

Case Study C

An adult where there is reasonable cause to suspect that an adult in its area (whether or not ordinarily resident there)— (a) has needs for care and support (whether or not the authority is meeting any of those needs), (b) is experiencing, or is at risk of, abuse or neglect.

Howard is in his early fifties. He has been homeless for several years, either side of a short custodial sentence following a conviction for fraud. As a result of the proceedings that led to that conviction, he lost his home and his employment. He has been homeless ever since, living mainly in bus shelters, but with some sofa surfing, occasional stays in hostels for people recovering from substance misuse and some use of a night bus.

Howard has a long history of alcohol abuse. He has been unable to stop drinking when accommodated in hostels, as a result of which he has had to leave. He also has a heart condition for which he is prescribed medication. He has had several hospital admissions, again either side of his custodial sentence, because of chest pain. He has been assessed by housing authorities as not being owed a rehousing duty as a homeless person.

On many occasions ambulance crews and police officers have been called to assist Howard. Sometimes on these occasions he has been intoxicated and/or incontinent. He often appears unkempt. He frequently refuses their assistance, even when he has been the victim of financial and/or physical abuse from people he associates with. There is evidence that his money and/or his medication have been stolen and he reported being threatened and assaulted. Ambulance crews and police officers are concerned that Howard is unable to manage his personal needs and that he is at risk of abuse and neglect, including self-neglect. GPs who know Howard have been concerned about the difficulties tracking his compliance with medication, because of his homelessness, and have also diagnosed depression. When ambulance staff and police officers have suggested a referral to Adult Social Care, Howard has always declined.

This means that the adult experiencing abuse or neglect can raise their concerns themselves, but so can their friends, family members, unpaid carers, other members of the public, paid carers, professionals and organisations.

Decision making

In respect of:

(a) need for care and support. Howard is someone who misuses substances or alcohol to the extent that it affects his ability to manage day-to-day living. He experiences depression as well as having physical health issues. In addition he is, as a result of identified needs, an adult who is unable to achieve specified outcomes, including in relation to basic daily needs and care (The Care and Support (Eligibility Criteria) Regulations, 2014).

In respect of:

(b) experiencing or at risk of abuse or neglect, Howard is, in the context of the definition in the Care and Support Statutory Guidance (DHSC, 2020) experiencing abuse or neglect. Howard is at the least a victim of financial, material and physical abuse. He seems unable to manage his personal needs and is at risk of self-neglect and neglect.