‘Courtney’ SAR 7 Minute Learning

1. Background

‘Courtney’ is a young woman in North Yorkshire with undiagnosed learning disabilities. She experienced the loss of her premature baby, which she delivered at home without professional presence. Courtney went on to have a second child who has been adopted. She continues to have meaningful contact with her child and they have a strong bond. The report identified learning points in relation to how Courtney was understood, and therefore supported, by professionals in the period between her first and second pregnancy.

2. Sensitivities of the Report

A decision has been made that the report will not be published, and some details will remain confidential. However, ‘Courtney’ has worked with NYSAB to ensure that some of the key learning is shared, and others may benefit from what we have learnt from her experiences.

3. Importance of Needs Led Assessments

‘Courtney’ had developmental delay as a child and accessed specialist schooling. She did not receive a formal diagnosis of learning disability. The report highlights the importance of ‘needs led’ services and assessments, avoiding reliance on diagnoses to inform outcomes for people and avoid barriers to service provision.

4. Culturally Competent Practice

Courtney is from a mixed heritage background, however this was not referenced in her assessments or accurately recorded on her records. Cultural competence involves being sensitive and responsive to a person’s cultural identity, which may include ethnicity, religion, nationality, language, gender identity, or sexuality. It is about recognising and respecting individual differences and ensuring that care is inclusive, equitable, and person-centred. The report recommends that all practitioners should ensure they are recording ethnicity consistently and accurately on all records, and that discussions about cultural heritage and what this means to a person forms part of assessments.

5. Working with Complexity

Courtney’s case illustrates the complexity of safeguarding adults with learning needs and the importance of a whole system response. Earlier intervention, consistent legal literacy, and trauma-informed approaches could have improved outcomes and the need for co ordinated, multi-agency planning to achieve this is clear.

6. Mental Capacity

Courtney was able to mask her learning needs when engaging with professionals which may have led to her capacity not being fully considered, particularly when her responses were taken at face value. A deeper level of engagement, and consideration of her executive functioning was required. Professional curiosity alongside multi-agency discussion is often necessary to support assessment. The importance of seeking legal advice when capacity is in question is also highlighted. The report found a consistent and collaborative approach could have helped resolve conflicting views regarding Courtney’s mental capacity and diagnosis. This, in turn, might have supported more effective engagement with Courtney, tailored to her level of understanding and emotional needs.

7. Responses to Risk

At times, risks were identified for ‘Courtney’, but the response was limited. This was partly due to a lack of understanding of her learning needs and her mental capacity. The report suggests that application of professional curiosity and management of engagement, particularly where it might be due to trauma related issues, is key to embedding learning in this area.

Support For Professionals

North Yorkshire Safeguarding Adults Board

1. Learning Disability Inclusion Toolkit: As Courtney did not have a diagnosed learning disability, she was not on her GP practices Learning Disability register. Benefits of being on the register may include health staff being aware of a possible need for reasonable adjustments such as longer appointment times, as well as receiving an annual health check. The Learning Disability Inclusion Tool can assist GP's in identifying someone with a learning disability. The use of this is promoted for GP practices across North Yorkshire and the tool can be accessed here: Inclusion-tool-Jan-2019-3.pdf

2. Mental Capacity and Masking : Research shows individuals with mild to moderate learning disabilities often engage in masking, a coping strategy involving the conscious or unconscious concealment of difficulties. This is done by mimicking socially expected behaviours or overcompensating in certain areas to appear more "typical" and avoid stigma**.** Courtney's ability to mask led to difficulties assessing her mental capacity, with practitioners initially assuming capacity, with concerns raised in response to emerging risks. Professional views on capacity differed. Practitioners should consider executive functioning and seek legal advice where capacity remains unclear or disputed. More information on masking can be found by clicking here

3. Social Graces: The 'social graces' is a framework to help us understand parts of our identity; who we are and how this impacts how we think, and how others might think about us. The 'social graces' help us think about the power we might hold within relationships due to parts of our identity. The report suggests that this tool should be promoted to professionals to support their culturally competent practice: Social Graces: A practical tool to address inequality | BASW

4. 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: https://safeguardingadults.co.uk/working-with-adults/practice-guidance/professional-curiosity/

5. Trauma Informed Practice and Interrelation with Curiosity and Engagement: This case highlights the importance of recognising how past trauma influences behaviour. Building trauma-informed approaches can enhance trust and tailor support more effectively. Trauma Informed responses recognise that behaviours may be survival strategies rooted in past trauma. Professional curiosity helps professionals understand the **why** behind behaviours, rather than judging or reacting. This supports **non-triggering, empowering interactions** that avoid re-traumatisation. The table here explains how curiosity, engagement and trauma-informed practice work together.
Further information on trauma-informed care can be found here: The Five Key Principles of Trauma Informed Practice

Element	Contribution
Curiosity	Helps uncover the full picture of someone's life and risks.
Engagement	Builds the relationship needed for safe disclosure and support.
Trauma-Informed Practice	Ensures that curiosity and engagement are delivered with sensitivity and care.