has capacity to make decision.
- P is extremely frail and still very weak.

Notes

Case study 2

- P is a 56 year old woman. Long term alcoholic. Various health needs including incontinence/depression.
- Abusive relationship with husband. Has attempted to detox various times, husband will leave alcohol out for her to trip her up.
- Domestic violence. Escalates whenever tries to leave. A few serious episodes but P will not make complaint to the police. At the last attempt, P 'fell down the stairs'.
- P expresses a wish to leave and to detox/break ties with her husband, but never goes through with it.
- Can be hard to assess capacity because P usually intoxicated, but so far assessed as having capacity as she is aware of the risks. Further more in depth assessment required.

Notes**Case study 3**

- Young man with autism and schizophrenia – living with parents and sister who has learning disabilities.
- P has made allegations against parents, that they shout at him and abuse him – but then retracts.
- Family are suspicious of services – curtains often closed when social workers call round and door not answered.
- P reluctant to engage with support workers – LA concerned it's the parents' influence – though no real evidence of this.
- P's funds often disappear from his account – LA concerned parents are using them.
- P has capacity.
- Previously agreed to a period in a respite placement where he did really well. At the end of the placement he was clear he wanted to go home because he wanted to be with his family.
- LA continue to be concerned for P and want him to move into a supported living placement, to begin developing his independent living skills and to provide him opportunities for social interaction and growth. P is adamant he does not want to go.

Notes

Case study 4

- P is a 65 year old woman. She is suspected to have hoarding disorder. Nobody has been able to assess but GP reports no concerns with capacity.
- P will not let professionals past the front door. She owns the property that was left to her by her parents, and has lived there since she was born.
- P is regularly seen walking up and down streets with shopping bags. She frequents all the local charity shops daily, collecting items.
- Neighbours have begun complaining that P is defecating in the garden, and is seen climbing into the property through a broken window pane in back door. Rats have begun infesting back yard.
- The windows can be seen jammed with items. All utilities have been cut off.
- Environmental Health is concerned that property is a fire risk and placing other nearby properties at risk.

Notes