



## Case study 1

### John: feeling safe on the ward

#### 1 Background

John is resident on a long-stay mental health ward under section 37 / 41. He had been assaulted on the ward by another service user, who can become unpredictably violent towards other service users when he's unwell. Staff at the setting raised a safeguarding concern, which resulted in measures being recommended.

John reported he continued to feel unsafe even after the safeguarding case was closed, and asked for an advocate to support him. When our advocate, Deniz, met with John in person, she observed there were no staff members present on the floor which she knew was one of the safeguarding recommendations. She saw John in the day area trying to get some food, and the service user who had assaulted him was standing uncomfortably close to him.

#### 3 The process

Deniz built a positive rapport and made it clear to John she wasn't judging what he was expressing. She took a rights-based approach backed up with reading material. She informed him of how staff are meant to keep him safe, and how to raise a concern if you're not feeling safe. Deniz talked with John about what could give him the confidence to speak up, and explored how expressing things in different ways influences how they're heard.

Deniz checked with ward staff whether the initial safeguarding concern had indeed been raised, and what the outcome was. She told staff what she had observed in the day area, and that in her view there was potential for another incident in which both service users might be at risk of being harmed.

Staff said there was a plan in place to support John. They had moved the service users' bedrooms, but they weren't currently able to move either service user to different accommodation. The plan included reporting the assault to the police and having extra staff on the ward, which they acknowledged hadn't yet happened.

Deniz made sure that when staff were explaining the plan to John, they explained what it meant practically for John in ways he could understand, and if something didn't work, what options there would be rather than falling back on generic, abstract and formal language.

#### 2 The issues

John told the advocate, Deniz, that the measures recommended in the initial safeguarding case weren't in place. He continued to feel unsafe, including during the incident Deniz had observed in the day area.

He was extremely unsatisfied by the safeguarding process. He felt the formalities had been carried out, but nothing had been implemented in practice to keep him safe. None of the staff had checked in with him about whether he was feeling safe or not. There was no-one to from an outside agency to check the plan was being put into action, or to speak with about how he felt.

John expressed that if staff didn't do anything about it, he would have to do something about it himself. He was angry about the situation and expressed an urge to retaliate.

John wanted to have the opportunity to speak to his social worker and bring it to her attention because he has a good relationship with her and felt the social worker could help implement the plan alongside the staff team. He also wanted to raise an informal complaint. Deniz contacted the social worker, who agreed to meet John the same day. Together John and Deniz discussed the issues with her.

## 4 Outcomes

There have been a number of practical outcomes:

- ▶ staff reported the original assault to the police
- ▶ more staff are now on the floor
- ▶ John has a daily one-to-one with staff in which he can express how he feels
- ▶ the other service user has now moved to a ward better suited for him

By having the positive experience of Deniz hearing and understanding him, John built the confidence that other professionals could hear and understand him too. He has become a lot more confident with processes and what the staff's responsibility is to him. He thinks people are now able to take his concerns more seriously, and the process has deterred a potential scenario of him retaliating. He now feels more confident to raise concerns and has developed extra skills to express his feelings.

The process has also opened up the communication between John and the staff team. Staff have better knowledge of his personality and feelings, and now understand that when he said he wanted to retaliate, he's expressing that he feels unsafe.

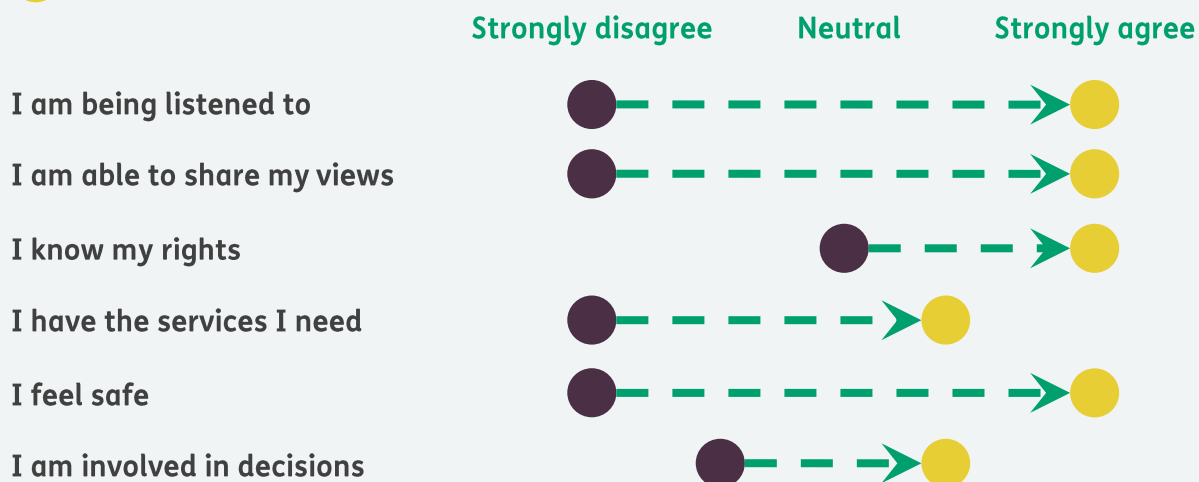
By having the support of an advocate, he saw a process through. He was able to see that with patience and consistency, and constructively raising his view, he was able to change things for himself. He gained sense of completion by being able to follow a process through and see a positive result. It took a while and involved a number of professionals but with both him and the advocate being able to voice it to the necessary people it was able to be understood. He said he couldn't have done any of that alone.

At the end of the process, John said he has begun to feel safe again. He said he felt satisfied by the outcomes, and empowered by the advocacy process.

### Our advocate's assessment of John's outcomes

● at the beginning of the case

● at the end of the case



## 5 Systemic issues

Service users might express strong feelings; in this case, John said he felt the urge to retaliate. Sometimes staff only view this as someone presenting risk, rather than listening to what might be going on underneath and what the reasons might be they feel that way. This can lead to service users not feeling heard, feeling judged and that the team are against them. In this case, Deniz was able to highlight to staff that John's strong expression of feelings was him trying to communicate he was feeling unsafe.

Staff might sometimes fall back on saying 'there's a plan in place' without explaining to the service user what that plan is, and how it will help them, in terms they understand. When staff all use the same formal language (because they're used to talking about things in a certain way), the patient doesn't feel it's personal to them. This case meant staff were more aware of the difference it makes to service users to talk about the specifics of what's going to happen, rather than talk about 'the plan' generically.

The staff are used to the dynamics of the ward and might not perceive a sense of safety in the same way as service users might. In this case, because they didn't feel unsafe around the potentially violent service user, they didn't take into account that John might have a very different experience of it to them – and that his feelings of being safe or not are distinct from an assessment of whether a situation is safe or not.

Many service users don't get supported with how to express themselves in a way that's easier for other people to understand. Deniz was able to support John to express his feelings and wishes in a way that was better able to be received by staff.