



Medway Safeguarding Children Board

Learning Lesson Review briefing: Jack¹

Jack came to the attention of the MSCB in 2014 after sustaining a serious head injury following a fall from a building, at the time Jack was a looked after child but living outside of Medway with his family. Jack and his family have a long history with children's social care and Jack was a looked after child for a number of years.

Whilst Jack lived with his mother there were concerns raised about domestic abuse in the home from mother's partner and her partner's excessive drug use. Jack's mother had mental health issues and misused alcohol.

Jack also spent time living with his brother and grandmother, also outside of Medway, due to mother's partner behaviour and mother's alcohol use, although mother denied an ongoing relationship with her partner.

Following social care intervention Jack agreed to move into supported accommodation, this did not materialise and Jack continued to live with his mother.

Jack then presented to Medway services having returned to Medway and was staying with his father, who was recognised as a habitual drug user, and another brother in Medway. Jack agreed to go into supported accommodation, which he eventually did but did not stay there as agreed and he was repeatedly reported missing from his placement.

Jack had an outreach worker in Medway but failed to engage in activities he requested or in the referral to substance misuse services.

He was known to smoke cannabis and spend his money on cannabis and presented for appointments under the influence. Jack also reported drug taking activity with his father and was identified at an address where a drugs warrant was executed.

Jack's supported accommodation placement broke down as a result of his behaviour and he was moved to another placement. This placement broke down following allegations made by Jack regarding inappropriate handling and use of restraint. During his time in this placement there are incidents of Jack being intoxicated and using substances.

Jack enrolled in college courses in Medway but was removed as a result of his behaviour and there were concerns for Jack's cannabis use and erratic attendance.

¹ Names and locations have been changed.

Jack left Medway and refused to return, choosing to stay with his brother out of Medway.

Whilst out of Medway Jack moved between his mother, grandmother and one of his brothers. He engaged with services and re engaged in training courses. There were incidents reported to Police of Jack being drunk and disorderly in the street, again for a disturbance at Jack's mother's house and again for an assault.

Jack's engagement with training courses and services continued to be poor and he was sent home from training courses for being under the influence. He later took an overdose and was admitted to hospital, although no treatment was needed.

The services out of Medway contacted Medway children's social care due to growing concerns for Jack's state of mind. Following review Jack's engagement did improve when he was staying with his grandmother and he attended sober. However this change was not sustained and Jack missed his training sessions and substance misuse appointments. There were also concerns for drug debts Jack reported to have and increasing drug use.

At the time of the incident Jack was 17 years old.

Areas of good practice

- Most services offered to Jack were at an acceptable, or above, level.
- The multi agency response when Jack went missing was generally effective and thorough.
- Professionals working with Jack were persistent, flexible and committed to helping Jack, although hampered by his heavy drug use and lack of engagement.

Lessons to be learned

- Workers who do not have safeguarding and promoting the welfare of young people as their principle focus need to be aware of young people's needs or recognising them as a child when under 18 years. In this case they were adult facing sections of health and police.
- Professionals being sensitive to the risks associated with adolescents.
- Recognising the impact of attachment disorders on building and sustaining trusting relationships, especially in adolescence.
- Sharing information with training and accommodation providers, specifically around drug use and prior safeguarding concerns.
- Assessment of risk should be repeated following an incident or unplanned move by a child in care.
- Learning for frontline staff to have sufficient up to date knowledge on the effects and risks associated with substance misuse to inform risk assessments and service provision.
- Commissioned services for vulnerable young people have robust policies and practices, with particular reference to policy and practice in the fields of complaints, safeguarding and positive handling.
- Management of cases at a distance need to be recognised for the challenges they pose.
(This is national learning)