

Witness Name: SUZANNE WALMSLEY

Exhibits: [SW/01 – SW/88]

Dated: 12 SEPTEMBER 2025

## THE SOUTHPORT INQUIRY

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### WITNESS STATEMENT OF SUZANNE WALMSLEY

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I, **SUZANNE WALMSLEY**, will say as follows: -

#### **INTRODUCTION**

- 1 I am a qualified social worker employed by Lancashire County Council ("LCC") in their Transitions Team, which is part of adult social care.
- 2 This witness statement is made to assist the Southport Inquiry ("the **Inquiry**") with the matters set out in the Rule 9 Request dated 6 August 2025.
- 3 At the outset of this statement, I wish to offer my most sincere condolences to the families of the victims involved in the attack on 29 July 2024 and all those affected by the events.

#### **BACKGROUND**

- 4 This statement will cover my relevant work experience and qualifications, my involvement in AR's case and contact with other agencies, together with my

reflection on the events involving AR and relevant improvements made following the events on 29 July 2024.

## **INTRODUCTORY MATTERS**

### **Transitions Team and my role**

- 5 I am a social worker within the Transitions Team and my role is sometimes referred to as a Transitions Worker. I am a grade 8 social worker within LCC. I have been employed in this role since 26 April 2021.
- 6 The Transitions Team is a specialist team working with young people between 14 and 19 years old. My role and that of the Transitions Team is to support young people and their families as they move from services they receive as a child into those they may need as an adult.
- 7 The young person must be eligible under the criteria in the Care Act 2014 and the aim of the team is to ensure a smooth transition to adulthood for young people and their families, ensuring there are no gaps in support, and improve the outcomes achieved by young people in relation to employment, independent living, inclusion in the community and health.
- 8 Prior to the young person turning 17, their case is allocated to a social worker within the Transitions Team, such as myself. Once they approach or turn 17 years of age, an initial Care Act assessment is then undertaken by their Transitions social worker. It is unusual for the Transitions Team to progress any actions prior to that age.
- 9 The initial Care Act assessment identifies the young person's health, care, wellbeing and communication needs and as their allocated social worker, I review this with them and their family, together with their strengths and aspirations. An adult package of care is then decided upon which is put in place for when the young person turns 18 years old.
- 10 I would then undertake a review of the care package 6 weeks after the young person turns 18 to ensure it continued to meet their needs.

- 11 The Transitions Team remains in contact with young people still in education during year 14 to support planning for any new social care arrangements required when they leave school. The team will end its involvement with young people no later than the summer following their 19<sup>th</sup> birthday when responsibility for social care transfers to the most suitable adult social care team.
- 12 Care packages can include anything from assistance with personal care, home help and meal preparation, to support for social activities or social engagement. For example, an enablement service provides for a social worker to visit the young person once a week for a 6 to 12 week period and discusses whether they are experiencing any difficulties with daily tasks, such as food shopping or budgeting. Alternatively a day service is available where the young person is provided with options of places to visit during the daytime where they can complete similar tasks as those completed in school.

### **Background, qualifications and experience**

- 13 I qualified as a social worker in September 2018, having obtained a degree in Education at Liverpool Hope University, followed by a Post Graduate Diploma in Social Work which I completed at Manchester Metropolitan University. I also completed volunteering work as part of the Home-Start and Sure Start programmes alongside completing my degree in Education.
- 14 I was employed by Blackpool Council as a family support worker based in the Children's Services department between July 2018 to September 2018. My registration as a social worker became effective in September 2018 and my job title changed to social worker to reflect this. I was then employed by Blackpool Council as a social worker between September 2018 to January 2019.
- 15 I then secured a role as a social worker in the Children with Disabilities Team at Salford City Council in April 2019 and I worked in this team until April 2020 before transferring into the Outreach Team as a family support worker, where I provided support to families who were involved in legal proceedings involving child protection.
- 16 I continued to work as a family support worker at Salford until 23 April 2021 before joining the Transitions Team at LCC as a social worker on 26 April 2021. Since

joining LCC, I have completed various training courses throughout my employment and exhibit my training record as SW/01 - LCC001807

- 17 I remain employed in the Transitions Team as a grade 8 social worker.

## **FACTUAL NARRATIVE OF INVOLVEMENT**

### **Allocation of AR's case**

- 18 I understand that transition discussion forum meetings are held approximately every 4 to 6 weeks to discuss the cases to be allocated within the Transitions Team. Those attending identify whether any additional information should be obtained prior to the case being allocated to a social worker and decide which cases are allocated to the individual social workers within the team.
- 19 Transition line managers and three grade 9 social workers from the Transitions Team attend the meetings. I would not attend transition discussion forum meetings and no minutes from the meetings were ever shared with me.
- 20 I receive an email allocating cases to me approximately every 6 weeks. If there are any urgent actions which require my attention, my line manager notifies me at the time the cases are allocated to me. In 2022 my line manager was Julie Eaves.
- 21 AR's case was allocated to me on 8 August 2022 following a transition discussion forum meeting held earlier that day. As was the usual practice, I received an email from Theresa Martin, a business support officer in the Transitions Team, which I exhibit as SW/02 – LCC001808 containing a table setting out the names and brief details of the young people whose cases I had been allocated. They were mostly under the age of 18.
- 22 The table of allocated cases I received following the transition discussion forum meeting on 8 August 2022 confirmed the LAS and LCS case numbers for AR; his date of birth; the date of his 18<sup>th</sup> birthday - 7 August 2024; the school year that he was in, his diagnosis of autism spectrum disorder (ASD), that he was in Education at Acorns School and was based in the central area for LCC.

23 Julie Eaves discussed AR's case with me in mid-2023 as AR's 17<sup>th</sup> birthday was approaching and he was due to be 18 in August 2024. It was therefore proposed by Julie that I would prepare to meet with AR and his family in around August 2023 for the purpose of beginning the transition process for his progression into adulthood. No contact with AR's family was made at this stage, nor were any additional actions suggested as none were required.

24 I attended a face to face supervision with Julie Eaves on 21 June 2023 (LCC000545). I do not recall AR's case being discussed during this meeting, and it is not recorded as being discussed during focussed supervision. It was noted on the supervision form that he was turning 18 years old in August 2024, he was DR's brother and ideally an assessment would be undertaken when AR turned 17.

25 Whilst I had no previous direct involvement with AR or his family, I was aware that AR's family was known to other members of the Transitions Team DPA

DPA

### **Supervision of work**

26 Social workers are required to attend supervisions with their line manager every 6 weeks. These supervisions provide support and guidance to social workers and require them to reflect critically on their practice.

27 In terms of oversight of my own work, I attended supervisions with Julie Eaves every 6 weeks, subject to our availability. A variety of topics were discussed during the supervisions, including my workload as well as my health and wellbeing and any matters impacting my work, whether personal or professional. Case reviews of some of the young persons I was involved with were also conducted during each supervision meeting. Sometimes, my line manager would prepare an agenda for the supervision meeting with details of the cases to be reviewed. Additionally, I

would occasionally ask for particular cases to be prioritised for discussion during the meetings, for example if I felt that additional intervention was needed.

- 28 My line manager changed to Emma Clough in November 2022, but my supervisions continued in the same way and I attended these either in person or virtually every 6 weeks, again subject to our availability.

### **Handover**

- 29 Matthew Embley, a transitions worker, had held the case before me from February 2022. At the time that AR's case was reallocated to me, Matthew had left LCC and I therefore received no direct handover from him. I did not receive any other handover regarding AR, although this was the usual practice for the cases I was reallocated from Matthew as he had left.
- 30 In terms of cases that were reallocated to me from other members of staff than Matthew, I would usually only receive a handover from the previous case holder if they had actively worked on the case. However, in most instances of cases being reallocated to me, the young person is usually under the age of 17 and no active work has therefore commenced, meaning that a handover would not be done as it was not necessary.
- 31 Just from looking at the basic details that were shared with me when the case was allocated to me in the email sent on 8 August 2022, it was unlikely that Matthew would have progressed any actions as we would only usually prepare to meet with young people around the time of their 17<sup>th</sup> birthday. For AR, this was in August 2023. It would have been very unusual for the Transitions Team to be involved with AR when the case was referred to the team in February 2022 due to his age.

### **Steps taken on being allocated to a case**

- 32 When I am allocated a new case, I would firstly take steps to identify whether the young person already has an allocated children's social worker by checking the young person's file on the Lancashire Children's Services ("LCS") system. I would try to contact the allocated social worker by sending an introductory email or message via Microsoft Teams, to gain an understanding of the dynamics and background of the young person and their family, together with the details of any

assessments which have already been undertaken, and to determine the urgency of my assessment and whether further exploration is needed.

- 33 If any external agencies are involved in the young person's case, I would usually be provided with the details of their involvement during supervisions. However, if this was not discussed during supervisions, I would follow this up by accessing the young person's file on LCS.
- 34 If any external agencies were involved, such as Child and Adolescent Mental Health Service ("CAMHS") or LCC Inclusion Service (previously the Special Educational Needs and Disabilities or SEND Service), I would make contact with them to find out what involvement they had with the young person and whether any upcoming meetings were scheduled to take place in the near future, for example child protection meetings. If available, I would attend any meetings so that I could introduce myself to the external professionals involved in the young person's care. If I was not available, I would ask for an update from the relevant professional after the meeting.
- 35 I would then arrange an initial visit with the young person, which would usually take place approximately 6 to 8 months after the case is allocated to me. This time enables me to gather information and begin setting up a care package in readiness for the young person's 18<sup>th</sup> birthday. At the initial meeting I would explain the extent of my involvement with them both prior to and after they turn 18, and outline the support that I and the Transitions Team can provide.
- 36 If the young person has an allocated children's social worker, I would try to arrange for them to attend the initial visit with me to see the young person. This enables the children's social worker to explain that they will continue to be involved in the young person's case until they turn 18.
- 37 If possible, I would also conduct my initial assessment at the same time as the initial visit to determine what the young person's social care needs are likely to be on reaching the age of 18.
- 38 During the initial assessment process I gather information about the young person's current needs and their expected needs and intended outcomes upon reaching adulthood. The areas I cover in the initial assessment are based on the

Functional Analysis of the Care Environment ("FACE") overview assessment form, which includes sections about the young person; their home and living situation; eating healthily and safely; personal care; mobility; social relationships and activities; work, training, education and volunteering; caring for others ,where applicable; safety and risk; their mental health and wellbeing; health conditions and disabilities that impact their wellbeing; and support they will receive on an ongoing basis from those close to them. I would usually make electronic notes on a blank FACE overview assessment form during the meeting, save my notes in the form and then type up a detailed form at a later date to be uploaded to LAS.

- 39 I try to meet with the young person during the assessment process. However, this is not always possible and sometimes they refuse to see me. If that is the case, I would speak with the young person's parents or carers to obtain as much information as possible to enable me to complete my assessment.
- 40 After conducting this initial visit and where applicable, initial assessment, I try to make arrangements to see the young person alone for a follow up meeting in a different location, to provide me with an opportunity to assess how the young person interacts with others in a different environment to their home. I usually aim to do this within one month. The follow up meeting would usually take place at their school and would be either in person or remotely, although I offer alternative ways for the young person to engage with me, for example in writing.
- 41 During my initial visit, I document my assessment by making brief notes on the FACE overview assessment form, which is stored on LAS. After the initial visit has taken place, I access the completed form and expand upon the brief notes that I have made in order to finalise the document, which is then sent to my line manager for approval alongside an indicative budget which I prepare in relation to the estimated cost of the care package.
- 42 If during my assessment I deemed the young person to lack capacity to make any decisions regarding their care and support, I would also arrange for a formal assessment of their capacity to be conducted, using the information gleaned during my assessment as a starting point to determine how much information the young person has retained. I would explain the reasoning for the capacity assessment to the young person and their family.

- 43 Prior to the assessment of the proposed care package and associated budget, being approved by my line management, I attend a daily huddle meeting with my line manager and other members of the Transitions Team. The daily huddle meeting involves a critical review of the assessment and a peer review of any alternative methods which could be explored in relation to the young person's care.
- 44 Once the assessment and indicative budget has been approved, a cost approval must then take place before the package of care can be implemented. The package of care is implemented once the young person turns 18, and then reviewed after their 18<sup>th</sup> birthday to ensure the care provided continues to meet their needs.

#### **Steps taken on being allocated to AR's case**

- 45 Once I was allocated to AR's case in 2022, I noted that he turned 18 in August 2024. On allocation I was not advised of any immediate action that was required and I therefore continued to focus on my active cases.
- 46 This case became an active case in August 2023 when AR was turning 17. Due to his age, I made contact with AR's father on 14 August 2023 to advise him of my involvement and that I would make arrangements to meet with AR and his family before he turned 18. When I spoke to his father that day, we arranged a meeting in September 2023. Unfortunately I was not able to attend then and so the meeting was rearranged to 9 November 2023.
- 47 On the same day, 14 August 2023, I received an email from Theresa Martin, which I exhibit as SW/03 – LCC001809 The email on 14 August 2023, followed a 'tracker meeting' that I attended with Theresa Martin on 10 August 2023. During the tracker meeting, my case load would have been discussed, alongside the dates for completion of any outstanding actions. The tracker meetings were usually held shortly before the supervision meetings that I attended with my line manager, however, the tracker meetings did not always take place before each supervision meeting due to Theresa having a period of leave.
- 48 An excel spreadsheet, entitled 'work to do', was updated by Theresa after each meeting to reflect the actions and relevant dates discussed in relation to each case listed.

- 49 Attached to the email from Theresa on 14 August 2023 was AR's Transition to adult services referral form ("Transition referral form") dated 8 February 2022 in MS Word document format, which I exhibit as **SW/04 – LCC001810** and a Child and Family Assessment form ("C&F Assessment") dated 7 September 2021 in PDF format, which I exhibit as **SW/05 – LCC000110**. Transition referral forms are usually completed by another professional and C&F Assessments are always completed by a professional, usually a social worker.
- 50 I made contact with AR's father and arranged an initial visit and assessment meeting. This was originally arranged for September but was later moved to 9 November 2023.
- 51 Based on my usual practice, it is likely that I would have briefly reviewed AR's Transition referral form prior to my visit on 9 November 2023 during a supervision. This would help me identify any relevant Care Act needs as this assists with framing conversations with the young person's family.
- 52 At the time the Transition referral forms usually contained quite basic information around the services and professionals currently involved with the young person, any diagnoses and details of any medication and the present position in relation to support. Risk was not a required field in the form and there was nothing related to risk recorded in the Transition referral form for AR.
- 53 Due an issue with the software, I was unable to open the C&F Assessment. I recall that around this time, I was experiencing similar issues in accessing C&F Assessments for other young persons. I therefore contacted Theresa via Microsoft Teams that day, 14 August 2023, explaining that I was unable to access the C&F Assessment. Theresa then sent me a Microsoft Word version of the C&F Assessment by email that morning and the email is exhibited as **SW/07 – LCC001812**. I did not review the C&F Assessment prior to my visit on 9 November 2023.
- 54 I did not access AR's case notes on LCS but I did access AR's case notes on LAS prior to the visit on 9 November 2023.

- 55 I then attended the initial visit and assessment meeting on 9 November 2023 and met with AR's parents. AR was present in the house but did not want to meet with me.
- 56 Based on the information provided to me by AR's parents at the meeting on 9 November 2023, I determined that a small package of care would be implemented following his 18<sup>th</sup> birthday. This was to support AR in relation to his anxiety and social isolation and would involve an externally commissioned carer attending AR's family home in order to get to know AR and provide his parent's with a short break from their caring role. I also felt that the carer's involvement in AR's case could increase gradually to encourage AR to engage in activities outside the home and re-integrate socially, thus hopefully decreasing his social anxiety.
- 57 Following the meeting on 9 November 2023, I intended to electronically document my assessment of AR on LAS with a view to arranging a follow-up meeting with AR to take place in around February 2024. However, neither of these took place.
- 58 I received an email from Nikki Trayman on 31 January 2024 which I exhibit as **LCC000530**. The email was asking whether I had met with AR and his family. I do not know what role she had at the time or which service she was working with. I do not know what prompted her to contact me and I have no record of me sending a response to this email. It is likely that I did not respond as it came through on the same day that my family were involved in a serious road traffic collision. I then had two days off and returned to work the following week to a sea of emails.
- 59 On 19 June 2024 Theresa Martin emailed an excel spreadsheet document to me which contained a list of my case load. The spreadsheet is stored on an online drive accessible by members of the Transitions Team and contains details of actions due for completion in relation to each young person. The actions are a mental capacity assessment (MCA), best interests meeting (BI MTG), support plan (SP), continuing health care (CHC), and complete package care (CPIP). The spreadsheet was used as a way to retain data for the cases, but it was also as a useful prompt for workers. I would liaise with Theresa about the current position of any outstanding actions and dates for completion and she would add this data to the spreadsheet.

- 60 Looking at the spreadsheet, as I intended to arrange a follow-up meeting with AR at which I would review whether a MCA and/or a best interests meeting were required, the 'MCA' and 'MI MTG' columns both state 'Required?' to reflect this. AR's support plan is documented as due for completion in August, in accordance with the date of his 18<sup>th</sup> birthday.
- 61 Theresa Martin sent another copy of the Transitions referral form and C&F Assessment for AR to me in an email sent on 4 December 2023, which I exhibit as **SW/09 – LCC001814** would have accessed the document to make sure that I could open it, but other than looking at the first page or so, I would not have reviewed this in detail. I usually review C&F Assessments and other relevant documents, such as an Education, Health and Care Plan ("EHCP"), in more detail when a young person is approaching 18. I would normally review these documents in February each year as this is the time when I pull my caseload together and review the cases for young people leaving education.
- 62 At this time I and the Transitions Team as a whole were under a huge amount of pressure. We were all dealing with very high caseloads and I alone was allocated approximately 50 to 60 cases at any one time. This excessive caseload was becoming increasingly unmanageable. Within my caseload were three very challenging and time consuming cases which required my involvement in legal proceedings and extensive contact with external medical professionals. At the time, I felt like I was working in survival mode. The cases that I prioritised were those at the highest level, for example involving significant safeguarding concerns, court proceedings or the involvement of the mental health team.
- 63 We were also significantly understaffed due to long term sickness and people leaving the team but not being replaced. This made it even more difficult to manage caseloads.
- 64 I was also experiencing significant issues in my personal life. On 31 January 2024 my husband and daughters were involved in **DPA** This **DPA** affected my **DPA** **DPA** mental health. Additionally, I was under the neurology team at the hospital following a suspected seizure in June 2024 and the potential for a diagnosis of epilepsy had a further impact on my mental health. This also reduced my time to write visits, complete written work, as I was relying on public transport

to get to visits. I was also having to deal with significant issues relating to my daughter's education, which again took up lots of my mental space and reduced my coping strategies.

- 65 All of these factors meant that it was not always possible for me or the rest of the team to find sufficient time to review matters or conduct follow up meetings and mental capacity assessments. I would often have to deal with incoming calls and emails and the complex cases that I was dealing with demanded me spending significant time on them. I therefore had to prioritise as best I could. The tasks were done, just not always within the timescales we were supposed to work to.

### **Information gathered from other departments of LCC and other agencies**

- 66 When I spoke to AR's father on 7 November 2023, he raised concerns that AR would be taken off his school enrolment permanently, as documented in my case note dated 7 November 2023, which I exhibit as **LCC000438**.
- 67 Whilst I had sought to reassure AR's father that this would not happen as AR was likely to remain on the roll until the end of the academic year, I emailed Inclusion Service worker, Sharon Rowland, on 7 November 2023 to seek confirmation of this. I exhibit a copy of my email to Sharon Rowland as **LCC001573** Sharon confirmed that AR had an EHCP and place at Presfield, there were no plans for the EHCP to cease and it was AR that was choosing not to attend a place of education and would not engage.
- 68 Sharon also confirmed that there was an early review meeting arranged for 1pm on Wednesday 15 November 2023 to look at what is in place and the future. I was unable to attend this due to a prior appointment and I let Sharon know what I would not be attending the early review meeting but would catch up with her before or after the meeting. I did not have any further contact with Sharon or Inclusion Services.
- 69 I did not contact any other agency.
- 70 LCC000438 is a full record of the electronic case notes that I entered onto AR's electronic case file on LAS.

## **Arrangements and preparations for the initial visit and assessment**

- 71 The Transition referral form provided a contact telephone number for AR's father, Alphonse Rudakbana. I telephoned Alphonse using my work issued mobile phone at 11.48 on 14 August 2023 and I left a voicemail, as the call was unanswered. I also sent a follow up email to Alphonse, which I exhibit as **LCC000533**. I subsequently received four missed calls from Alphonse at 15.03, 15.04, 15.05 and 15.05.
- 72 I returned the calls at 16.08, when I had an initial telephone conversation with Alphonse and the call log for these calls is exhibited as **SW/12 – LCC001817**. During the call, it was agreed that I would attend AR's family home on 14 September 2023 at 16.00 so that I could carry out a Care Act assessment for AR. This is reflected in the text message that I sent to Alphonse following the call and which I exhibit as **LCC000529**.
- 73 I contacted Alphonse again on 14 September 2023, to explain that I was unable to visit as my car had broken down. I provisionally rearranged for the meeting to take place on 21 September 2023 at 16.00. Unfortunately, my car was still not going to be repaired by this date and it was not possible for me to complete the visit as it would have taken approximately two hours for me to reach AR's address using public transport. AR's parents had informed me that they were usually available in the late afternoon and it would have been too late for me to return home after completing a visit using public transport.
- 74 I therefore sent a further text message to Alphonse on 19 September 2023 at 11.48 to explain that I was still without a car as the repairs had not yet been completed. I explained that I would contact him as soon as possible after my car had been repaired and returned to me. Alphonse responded shortly afterwards to acknowledge my text message.
- 75 I then received a missed call from AR's father at 13.10 on 7 November 2023. I called him back at 13.12. During this call I apologised for the delay in arranging my initial visit and we agreed that I would attend AR's home on 9 November 2023 at 4.30pm to complete an assessment.

76 Although AR's case was allocated to me on 8 August 2022, it is usual procedure in the Transitions Team for the first assessment to be conducted when the young person is already 17. I made contact with AR's father on 14 August 2023 after I received a copy of AR's Transition referral form which was attached to an email that I received from Theresa Martin earlier that day. The email from Theresa Martin sent on 14 August is exhibited as **SW/03 – LCC001809**. Theresa's email would have identified those young people who had recently turned 17. AR was one of them and it was therefore an appropriate time to commence the assessment process.

77 After I arranged the visit at AR's home, I prepared for the visit by speaking with **DPA** Rachel Gudgeon, to gain some insight into the family. I was aware that AR's parents could be challenging to work with at times **DPA** **DPA** and I therefore sought guidance from Rachel in relation to how best to approach AR's family, primarily his father, Alphonse. I was informed by Rachel that Alphonse was employed as a taxi driver, and it was therefore more convenient to speak with him than AR's mother due to her shift patterns working as a nurse. Rachel explained that although AR's parents had been challenging in some of her previous meetings with them, she did not think I would encounter any issues when contacting Alphonse by telephone to make initial contact. Rachel advised me to introduce myself to AR's family and explain the purpose of my role and involvement in AR's case, clearly explaining the parameters of the level of support that could be offered by the LCC Transitions Team to AR.

78 I spoke to Alphonse at some length prior to the meeting on 9 November 2023. I also listened to and addressed his immediate concerns about AR's enrolment at school by contacting the Inclusion Services worker to determine the position.

79 Having reflected on this, I do not believe that this was sufficient preparation for the visit.

#### **Initial visit and assessment on 9 November 2023**

80 The visit to AR's family home took place at 16.30 on 9 November 2023 and a screenshot of my work calendar on 9 November 2023 is exhibited as **SW/14 – LCC001819**

- 81 I arrived at the property slightly early, just before 16.20. I knocked on the front door but no one answered. I therefore telephoned Alphonse at 16.20 and left a voicemail advising that I was outside. The call logs of calls with Alphonse are exhibited as **SW/13 – LCC001818** I returned to my car to wait and telephoned Rachel Gudgeon at 16.24. I cannot recall what we discussed, although I am likely to have asked her if she had an alternative contact number for AR's family. I then missed a telephone call from Alphonse at 16.25 but answered a second call from him at 16.27. I told Alphonse that I had knocked on the door, no one had answered and so I had returned to my car, which was parked outside the property. Alphonse told me to go to the front door, which I did. He met me there and I went into the property at approximately 16.30.
- 82 When I entered the property I was greeted by both of AR's parents. They explained to me that AR had gone upstairs as he was too anxious to see me. Alphonse explained that this was the reason for the delay in the front door being answered as Alphonse was keen for AR to be present during my assessment. It is not unusual for a young person to refuse to see me during my initial visit and so this did not raise any concerns. AR remained upstairs for the entirety of my visit and I did not see him at all during this visit.
- 83 I spoke with both of AR's parents in AR's absence and I went through the elements of the Care Act assessment with them, guided by the precedent FACE overview assessment form. AR's education was discussed first, as Alphonse raised concerns that AR was not attending school and he was worried that AR would be removed from the roll. AR's parents were concerned that he would not have an education provision in place. I provided reassurance by explaining that AR was likely to remain on the roll until the end of the academic year.
- 84 AR's parents asked questions about the different types of care and support that could be offered to AR by LCC. I explained that in other similar cases, for example involving young persons who were so socially isolated that they would not leave their bedroom, a care package had been implemented involving a carer attending the family home to enable the young person's parents to leave the property and have time to themselves. I explained that this could be a suitable package for AR as it would provide him with an opportunity to begin building trust with a carer when they attended his home, with a view to eventually leaving the home accompanied by the carer and hopefully lesson his social anxiety.

85 We discussed AR's social anxiety further, and AR's parents explained that they had previously had to cancel appointments due to AR refusing to get in the car, or refusing to put his shoes or coat on in order to leave the house. AR's parents appeared to be frustrated that he would not leave the house, despite their efforts to help him with this. I therefore considered that a gradual introduction of care could be appropriate in AR's case, and AR's family were receptive to this.

86 AR's family explained that AR had received previous input from LCC Children's Services, however AR refused to engage, thus ending their involvement. I explained that the support arranged by the Transitions Team would not be implemented until AR turned 18 in August 2024 and so advised AR's parents to contact LCC Children's Services if they required any earlier support. AR's parents explained that they would approach Children's Services if they considered that their input was needed. I considered AR's parents to be competent to progress this themselves if required.

87 I discussed the previous involvement of CAMHS in AR's case with AR's parents. It was explained to me that CAMHS had been involved previously due to AR's anxiety, however, due to his lack of engagement it was unclear whether CAMHS remained involved in AR's case. As part of my usual information-gathering procedure when conducting an initial assessment,

88 I asked AR's parents whether they were happy for me to contact any other agencies as required, and whether there were any other external agencies that AR was known to except for CAMHS. AR's parents confirmed that he was not known to any other external agencies but they were happy for me to make contact with other professionals as and when required.

89 AR's parents did not raise any concerns regarding potential risks posed by AR with me.

#### **Notes and records made**

90 The only contemporaneous notes that I made of the visit were recorded on the blank FACE overview assessment form, which I exhibit as LCC001567 I had been unable to gain access to the internet whilst I was at AR's address but did take

notes on the blank FACE overview assessment form. I saved this document as a Microsoft Word document to a folder on my desktop.

- 91 I did not make any handwritten records of the visit on 9 November 2023. I confirmed this in an email sent to Neil Willcocks and Tom Goldsworthy on 24 April 2025, which is exhibited as **SW/26 - LCC001831**
- 92 On 30 July 2024, the day after the attack on 29 July 2024, I was asked by my line manager, Emma Clough, to call her. I did and during our conversation, she asked me to complete an electronic case note documenting my visit to AR's address on 9 November 2023. Emma authorised me to access AR's file on LAS to enter the case note retrospectively.
- 93 I therefore completed the electronic case note on LAS (LCC000438) on 30 July 2024. This was based on my notes on the FACE overview assessment form as well as my memory of the visit.
- 94 At some point, Emma is likely to have seen a copy of my original notes on the FACE overview assessment form that I completed on the day as she asked me to draft another document so that it could be better understood by others. I cannot remember exactly when she asked me, but think it was during the phone call I had with her on 30 July.
- 95 I therefore prepared the more detailed FACE overview assessment form (**LCC000534**) and saved this as a Microsoft Word to the folders on my desktop. I could not add this to LAS as I did not have authority to access AR's case on LAS to action this. This more detailed FACE overview assessment form would still not be considered a finalised document for the purposes of an assessment, but contained sufficient detail for others to understand the contents.
- 96 I then received an email from Neil Willcocks at 15.08 on 7 August 2024 asking if I was able to share the notes I recorded for AR's assessment. At 15.14 I sent him the more detailed FACE overview assessment form that I had prepared on Emma's request.
- 97 Neil then sent a further email at 16.02 on 7 August 2024 checking whether these were the original notes as it was these that he needed to see. I replied at 16.10,

advising that I did not have any handwritten notes but that I had typed notes into the FACE overview assessment form as I could not get internet connection at their house. I explained that the notes I had made were originally shorter sentences that I had put in to expand on when I was not in the house. I also advised him that Emma had asked me to update this so that it could be understood by others as my sentences potentially wouldn't make sense to others looking at it at first glance.

- 98 Neil asked me if I had saved a separate copy of the original notes. I therefore restored the previous version of the FACE overview assessment form to show the notes I had taken on the visit to the house and sent these to Neil at 16.20 on 7 August 2024.
- 99 I ticked the 'no difficulties' box for 'behaviour as affecting self and others' in the tick box section of the FACE overview assessment form (**LCC000523**) as there is not a 'not known' box available. All of the boxes have to be populated in order to save the form in LAS. I added 'Behaviour affecting self or others - not known' in the comments section as this reflected the position. I had not had the opportunity to review or consider behaviours at this stage as I was not given any details relating to this by the family. The document was completed offline so strictly speaking, I could have left the tick box blank, but would have ticked this out of habit and as a reminder of which box I would have to tick when I added this to LAS to make sure I could save it.
- 100 At the time of my visit on 9 November 2023, my understanding was that the only risk posed to AR was social isolation based on his reported levels of anxiety and the potential impact of this upon AR and his family. I was not aware of AR having a history of violence or aggression towards others, and no such risks were referenced on the Transition referral form that I had received on 14 August 2023. AR's parents did not raise any concerns with me regarding potential risks posed by AR or his behaviour.
- 101 I accept that I had not fully reviewed the information contained in the C&F Assessment or accessed LCS.
- 102 Even when looking at this in hindsight, I believe that the notes I made relating to the meeting on 9 November 2023 were adequate. They were brief but they were sufficient for my own purposes to enable me to complete the FACE overview

assessment form on LAS. My notes covered each section in the form as I used a precedent blank form as the structure of my discussions with the family, and I would have recorded exactly the same notes had I been able to access the internet during the meeting.

- 103 The FACE overview assessment form was not completed on LAS and so was not on the system. This meant that the usual prompts for actions to be taken which were generated by the LAS system were not activated and so there were not only no prompts for me to work on this case, there were no prompts for my line manager, Emma, to review the case. The form and case note were also not available to be viewed on the system by anyone other staff member.

#### **Steps taken post initial visit/assessment**

- 104 Following an initial visit/assessment I would usually arrange to see the young person alone, even if I had seen them at the assessment meeting or otherwise. If one was required, I would have to complete a mental capacity assessment and meeting the young person alone would be a good opportunity for me to do this.
- 105 I may have to offer the young person different ways to engage, for example, in writing, as some were reluctant to meet with me.
- 106 I would also usually make contact with any relevant departments or external agencies who have been identified as being involved, for example the Inclusion Service or CAMHS.
- 107 Once I was satisfied that I had all of the information I required to complete the assessment, I would then draft the FACE overview assessment form and upload this to LAS.
- 108 I would then put the package of care together in accordance with what had been approved. I would also hold a support planning meeting with the young person and their family to explain the package of care to them. This can be done over the telephone or in person.
- 109 The FACE overview assessment form would have to be uploaded before the young person turned 18. If direct payments were in place, we were expected to have

uploaded the form at least 6 to 8 weeks prior to this. If a care agency were to be engaged, the form would have to be uploaded at least 4 weeks prior.

- 110 Following the visit on 9 November 2023, I intended to document the notes of my assessment on AR's electronic case record on LAS and then arrange a follow-up meeting with AR in around February 2024. This would also have provided an opportunity for me to meet with AR in person. I had planned to hold the meeting in February 2024 as there was nothing obviously urgent to deal with.
- 111 Due to the large volume of my caseload, and a number of young persons' cases which were deemed 'high risk' taking priority, I unfortunately did not complete AR's assessment in the way that I usually would. I did not prepare an electronic case note of my meeting on 9 November, I did not upload an electronic FACE overview assessment form to LAS and nor did I take steps to prepare AR's care package prior to 29 July 2024.
- 112 Had I taken these steps, I would have reviewed all of the relevant documents relating to AR, including the C&F Assessment and the records and documents held on LCS. This would have given me details of any external agencies involved with AR and would have enabled me to become familiar with any agencies and professionals already in contact with him. I would usually spend around half a day reviewing a case to identify any relevant points prior to the assessment being finalised.
- 113 Had I fully reviewed the C&F Assessment either before or after completing my initial assessment, I would have seen the concerns regarding AR's behaviour. However, and even with the benefit of hindsight, I would likely have considered this to be a historical risk that had been investigated accordingly by other agencies, as opposed to a current risk. That said, I would still have raised this with my line manager. It is also likely that I would have contacted Children's Social Care to gather more information on how historical the risk actually was, whether this was ongoing and what actions needed to be taken to address this.
- 114 I am not able to comment on what was contained in LCS as I did not access this.

## **Supervisions**

- 115 AR's case was discussed in my supervision sessions with Emma Clough on 15 November 2023, 10 January 2024, 7 February 2024, 5 March 2024 and 19 April 2024. I exhibit the supervision records as SW/57 – LCC000508, SW/60 – LCC001806, SW/61 – LCC000505, SW/62 – LCC000504 and SW/63 – LCC000510
- 116 The records of the supervision meetings were prepared by Emma and I believe they are an accurate record of the matters discussed.
- 117 We aimed to cover all of my caseload in supervision but due to the high volume of my caseload, it was not possible to discuss every case listed within the record of the meeting as more urgent and challenging cases took priority. The urgent matters discussed during the supervision sessions are highlighted in red text. We sometimes had to do supervision over two sessions due to the number of cases there were to review.

## **Record keeping**

- 118 With the benefit of hindsight, I do not consider that my record keeping relating to AR's case was adequate. Whilst I do not consider that the adequacy of my record keeping negatively impacted on my decision making regarding the provision of care being arranged for AR upon him turning 18, I acknowledge that I should have taken steps to incorporate the notes from the meeting on 9 November 2024 into a FACE overview assessment form and add this on to LAS so that this was properly recorded in AR's electronic case records.

## **Professional exploration**

- 119 With hindsight, I do not consider that my exploration of AR's case was adequate. At the time of my visit and assessment at the meeting on 9 November 2023, I had not fully reviewed AR's C&F Assessment which I now know described two previous referrals to Children's Social Care on 8 November 2019 and 12 December 2019.
- 120 Although the document recorded that there had been no further incidents of this nature since and no risk factors were identified in relation to AR's previous

behaviours, had I been aware of these concerns, I would have referred the case to my line manager and contacted Children's Social Care to obtain additional information or support regarding any risks posed by AR prior to my assessment. This would have enabled an assessment of risk to be undertaken and the opportunity for my line manager to take whatever further action they deemed necessary.

- 121 As far as I was aware at the time of my visit and involvement in AR's case, the main risk involved was social isolation resulting from AR's social anxiety and him not leaving the house. Had available resources been used to gather information there could have been a heightened awareness of the significant risk of harm to others, although based on what was contained in the C&F Assessment, this presented more as a historical risk.

### **INVOLVEMENT WITH OTHER AGENCIES**

- 122 In relation to active involvement with other external agencies with AR, I had spoken with Inclusion Services but was unsure how active CAMHS' involvement was and I did not contact them at that time. This had been something I had planned to do and on reflection, this potentially could have provided more detailed insight into historic and any current risk.
- 123 I did not make contact with any other agencies in relation to AR's case, although on reflection I could and should have contacted CAMHS and the family support worker in Children and Family Wellbeing Services who made the original referral to the Transitions Team. It would also have been appropriate for me to contact Children's Social Services in relation to the two previous referrals.

### **REFLECTION ON EVENTS**

- 124 I was not directly involved in the LCC Review of Transitions Service Practice which I exhibit as **LCC000434** and **LCC000443**. I did, however, attend a pre capability discussion with Emma Clough, on 4 September 2024, the note of which I exhibit as **LCC000503**. This was called in response to some of the practice issues the review identified in my caseload. Emma and I discussed and reflected on these, as well as the issues I was experiencing in my personal life around that time that were impacting on my work.

- 125 During the discussion on 4 September 2024, actions were agreed to improve practice. These included continuing to apply the RAG rating approach to prioritise tasks, active engagement with colleagues, additional supervision, caseload reviews and progress checks with my line manager and additional training on core social work processes.
- 126 On reflection, the risk that AR posed to others was not adequately identified and addressed while I was involved in AR's case. AR was deemed a low level case and the level of supervision into this case that I had with my line manager reflected this. Had further exploration taken place, that would have led to greater knowledge of the risk.
- 127 If I had prepared the case note from the meeting on 9 November 2023 and uploaded a completed FACE overview assessment form to LAS, case notifications would have been generated by LAS to prompt actions and potentially the case would have been reviewed in more detail at an earlier stage.
- 128 There were a number of other factors which meant that the risk AR posed to others was not identified.
- 129 Risk was not specifically highlighted to either myself or the Transitions Team on referral. This case was therefore not identified as one that required additional measures and was deemed low level.
- 130 Additionally, I have since been told that the majority of the information about AR was saved on the Early Help Module system. At the time, the Transitions Team worked predominantly from information held on LCS.
- 131 The information about AR that I have now seen appears to represent the risk as a historical risk, rather than a current or ongoing risk. Julie and Emma would both have been able to access the case on LAS and LCS and would have reviewed the cases prior to allocation at the transition discussion forum meeting. There were no case notes on LAS identifying further action required on AR's case.
- 132 I feel that this was also contributed to by the lack of time everyone in the Transitions Team was experiencing, my own very high caseload and the approach that was

taken to reviewing the documents provided on referral. This was further exacerbated by the issues I was experiencing in my personal life.

133 More could have been done following AR's referral to the Transitions Team. More information could and should have been gathered in relation to AR once he had been referred to the Transitions Team and deeper exploration within LCS and with other agencies would likely have identified a risk.

134 Additionally, agencies such as Inclusion and CAMHS did not explicitly inform of any current risk. Had they done so, I would have taken steps to respond to this, including referring to my line manager and contacting Children's Social Services. Without being aware of the risk, this could not be mitigated.

135 When I first started my employment as a qualified social worker, I completed extensive mandatory training specific to social work over a 12 month period. We also covered how the systems operated to ensure we were able to use these in practice. I also completed recall days of training every three months, which covered topics such as bereavement and loss and substance misuse.

136 I feel that the training adequately prepared me for my role.

137 I have also benefitted from reviewing this training and the additional training I have undertaken since the LCC review. I have been offered additional support

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## **IMPROVEMENTS**

138 There have been a number of changes made by the Transitions Team since these events, which are set out below:

- Referrals - the referral module was changed almost immediately to include a section on risk. Previously when a social worker was allocated a case in the Transitions Team, they would be able to see which departments were involved, such as the school or GP, but the contents of the referral form were relatively basic. There was no real

insight into someone's needs; it was more of an administrative process to action a referral to the Transitions Team. The referral forms are due to be changed again and we are waiting for these to be implemented. The team was notified about the change in a team meeting once this had been put in place.

- Recruitment – four new permanent members of staff have recently been recruited into the Transitions Team. They are all social workers, with two coming in as Assessed Supported Year in Employment (AYSE) and two coming in as qualified social workers who have transferred from another local authority. Another social care support officer has also joined. Although the new staff are still building on their experience as they are all new to the Transitions Team, this has greatly assisted with the work load levels, meaning that social workers can dedicate more time to each individual case and have a greater depth of understanding and effectiveness. The team were notified of the successful recruitments in one of the online morning team meetings as soon as they had completed the onboarding process. There are two further posts to fill – one grade 9 and one grade 8 position – and the team is actively recruiting to fill these roles.
- Processes – we now have timescales to work to once a referral is received. This means that it is easier for cases that have not been reviewed to be identified both by a social worker and their line manager in supervisions with the intention of ensuring no case is left without being reviewed. These have been positive changes to ensure working practices are continually improved.
- Systems – staff in the Transitions Team now have access to the Early Help Module. This was introduced in Spring this year and training was provided to us all to enable us to access and view items in the system, although we are not authorised to make any additions to the system. This gives us access to all of the information that is available about the young person and we have been trained to review the Early Help Module to ensure that we access and consider the information on every case. I have had access to this since 11 April 2025.

- Collaboration – the team is now required to work from an office two days a week. We attend County Hall once a month and this tends to be on a Thursday. This provides greater support to all members of the team, promotes knowledge sharing and encourages professional challenge on our cases, as do the newly introduced engagement sessions. We are also due to have a rota for duty work where a social worker and support worker are both on duty. This ensures cover at all times and provides greater support within the team.
- Refresher training – this has been offered and I have completed this, which I found very helpful. I have also benefitted from the support given to help me manage my caseload and prioritise tasks that are due more effectively. I now set time aside in my diary to avoid being disturbed and allowing me to progress written work on cases on the system. This process can take between a couple of hours to half of a working day.
- Internal review – a consultant, Luke Addams, was brought in conduct an internal review. He spoke to all staff within the Transitions Team individually in February. I met with him on 23 February 2025 and we talked about what had happened, how we felt about communication within the Transitions Team and learning points to take from this.
- Structure – the whole structure within adult services has changed which has led to a feeling of a much more open door policy.

139 In the future, I feel that a better understanding within LCC and across our partner agencies of the scope of work the Transition Team covers would assist. At present, there is confusion over what we can and cannot do and my experience is that young people are often referred to us when they should properly be referred to either child or adult social services.

140 It is currently difficult to clearly identify on LAS all of the agencies that are involved with the young person. Knowledge around which agencies are involved would greatly assist the Transitions Team.

141 In my work as a social worker within a different local authority, we used a system that provided a visual marker of any known risk on the home screen of a case. This information was available at a glance to all staff accessing the system and ensured all workers were able to consider and take measures to address the risks highlighted, which would assist our work in the Transitions Team.

### Statement of Truth

I believe that the facts stated in this witness statement are true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.

Signed: **Signature**\_\_\_\_\_

Dated: \_\_\_\_\_12 September 2025\_\_\_\_\_

## Index to the Witness Statement of SUZANNE WALMSLEY

| Exhibit No. | Inquiry reference No. | Document description                                                                                |
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| 2           | LCC001808             | Email from Theresa Martin to Suzanne Walmsley<br>08.08.2022                                         |
| 3           | LCC001809             | Email from Theresa Martin to Suzanne Walmsley<br>14.08.2023                                         |
| 4           | LCC001810             | AR Transition Form sent by email 14.08.2023                                                         |
| 5           | LCC000110             | AR C&F Assessment (PDF) sent by email<br>14.08.2023                                                 |
| 6           | LCC001811             | Screenshot of Microsoft Teams messages<br>between Theresa Martin and Suzanne Walmsley<br>14.08.2023 |
| 7           | LCC001812             | Email from Theresa Martin to Suzanne Walmsley<br>14.08.2023                                         |
| 8           | LCC001813             | AR C&F Assessment (Microsoft Word) sent by<br>email 14.08.2023                                      |
| 9           | LCC001814             | Email from Theresa Martin to Suzanne Walmsley<br>04.12.2023                                         |
| 10          | LCC001815             | AR Transition Form sent by email on 04.12.2023                                                      |
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| 12          | LCC001817             | Call Log – Suzanne Walmsley and Alphonse<br>Rudakbana 14.08.2023                                    |
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| 23 | <b>LCC001828</b> | Further email exchange between Suzanne Walmsley and Emma Clough 03.12.2024                                                                                                 |
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