

1. Background

Gemma was a 38-year-old woman living alone in Scarborough. She had experienced difficulties with her mental health, including suicidal ideology, from a young age and reported history of trauma. Substance use had also been a feature of Gemma's life since her teens. Gemma was involved in an abusive relationship, which she hoped to end upon moving to Scarborough. In July 2021 Gemma was sadly found deceased in her flat from a drug overdose.

7. Practical Interventions for non-engagement

Practitioners need guidance on one-to-one techniques that work with individuals. This report highlights the following useful techniques:

- Professional Curiosity (NYSAB Practice Guidance available [here](#))
- Harm Reduction (Advice can be found [here](#))
- Motivational Interventions
- The allocation of dedicated time

6. Working with Non-Engagement

This report highlights that Gemma's needs by themselves were not the fundamental challenge, rather that it was difficult to create a constructive and co-ordinated approach to engage her into services. This highlights a need for a published multi agency procedure to guide professionals dealing with non-engagement by individuals with complex needs. This will need to consider how these individuals are flagged and escalated as well as there being capacity to apply an assertive outreach approach to ongoing interventions.

North Yorkshire Safeguarding Adults Board

'Gemma' SAR 7 Minute Briefing Key Learning



2. Multi Agency Working and Information Sharing

The report identified no professional attempted to set up multi agency meetings or escalate concerns for Gemma to a multi-agency forum. There are also five examples of poor information sharing which could have impacted responses to Gemma. It is recommended that a multi-agency forum for escalation is set up in North Yorkshire, and that practitioners are reminded of the importance of an **ABC** approach to information sharing when welfare is at risk; *Assume Nothing, Believe No One, Check Everything!*

3. Safeguarding

Agencies have identified that there were multiple missed opportunities to raise safeguarding concerns for Gemma. Two safeguarding concerns were raised, and although swift responses were made they were closed quickly. Whilst this was in line with Gemma's wishes, it indicates that risk may not have been viewed cumulatively and efforts to use assertive outreach to engage her in the process may have been beneficial. Despite concerns about ongoing domestic violence, Gemma was not escalated to MARAC during the review period. Partner agencies should be reminded of the importance of raising safeguarding concerns and escalating concerns to multi agency forums.

5. Professional Attitudes

This report acknowledges it can be challenging professionals to work with individuals such as Gemma, and yet it is vital this does not drive interventions. Gemma wanted to change aspects of her life, despite this being incredibly difficult for her. Rather than a sense of fatigue which can lead to case closures, it is important to employ motivational approaches and relationship building techniques when working with complexity.

4. Residential Rehab

Gemma accessed a residential rehab placement during the review period; however, this broke down as it was not deemed safe to detox her in that setting upon arrival. The report emphasises the importance of beds for planned substance use disorder detoxifications being available in medical settings to ensure required level of support, as well having contingency plans in place for placement breakdown.

Support For Professionals



1. Professional Curiosity



Professional curiosity is vital: asking questions can uncover important information and help us challenge assumptions and explore underlying causes of behaviour or disengagement. If something feels wrong and remains unresolved, don't hesitate to raise a professional challenge: Speaking up strengthens safeguarding practices and leads to better outcomes.

See [NYSAB Professional Curiosity Practice Guidance](#)

2. Raising safeguarding concerns or escalating concerns regarding domestic abuse



It is important to raise safeguarding concerns or escalate domestic abuse in the context of substance use.

- Ensure safeguarding concerns are raised
- Ensure multi-agency meetings are held regularly
- Escalate to 'Complex Care' Peer Support Meeting (HAS, NYC) if complex
- Ensure a making safeguarding personal approach
- Have knowledge of up-to-date processes and procedures

In particular, if there is a need for training in identifying domestic abuse which should align with [NICE Public health guideline \[PH50\] – Domestic violence and abuse: multi-agency working](#).

See also: [Domestic Violence Disclosure Scheme \(also known as Clare's Law\) OMG](#)

3. Trauma-Informed Care



It is important to challenge stigma and unconscious bias in your service's language, policies, and practice. Consider Trauma Informed Care (TIC) training to be trauma informed practitioner.

5. Substance Use



'Gemma' reminds us of the importance of using widespread use of drug and alcohol screening tools such [AUDIT](#) by all generic frontline workers to help identify and address issues the earliest point.

Interventions that use [Harm Reduction](#) and Motivational Interventions techniques should be applied when working with people like 'Marie'.



6. The Mental Capacity Act 2005

The Mental Capacity Act 2005 supports individuals who lack capacity to make specific decisions at specific times and enables future planning. Capacity assessments follow a two-stage test and can be conducted by professionals from various backgrounds. Always consider 'executive' capacity and ensure assessments are clearly recorded in the appropriate section of the electronic system.

[The NYSAB's One Minute Guide on Considering executive function in mental capacity assessments supports professionals with how to apply this in practice.](#)

7. Multi-Agency Working: Effective multi-agency working relies on strong, purposeful MDTs to manage serious risks as each member brings valuable insight. Think:

- Who needs to be at the table? Invite only those essential to the case. Large groups can dilute messages and hinder progress.
- What are we trying to achieve together? Define clear objectives.
- Set SMART actions.

