

## Case study four: Maria Vignette

Maria, 24, lives with her 15 month old daughter, Sophia, and Sophia's biological father, Graham (34). Maria came to live in London from Greece at the age of 18. Maria's teenage years were difficult as her father was emotionally and physically abusive towards her and her mother. Maria took a business studies course and was involved in the University Diving club. She met Graham at the club and they have been together ever since.

When she was 20 equipment failure during one of the dives caused Maria to sustain a spinal cord injury. Maria was rehabilitated from hospital. With professional support she was able to regain much of her independence although she suffers from chronic pain as a result of the injury, and anxiety and depression related to this. She uses a wheelchair and was allocated an accessible ground floor flat owned by a local housing association. Maria was advised that giving birth could further disable her but she was determined to have her baby.

Graham moved into Maria's flat when she told him that she was pregnant. Shortly after this she cancelled her contract with the domiciliary care agency. She said that Graham was able to do everything that she and the baby would need. Graham took time off work to be present at every ante-natal class. He works full time at a race track. He sometimes has to work late and he doesn't always know until he gets there how long the shift will be.

There has been a referral to adult services from children's services. Children's services have been alerted to concerns raised by health staff about Sophia's lack of development, low weight and being frozen in her emotional responses. Maria is reported to seem tired, wary and dishevelled and potentially in need of social care support to be an effective parent. The housing association had had complaints from neighbours about the family's dogs' waste covering the shared "play" area and that they seemed dangerous. Graham is reported to be offended at the idea that they are not coping as he now manages the household as well as working.



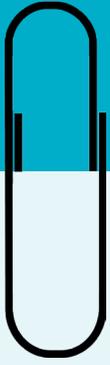
How would you make a safe enquiry with Maria?

Who will meet with her?

Where?

How will you contact her to arrange the meeting?

## 4



## Case study four: Maria

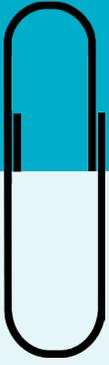
### Support and safeguarding assessment with Maria

#### Form SC2: Assessment care and support needs

The worker will explain why they are having this meeting with you. Usually it is because you have asked for an assessment or because another agency that you have been in contact thought that we might be able to help.

You should have been asked if you were happy for them to tell us that you might need help.

Who asked for or suggested this meeting:	<i>Pauline Hughes (Health visitor)</i>
Who is at this meeting:	<i>Katya Scaravelli (Social Worker) and Maria Papadakis</i>
<b>Part One: About You</b>	
Name	<i>Maria Papadakis</i>
Address	<i>14b Kings Avenue, London, NW7 888</i>
Telephone	<i>0208 xxxx xxx</i>
Email	<i>(none – computer broken)</i>
Gender	<i>Female</i>
Date of birth	<i>08.08.92</i>
Age	<i>24</i>
Ethnicity	<i>White European</i>
First language	<i>Greek, also fluent in English</i>
Religion	<i>Greek Orthodox</i>
GP	<i>Lime Street Surgery</i>
Support needed to take part in meetings/make decisions	<i>None Helpful if childcare can be arranged</i>
Other person making formal health and welfare decisions?	<i>No (Maria is able to decide what support she wants)</i>



## Case study four: Maria

### Support and safeguarding assessment with Maria continued

I (Katya Scaravelli) explained that I had asked to see Maria because the health visitor had told adult social services that she thought Maria needed more help to be able to look after Sophia. I checked whether Maria would prefer to speak to someone in her first language (Greek), but she was happy to continue in English. Quotes below are Maria's own words.

**I asked Maria how she and Graham organised the housework and looking after Sophia.**

*Maria told me that she used to do everything for herself but that because she got tired easily she had some help with cleaning and with getting up. She used to go to the local gym and swimming and had been thinking about becoming a coach for children with disabilities before she found out she was pregnant.*

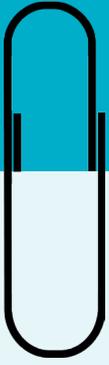
*Since Graham moved in he has insisted on doing everything. "He gets cross with me if he gets home and finds out I've tried to do something for myself, because he worries".*

*He does all of the shopping and the cooking. He leaves her a meal when he goes out. Maria thinks it's time to start giving Sophia more solids but Graham won't buy baby food and won't leave the blender where Maria can reach it. Sophia likes cornflakes but Maria said she has to "be careful that there are none on Sophia's clothes or cot when Graham gets home". I asked her why, and she said that Graham sometimes "gets angry when I do things differently to how he likes them done".*

*Maria used to shop online and get a delivery but the computer stopped working. Graham said it has a virus. It means she can't Skype her mum any more. She can't get to the bankcards because he has put them on top of the wardrobe "out of Sophia's way". Her phone charger has vanished. Maria has asked Graham to fix these things so she can start to do her share of organising things again but he is always "too tired or wanting to relax".*

*He doesn't seem to know how to clean. She asked him to let Anna her cleaner come back but he "won't have anyone else in the house". Sophia isn't moving around much but Maria is worried that if she starts to crawl she will pick up infections. She knows there is a dirty nappy from months ago behind the kitchen bin but she can't get to it herself.*

*Some of Maria's ligaments were damaged during the birth. It means she needs help to get onto the bath. Graham scares her with his games of "ducking" her so "I don't bath often and then he complains I don't look nice!" Maria also needs Graham to set out her pain medication in the mornings. They keep the pills up high so Sophia can't get them but Graham often forgets to give them to her. Maria can't get into bed until Graham is home to help. It can be very late. She often doesn't sleep because she is in pain.*



## Case study four: Maria

### Support and safeguarding assessment with Maria continued

#### Safety issues

##### > Does Maria feel safe?

**If no. What is it that Maria is afraid of? Who is making her feel afraid?**

*Maria told me that she is “scared all the time but I don’t know why”. She thinks she has lost her confidence because of giving birth.*

*She says she is “scared of making mistakes”. She told me Graham shouts at her and calls her a “clumsy crip”. The more he shouts the more mistakes she makes – for example dropping hot drinks because her hand is shaking.*

*She said Graham didn’t used to treat her badly before he moved in. Maria said Graham used to get very angry when Sophia cried and would stop her breast feeding, saying she should use a bottle (which she couldn’t do because that would mean getting out of bed, transferring to her chair etc). Sophia hardly cries now.*

*Graham is a bit better now Sophia isn’t sharing their bed but he still gets cross when she asks him to do really important things like replace her wheel chair battery. She has been getting really tired because she has had to walk using the furniture or crawl around the flat for 3 weeks now.*

*Maria is scared Sophia has a learning disability. She doesn’t do the same things her nieces and nephews did when they were babies. She is worried that the referral to children’s services will mean that Sophia is taken away.*

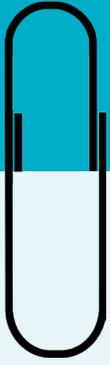
**If this is a situation of domestic abuse use the DASH-Risk assessment as a basis for talking with the person at risk about what is happening to them.**

*See DASH-RIC attached*

*I am particularly worried about the high risk to Maria of Graham ducking her head under water in the bath and the sadistic behaviour he shows towards her dogs. Sophia agrees that Graham should stop doing these things.*

**If the person is at risk and it is safe to do so, help them make a Safety Plan**

*See plan below*



## Case study four: Maria

### Support and safeguarding assessment with Maria continued

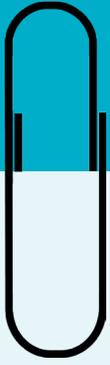
#### The outcomes I want and support I need

#### What do you want to happen next and what help do you want to make those things happen?

*During the meeting Maria told me a lot of things that she wants to be better. Maria said*

- > I want to make sure Sophia is ok*
- > I want a battery for my wheel-chair*
- > I want my computer fixed.*
- > I want a new phone charger*
- > I want my car some days - (I could drop Graham and work and he can get a lift home)*
- > I want to talk to my mum (on Skype) in private*
- > I want my mum to come here and meet Sophia*
- > I want Graham to let me cook so I can start to wean Sophia*
- > I want to have help to learn tricks to look after Sophia just like they taught me to look after myself after the accident*
- > I want to have a cleaner again*
- > I want to be able to have a bath or shower by myself*
- > I want to feel better*
- > I want to have a rest so I can get strong and then talk to Graham about getting all this sorted*
- > I want my dogs to have a better life, get regular exercise and good food*

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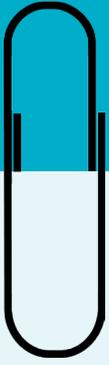
## Case study four: Maria

### Support and safeguarding assessment with Maria continued

#### What next – plans to meet care and support needs and (if relevant) safety plan

	What	Who will do this	By when
1.	<i>Maria will talk with Graham about getting her wheelchair battery, phone charger and using her car herself</i>	<i>Maria</i>	<i>On Monday</i>
2.	<i>Maria will show Graham the leaflet about Direct payments and try to persuade Graham to think about them employing a PA of their choosing to help Maria during the day</i>	<i>Maria</i>	<i>Same time next week</i>
3.	<i>Share this assessment with Children's services to inform their child protection investigation.</i>	<i>Katya</i>	<i>Tomorrow</i>
4.	<i>Katya and Maria to meet again</i>	<i>Katya/Maria</i>	<i>Same time next week</i>
5.	<i>Maria will write a letter to her Mum for Katya to post</i>	<i>Katya/Maria</i>	<i>Same time next week</i>
6.	<i>Family centre worker contact Maria and Graham to arrange to talk with them about how the centre can help them with Sophia</i>	<i>Children's services</i>	<i>Next week</i>
7.	<i>Arrange for an OT to visit to see if changes can be made so Maria can get into bed and get washed without assistance</i>	<i>Katya</i>	<i>Tomorrow</i>
8.	<i>Katya to think about advertising for a new home for Maria's dogs</i>	<i>Katya</i>	<i>Next week</i>
9.	<i>Send the MARAC referral</i>	<i>Katya</i>	<i>Today</i>
10.	<i>Make a safeguarding referral</i>	<i>Katya</i>	<i>Today</i>
11.	<i>Safety plan</i>	<i>Maria and Katya</i>	<i>If needed</i>

# 4



## Case study four: Maria

### Support and safeguarding assessment with Maria continued

#### Future contact

I (Katya Scaravelli) will come and see you next week at the same time and for 6 weeks to make sure this plan is starting to work.

Maria is also likely to have contact from Children's Centre and from the IDVA

> **What is your preferred way for us to contact you?**

*Write to me or knock on the door.*

> **Is it safe to contact you anytime? If not, when is the safest time?**

*Don't write anything bad about Graham in anything he might read.*

*He works most Friday and Saturdays.*

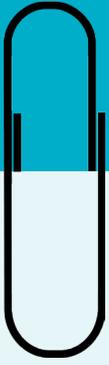
> **If we contact you and it's not safe to talk, can you think of something that you could say that would let me know that it's not safe to talk?**

*"sorry my head is hurting"*

> **Is there anything else you would like us to be aware of when contacting you?**

*Wait at least ten minutes at the door in case I am slow getting there.*

*I will give you my phone number when I have my phone back.*



## Case study four: Maria

### Support and safeguarding assessment with Maria continued

#### Conclusion

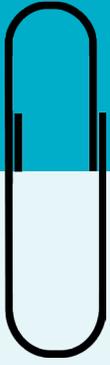
*This meeting took place because Children's services are worried about Sophia and worried about whether Maria is getting all the help she needs to look after Sophia.*

*The information that I've gathered from Maria leads me to believe that we should also be concerned for Maria's wellbeing and safety. There is evidence that Maria is experiencing high levels of coercive control. This is illustrated in the following facts and observations:*

- > Maria is worried that she won't be able to look after Sophia properly. She needs support to be able to do this, but Graham is instead making things harder for her (e.g. by placing things out of reach). Graham has 'suggested' on a few occasions that he could take Sophia to his mum's if Maria can't cope. His mum lives far away – in my view this could be seen as a threat.*
- > Graham's shouting at Maria is threatening.*
- > Graham is controlling Maria's access to means of communication – her telephone, computer, and wheelchair battery are all broken or out of use and Graham is not supporting her to access new/ recharged ones. This is isolating her from her friends and family. He is also preventing her from using her car.*
- > Graham is restricting Maria's access to money. This is financial abuse.*
- > Maria has given examples of Graham putting her down, and using her disability to demean or embarrass her – for example calling her a 'clumsy crip'. She says this makes her feel 'small'. She has given examples of Graham undermining her and making her feel as if she can't do things for herself.*
- > Graham is not supporting Maria to be independent. His refusal for her requests for care and support amount to a denial of her basic needs. Maria cannot bathe, which means she can't look after her appearance and hygiene properly.*
- > Graham is limiting Maria's access to painkillers, which also impacts on her sleep. In my opinion this is physical abuse.*
- > Maria appears anxious – her voice was shaking at some points when she was describing her situation, especially that Graham dunks her in the bath.*

*Maria seems aware that the current situation is not sustainable, but afraid to access support. Increasing Maria's independence will be key to resolving the situation. At the moment Maria is reliant on Graham, which makes her vulnerable because he is using the power he has as her primary carer to control her. I think this is a safeguarding issue. Maria does not agree with me. She does not want there to be a safeguarding referral but I have explained that I will make one about her which will be joined up with the referral to children's services.*

## 4



## Case study four: Maria

### Support and safeguarding assessment with Maria continued

*I have explained I am doing this to make sure she gets all the help she can. Maria is very afraid that Sophia might get taken away. I have told her this referral will help get her the help from “Team around the family” to find ways of looking after Sophia well. I have explained that if she wants a meeting with all the people that might be able to help (a care and support meeting or a safeguarding meeting) I can arrange that.*

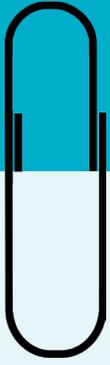
*Maria has agreed for me to share the information she has shared with me with MARAC. She doesn't think it will do any harm as this isn't domestic abuse so they won't bother about her or Graham. I have explained that I think they will take this seriously and that an IDVA might contact her if they do. She says she wouldn't mind that.*

*Maria has a safety plan. She will try to talk with Graham about getting things she needs fixed. She is worried it will make him cross.*

*Maria didn't want to keep information about Women's Safehouses or helplines as she was worried what Graham would do if he found them. In my opinion this is another cause for concern. She has no way of contacting them at the moment.*

*I will record this as a safeguarding enquiry and keep the concern open until we have arrangements in place that keep Maria (and Sophia) safe.*

Safeguarding enquiry summary			
Is/are there an adult/s at risk	Yes	Date information shared with the police?	Today
Who is at risk?	Maria Papadakis	Who from	Graham Mason
		Relationship	Partner
Are there any child protection concerns	Yes	Has a child protection referral been made?	Yes (by Health Visitor)
About who?	Sophia Papadakis		
Has a DASH-RIC been completed	Yes	High risk?	Yes
Has a referral been made to MARAC?	Yes		
Is there a safeguarding/protection plan?	Yes		
Is the plan in place?	No		
Date of any multi-agency safeguarding meeting	None		
Review date	Today plus 13 weeks		
Signed consent given to this support plan (see below)	Yes	Mental capacity to consent to this plan?	Yes



## Case study four: Maria

### Support and safeguarding assessment with Maria continued

#### Completed by

Name: *Katya Scaravelli*

Role: *Social worker (Central area -Adults)*

Organisation: *Adult Social care*

Date: *Today*

#### Signing this form

Please ensure you understand the statement below, then sign and date the form.

I understand that completing this form will lead to a computer record being made which will be treated confidentially,

Information I have provided on this form will only be shared as allowed by the Data Protection Act. The worker completing this assessment with me has explained what the Data Protection Act says.

I understand that the council will store this information so that they can provide me with information, advice and support. To do this they may also share the information with NHS organisations and providers of care services who may be able to help me.

This means I won't have to give the same information to lots of different organisations. I understand that all health and social care services have a similar duty to treat my information confidentially in accordance with the Data Protection Act.

If I am at serious risk for example from domestic abuse or if other people are at risk from someone who is abusing me then the council may share my information with other organisations such as the Police to help keep me safe and protect other people

If I have given details about someone else in this assessment, I will make sure that they know about this unless doing so might place them or me at risk of harm.

The worker completing this assessment has explained that I will be involved in all decisions that are made about my care and support and that if I am unhappy about the support I am offered or the way in which services are delivered I can make a complaint – firstly to the manager of the service who will try to put it right and then if I am not happy to the Social services complaints office. Tel: 01234 567890.

Name: Maria Papadakis

Signature: *Maria Papadakis*

Date: *Today*