



## Ruth SAR- LEARNING BRIEFING

### What were the circumstances that led to this SAR?

Ruth Was a 49-year-old white female. She suffered from a range of physical and mental health challenges, which resulted in her four children being taken into care, which understandably significantly affected her.

Ruth was born out of County and moved to Worcestershire during adulthood. Over the years she had less contact with her family. It appears that as a consequence Ruth became increasingly reliant friends, including a male called Simon to meet her care and support needs. It was not clear what Simon's relationship was with Ruth.

In August 2020, NHS 111 received a call stating that Ruth was not eating and feeling unwell. During the call Simon stated that he thought Ruth was dying. An ambulance was sent, however Ruth was found to have died by the time it arrived.

Simon informed the Ambulance crew she had suffered a fit and taken morphin. Bottles of oral morphine were recovered from the premises. However, the ambulance crew were concerned that there were signs of neglect, as well as the flat being dirty, Ruth was wearing a soiled nappy which contained stale faeces and urine which appeared several days old. There was also a large wound to at the front of Ruths body which gave off a 'pungent smell of decay' when exposed. It was noted that no treatment appeared to have been given to the wound infection.

A Post Mortem concluded that Ruth died as a result of pelvic sepsis which had probably occurred due to complications arising from a an abnormal connection between the colon and urinary bladder (colovesical fistula.) A Police investigation took place, however no further action was taken.

### What was the nature of the abuse?

Alongside evidence of neglect, there is also evidence of controlling, or coercive, behaviour by Simon.. As far back as 2015, at different times, Ruth raised concerns with different agencies around sexual, physical, and financial abuse by Simon. However, she also stated at other times that he was a friend, providing support and that she relied on his help. The abuse was arguably 'hidden in plain sight'

Whilst Ruth had capacity, an assumption was made that she had given consent for Simon to adopt the role of her 'carer'.

## What should you do?

Ruth's contact with agencies and professionals reduced over time. This resulted in limited multi-agency intervention to support Ruth, and address her physical and mental health needs, her poor living conditions, and alleged abuse by Simon

It is recognised that multi-agency working is demanding, and the pandemic would have presented additional challenges for professionals in the months leading up to Ruth's death.

Professional practice was, on several occasions, reactive, rather than a proactive holistic assessment being taken relative to Ruth's risks and needs.

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| Multi- agency Working                                    | <p>Effective multi-agency working can provide an enhanced response and better protection to individuals with multiple and complex needs. It enables</p> <ul style="list-style-type: none"> <li>• Earlier and more joined up assessments and interventions to take place</li> <li>• Assurance that a lead professional is identified to coordinate and monitor a multi-agency response</li> </ul> <p>All professionals should familiarise themselves with the WSAB Complex Adult Risk Management (CARM) framework<br/> <a href="#">Link to CARM framework</a></p>  |
| Making Safeguarding Personal and Professional Curiosity  | <p>It is important that professionals seek to engage with people so that they can gain a clearer picture of the situation and better understand their needs, wishes, beliefs, priorities, and motivations</p> <ul style="list-style-type: none"> <li>• They should also be professionally curious, particularly where the vulnerable person may be reluctant to engage.</li> <li>• They should ensure that there is clear consent, and the carer is acting in the person's best interests.</li> <li>• This will facilitate more robust and comprehensive assessments</li> </ul>   |
| Identifying and dealing with Neglect and/or Self Neglect | <p>This SAR has identified a range of learning points for agencies and professionals, when supporting people who are subject of abuse and self-neglect. This includes ensuring that all practitioners:</p> <ul style="list-style-type: none"> <li>• Understand the importance of assessing the risk posed by people who elect to adopt a 'carer's' role.</li> <li>• Understand The importance of taking robust action, and looking at the cumulative picture, when abuse is alleged.</li> <li>• Receive support and education on identifying coercive and controlling behaviour, including finding safe spaces to talk to people they suspect may be being abused, so they are better able to identify unsafe relationships.</li> </ul> <p>All professionals should familiarise themselves with the WSAB Self-Neglect and Hoarding Policy<br/> <a href="#">Link to Self-Neglect and Hoarding Policy</a></p> |