

Case Study Eleven: Mr J – Wanting more independence upon moving from a mental health rehabilitation unit

Summary

Mr J lives in a mental health rehabilitation unit, however, the unit is being re-provisioned so he has to move. Mr J was deemed not to have the capacity to make the decision himself, but clearly expressed a preference to move into supported living accommodation where he could be more independent. This was taken on board by professionals and the move was successful.

Background

Mr J is a middle-aged man on the autistic spectrum who also has mental health issues. Mr J has lived for many years in a residential mental health rehabilitation unit. The unit is large and fairly chaotic, which has led to behavioural issues for him in the past. The unit is now being re-provisioned resulting in residents having to move elsewhere. IMCA involvement was requested in Mr J's move as he has no friends or family to represent him, and he lacks the capacity to make the decision about where to live himself.

IMCA report

'I met with Mr J and his social worker. Although Mr J did not engage in much discussion about a move, he did indicate he was looking forward to moving. He stated he wanted more independence than he currently had, and that he would like to move somewhere quiet. We spoke about a possible supported living placement that had been identified for Mr J, which he seemed keen to explore further. I later accompanied Mr J and his social worker on a visit to the proposed supported living placement which seemed to go very well. Mr J met the manager and the other residents and we walked around the neighbourhood identifying bus stops for Mr J as he enjoys travelling on public transport. On our return, Mr J stated that he liked the place and wanted to visit again. Later Mr J went for a tea visit, which apparently also went very well, and then an overnight stay which involved Mr J and the other house members going on a trip to Skegness. A best interests meeting was held at which discussion of Mr J's future placement was entered into. The IMCA report was taken into account particularly with reference to the least restrictive option for Mr J. It was felt that a supported living project was a less restrictive option than a residential specialist placement, which was one of the other options available to Mr J. I was also able to represent Mr J's views and ensure these were given sufficient consideration within the decision-making process.'

Barriers which were overcome

There was some debate amongst the professionals working with Mr J: some felt he should move to a residential autistic specialist unit, while as stated his social worker had identified a small, four-bedroomed supported living placement that could meet his needs.

It appeared that the best interests checklist being followed by the professionals was not giving enough consideration and weight to what Mr J's view was: whilst he was deemed as lacking capacity for this decision he clearly had an opinion of what he wanted so it was important his voice was heard.

Outcome

Mr J has now moved into the supported living placement (as per his preference) and early reports are that he is enjoying it greatly. An IMCA will be attending Mr J's forthcoming care review to ensure that his needs are being met at the placement.