

Who was Sophie?

Sophie died on 7th February 2024, aged 34. She was a mother to four children and her own mother was supportive to her and her children throughout her life. Sophie had psychiatric diagnoses of Emotionally Unstable Personality Disorder and Schizoaffective Disorder and was on psychiatric medication. Sophie was under mental health services as a child and as an adult and had significant ongoing mental health needs. Sophie had had hypertension, was a smoker and was morbidly obese. Sophie reported rape by her father when she was aged 15 as well as rape, sexual and domestic abuse by her partners over a number of years.

Sophie's Experiences

Sophie was offered domestic abuse support but did not wish to progress this. Safeguarding referrals were followed up however Sophie did not accept the offers of support. Referrals were made to domestic abuse services, but Sophie did not engage with this. It is highly likely that Sophie suffered trauma due to the rape, sexual abuse, domestic abuse, the impact of being unable to care for her children and her fourth child being removed from her care.

Key Findings

Professionals to consider the impact of domestic abuse on a parents' mental health.
The need for rigorous domestic abuse screenings in health.
A whole system analytical approach taken to safeguarding referrals.
Trauma informed and 'think family' approaches, processes and training.
Information sharing and communication in relation to safeguarding especially where there is a transfer of care.
Better access to mental health support for women who do not live with their children.
Multi agency exit planning when agencies withdraw from working with service users.
Better safeguarding risk planning and management for people like Sophie and their wider family.

Learning from 'Sophie' 7 Minute Briefing

Work being undertaken

Development of an Early Help Service for adults.

Development of online domestic abuse training module.

Further training around the application of the mental capacity act when managing safeguarding referrals.

Missed Appointment Policy is under review which integrates trauma-informed principles.

What we have in place to support people like Sophie

Health services screening processes for domestic abuse.

Wellbeing checks at maternity appointments and throughout care.

Safeguarding, domestic abuse awareness and trauma informed risk assessment training.

Specialist public health midwives continue to train and support staff and women with complex mental health needs.

Think family approaches to supporting people.

Children's 0-19 services link parents and record significant adults in the home.

Transfer of Care policy and process.

The Tullip Service for women who no longer live with their children or are at risk of losing care of their children.

Person-centred planning by integrating the individual's lived experience.

Risk formulation model to ensure a trauma informed approach to understanding how past trauma influences present behaviour and risk.

Referrals to Psychology Talking Therapies.

Dedicated process for adult safeguarding referrals.

Challenges

Sophie was offered domestic abuse support but did not wish to progress this.

Professionals having access to and understanding of historical information about a person.

Information sharing can be difficult where interactions with various agencies are sporadic and spanning a number of years.