



# Andrew's Story – understanding complex needs through a new lens

Sharing learning is a key priority of the Safeguarding Adults Executive Board (SAEB) and ensures that lessons in relation to safeguarding adults support best practice and encourages a culture of continuous improvement.

All staff and managers are encouraged to read and discuss this briefing in team meetings or supervision and reflect on its findings.

## **1: Background**

Andrew died at the age of 48. He was a drinker and had recently been diagnosed with decompensated liver disease. He had been known to many services and had difficulties engaging with support from probation and substance misuse services and often abandoned accommodation, leading to periods of street homelessness. Towards the end of his life, it became more apparent that Andrew had autistic traits, which explained much of his behaviour that may have previously been identified as chaotic and challenging.

A change in approach from practitioners working with Andrew to be more autism aware and to adopt assertive outreach made a significant difference to Andrew's experience and for practitioners in understanding him, his fears and aspirations. In previous years there were clearly missed opportunities to understand Andrew's needs and on reflection many of these experiences would have been traumatic for him.

## **2: An autism aware approach – making adjustments**

Andrew experienced anxiety and found social interaction hard. He had sensory needs, would wear a woollen hat that half covered his eyes and talked about particular smells, which helped to make him feel calm. Staff noticed that when they began to make notes in an appointment with Andrew his anxiety increased. Andrew had a range of verbal and physical tics, repeating many times particular phrases in meetings with services e.g. "It's not funny."

Within the last two years of Andrew's life, involvement from a Speech and Language Therapist identified a pattern of behaviour over time that was consistent with autistic traits. This helped to see his behaviour and history in a different way, and supported professionals to adopt a different approach when working with him which focused on a relationship orientated approach. The team around Andrew were able to make adjustments to how they

worked, including meeting Andrew outside, for a coffee or walk in the park rather than a prescribed office appointment.

Andrew's story reflects important learning that services need to be consider neurodiversity adjustments and be flexible in tailoring their approach rather than having a framework that is overly structured or rigid. The last period of Andrew's life reflected a time in which services being more autism aware were able to work in partnership in a consistent and persistent way.

### **3: Wanting help but struggling to accept it – the need for assertive, relational health approaches**

Over the years Andrew rejected many services and the approaches used by workers. But in the last year, with the new understanding, the workers around Andrew felt sure that he desperately wanted help. He once said, *"I don't know how to cope"* and in that moment workers felt he was expressing *"I want to cope; I want to know how to cope, and I don't know how to"*.

Andrew's situation reflects the benefits of proactive assertive outreach services in breaking down communication and engagement barriers with those who may struggle to accept help and support.

### **4: The importance of respectful professional challenge**

In one incident, Andrew fell at the hostel and sustained an injury to his head. An ambulance was called but Andrew refused to go to hospital. As Andrew presented well on the surface, ambulance staff felt that he had mental capacity and as such that they must respect his wishes. The hostel staff who had more in-depth knowledge about the complexity of Andrew's needs were concerned that he was unable to make an informed decision about the need for medical attention. However, they felt unable to challenge this decision without support from the Speech and Language Therapist.

This highlights the importance of acknowledging the power imbalances that can exist between different professional roles, and that effective communication between agencies working together is key to fully understand the complexity of a person's needs. All professionals should have confidence and feel able to challenge decision making and to see this as their right in in order to promote the best outcome.

### **5: A new perspective on Criminal Justice Interventions**

Andrew was on probation and had several court cases in progress including one relating to him having been racially aggressive to a substance misuse worker. In total, he had 42 offences recorded, all with a racially aggravated element.

The team around Andrew towards the end were able to develop strategies to close down racist comments and look back at events with an understanding of the context, patterns and triggers, which included considerations around sensory overload and meltdowns as being

part of the pattern. In the last period of his life, the flexible approach of probation and other specialist services helped Andrew comply with his probation requirements.

## **6: Working with families**

Andrew was in contact with his mum and would visit her from time to time. Although there were at times breaks in their relationship, the hostel staff noted it helped Andrew when they were in good contact. Often workers can feel reticence in supporting adults to reach out to family members for fear that it can open a 'can of worms'. Adfam, a service which offers support to families affected by drugs or alcohol suggest that well supported family members represent a huge untapped resource for promoting change among change resistant drinkers.

## **7: Useful resources and further information**

[Adfam](#) – is a service which supports families affected by substance misuse

[Blue Light Project](#) – An national initiative to develop alternative approaches and care pathways for drinkers who are not in contact with treatments services but who have complex needs

[Change Communication](#) – an organisation which provides support for statutory and third sector partners to develop a Communication First approach and inclusive services.

[London Multi-Agency Adult Safeguarding Policy and Procedures](#)

[Autism and Homelessness Toolkit](#)

[How to use legal powers to safeguard highly vulnerable dependent drinkers](#)

[NICE guidance – Integrated health and social care for people experiencing homelessness](#)

[Adult Safeguarding and Homelessness: Experience Informed Practice](#)

[Learning from Tragedies: An Analysis of Alcohol-Related Safeguarding Adults Reviews](#)

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