



South West London and  
St George's Mental Health  
NHS Trust



METROPOLITAN  
POLICE



CLARION  
HOUSING



# Cuckooing

National safeguarding week 16-22 November 2020

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# What is cuckooing?

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## A definition

Cuckooing is when people take over the home of a vulnerable person, in order to use it for criminals purposes such as dealing drugs.

It can be a gradual with one person befriending the vulnerable person before introducing more criminals in to the home - with the sole objective of taking over the property.

# What individuals are at risk of becoming victims of cuckooing?

- ▶ Victims are usually considered to be vulnerable
- ▶ Drug users.
- ▶ Older people
- ▶ Residents with mental or physical health conditions
- ▶ Residents that have learning disabilities
- ▶ People involved in prostitution
- ▶ Single parents
- ▶ Residents facing financial hardship
- ▶ Isolated
- ▶ Residents that live with forms of addictions

Mr Jones was murdered at his home address in December 2019. He was a 53 year old talented Jazz musician, who was a victim of cuckooing.

- ▶ • Open to Mental Health Services
- ▶ • Known locally to police for ASB/drug abuse/low level criminality
- ▶ • He reported his concerns on numerous occasion- including the fact that he had been locked out of his address.
- ▶ • In December 2019 he was reported missing by a mental health professional
- ▶ • He was found deceased on 3rd January 2020
- ▶ • The cuckooing is linked to 'county lines'
- ▶ • Subject to a Safeguarding Adults Review.

# Common characteristics of the cuckooing process

- ▶ It involves controlling the victim: this enables drug dealers to operate out of the sight of the police
- ▶ Pacifying of the victims through giving them drugs
- ▶ Intimidation
- ▶ Threats
- ▶ Violence

# How to spot the signs in your neighbourhood

- ▶ Increased traffic. Vehicles arriving and leaving in quick succession
- ▶ Anti social behaviour such as loitering.
- ▶ Open drug dealing
- ▶ Seeing new faces in and around the property.
- ▶ Seeing the actual resident infrequently
- ▶ Increase in numbers of visitors to a property day and night

# How to spot the signs of a victim of cuckooing

- ▶ Engagement with support services has reduced
- ▶ Unexplained injuries such as bruising
- ▶ Debts cleared in full including housing arrears
- ▶ Appears withdrawn, fearful of the criminals in the property
- ▶ New unidentified visitors to the property
- ▶ Appearance changes i.e. clothing, may wear more expensive clothing or will appear more dishevelled.
- ▶ A change in the amount of time the actual resident spends in the property

# Case study one

- ▶ Mr Blogs is a middle aged man who lives in a rented property in Merton. He has multiple health conditions. Although Care Act eligible he wishes to manage independently. He is a known drug user and is supported by the local drug support services. The Safer neighbourhood team are very familiar with him and have known him for years.
- ▶ Neighbours have recently started to report that people associated with Mr Blogs are loitering in the block and that there are people coming in and out of his property at all times of the day and night. The neighbours have reported this to the landlord.
- ▶ Despite numerous attempts agencies have failed to engage with Mr Blogs. Agencies hold strong views that he is inconsistent, telling different agencies different things.



What steps would you take at this point?

# What we did

- ▶ A multi agency meeting is convened because the local pharmacy where Mr Blogs collects his script has contacted the local drugs service. They advised his key worker that Mr Blogs has reported that people in his home have been taking his meds and money and that he had bruising to his face.
- ▶ All agencies in the meeting share the view that nothing can be done in this case because Mr Blogs is the Perpetrator and often a nuisance tenant. However the drugs service feel that before a decision not to offer further support is made another attempt should be made.
- ▶ The safeguarding team had previously tried to get in contact with him but he had not responded.
- ▶ A number of options were considered such offering a management transfer, Partial Closure Notice etc.

# Continued

- ▶ However in the first instance writing a note and leaving it at the pharmacy was the agreed next step, leaving the contact details of the safeguarding team.
- ▶ A few days later Mr Blogs called stating that he was frightened to be at home because there were people in the property he was scared to ask them to leave. He said that he sometimes opted to sleep in the communal areas in the block or car park rather than in his flat.
- ▶ He advised the people in his home were selling drugs, taking the majority of his money, taking his methadone clothing and had hit him. He advised that he wanted them out but he was scared of reprisal.
- ▶ A second professionals meeting led to a Partial Closing Order (PCN) being applied for.

# Partial Closure Order (PCN) can be applied for if .....

- ▶ •A person has engaged, or (if the order is not made) is likely to engage, in disorderly, offensive or criminal behaviour...
- ▶ •The use of the premises has resulted, or (if the order is not made) is likely to result, in serious nuisance to members...
- ▶ •There has been, or (if the order is not made) is likely to be, disorder near those premises associated with the use of...
- ▶ •The order is necessary to prevent the behaviour, nuisance or disorder from continuing, recurring or...
- ▶ The case was taken to court and a PCN was granted

# Case study two

- ▶ Mr Smith is a 68 year old gentleman who lives in sheltered accommodation. He has been known to the local authority for a number of years. He is assessed as having Care Act eligible needs and is being supported by staff in adult social care
- ▶ The team are contacted in 2017 to say that Mr Smiths “friends” may be taking his money.
- ▶ The friends are initially considered to be helpful and asked to support with clothes washing tasks
- ▶ January 18-The management is concerned about Mr Smith’s friends, who visit at all hours of the night and are often drunk and rowdy. Several other residents have been making complaints, and the management is in discussion with the legal department. He has signed an antisocial behaviour agreement with them, and is regularly breaching it. This and the rent arrears mean he is in danger of losing his placement.

# Continued

- ▶ Jan 18 - merlin report received following reports that there is an individual loitering outside the block.
- ▶ they have concerns for the resident of the sheltered accommodation, the manager stated that he often has drunk
- ▶ there are male going in and out of the care home to go in to flat 30. She believes that the subject is being taken
- ▶ advantage of by these other males, and they are using his flat to drink alcohol and eat food. The subject is
- ▶ believed to be a vulnerable male. The male visitors often cause issues with the other residents as they are elderly and vulnerable, the males congregate around the entrance and block the front door, causing other residents to be intimidated.

# continued

- ▶ Multiple Merlin reports and safeguarding referrals made due to the Mr Smith vulnerability. When visited it is reported that the gentleman appears nervous around police
- ▶ As the case progresses, there are numerous reports that the visitors are exploiting him by taking his bank cards and leaving without money or food.
- ▶ Nov 18- case first discussed at CMARAC. Outcome joint working
- ▶ Where we are at now?

# Good practice: What you should do if you receive a case like this?

- ▶ Screen the referral. Often the person will have care & support needs
- ▶ They may not accept services because of fear
- ▶ Be curious
- ▶ Find out what other agencies are involved, the person is often known to various agencies. What do they know
- ▶ Convene a multi - agency meeting
- ▶ Refer to CMARAC- but be clear about what you are trying to achieve by doing this.
- ▶ Discuss the case with the safeguarding team



Any questions?



Are there any cases that you want to discuss?