

ADOPTING A FAMILY APPROACH

Short Guide Series

Recognising Self-Neglect in Adults

What is Self-Neglect?

Self-Neglect covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. It should be noted that self-neglect may not prompt a section 42 enquiry. An assessment should be made on a case-by-case basis. A decision on whether a response is required under safeguarding will depend on the adult's ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this, without external support' (Care and Support Statutory Guidance, The Care Act 2014).

Self-Neglect can be:

- An adult who lives in a very unhygienic environment and may neglect household maintenance, for example, living with a rodent infestation or living with a completely blocked toilet, rotten floorboards creating trip hazards or hoarding items which create a fire risk.
- An adult who refuses necessary help from health and/or social care staff in relation to personal hygiene and care. The individual may suffer with poor personal hygiene, poor/delayed wound healing or pressure ulcers be over/underweight and may have overgrown nails.
- An adult with a poor diet and inadequate nutrition. For example, there is little or no fresh food in the fridge, or food is mouldy and out of date.
- An adult who struggles to meet their medical needs including management of long-term conditions (for example, diabetes etc), have difficulty attending medical review appointments and may self-discharge from hospital.

The impact of an individual who self-neglects and hoards may affect others in the household so practitioners may need to take a 'family approach' when engaging with the person.

Local Case Reviews

- [Mr A](#) - Portsmouth Safeguarding Adult Review published in 2014. Themes: lack of a clear medical diagnosis, poor communication, and coordination amongst the various agencies and practitioners involved in Mr A's care. Additionally, there was a lack of a

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robust risk assessment, and the availability of commissioned care provision over a bank holiday period.

- [Adult P full report](#) and [review briefing](#) - Southampton Safeguarding Adult Review published in 2019. Themes: Adult P was known to services and had a history of alcohol dependency which impacted on her health and wellbeing. Adult P spent a great deal of time homeless and had a substantial history of self-neglect.
- [Howard](#) - Isle of Wight Safeguarding Adult Review published in 2019. Themes: long history of alcohol abuse, mental health issues and homelessness. Howard was considered to be at risk of financial and physical abuse.
- [Mr W](#) - Isle of Wight Safeguarding Adult Review published in 2015. Themes: self-neglect, mental capacity and communication both between services and with Mr W about his background and interests.

Key Learning from Reviews

Non-engagement - People can spend long periods of time subject to interventions from lots of different services which may have limited impact due to staff capacity and limited resources. They may not want to engage with practitioners and may refuse to acknowledge that they are having difficulties managing regular daily tasks. This could be due to physical illness which has an effect on abilities, energy levels, attention span, organisational skills or motivation.

Holistic Care planning - Practitioners need to keep the individual at the centre of the process. They should also seek to understand the whole picture of a person's life, their interactions and other practitioners involvement. Early intervention is a key factor in reducing harm. The long-term impact of somebody self-neglecting can equal a higher risk of serious harm and can be potentially fatal.

Complex Case Management - The risks associated with individuals who self-neglect is high and a multi-agency approach should always be used to share decision making and to assess risk. If additional factors such as domestic violence and abuse, substance misuse and mental health issues are presenting alongside self-neglect this raises the risk of serious and significant harm. Work patterns and resources don't often support long-term, relationship-based work.

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Housing issues - Homelessness, breach of tenancy, rent arrears, poor property maintenance and anti-social behaviour are apparent in many self-neglect cases.

Trauma Informed Practice and Adverse Childhood Experiences (ACES) - ACES are stressful events occurring in childhood such as domestic violence, abuse and the death of a parent. Evidence has found the events can have a profound lifelong impact on the individual including their health outcomes in adulthood. An individual who hoards may have experienced a traumatic event. Self-neglect can be as a result of brain injury, dementia or other mental disorder, obsessive compulsive disorder or hoarding disorder, reduced motivation as a side effect of medication, and addictions.

Mental Capacity (2005) - Application of the Mental Capacity Act can be very complex in cases of self-neglect. Formal assessment of an individual's mental capacity, which is decision and time specific, should be recorded accurately. If there is a reason to doubt that the individual is able to make their own informed decisions there should be an understanding of potential fluctuating capacity due to substance misuse.

4LSAB Multi-agency working and communication - Identification of a lead professional (not necessarily a social worker) to coordinate, if appropriate, the application of formal safeguarding procedures, or Multi-Agency Risk Management (MARM) Framework to bring together all practitioners involved with an individual. Practitioners need to utilise the [4LSAB Escalation Policy](#) when the response to concerns is not adequate to keep the individual safe from further harm or abuse.

Relevant Legal Literacy and Legislation (Source: [Social Care Institute for Excellence \(SCIE\)](#))

- **The Care Act (2014) statutory guidance** - self-neglect is included as a category under adult safeguarding.
- **Article 8 of the Human Rights Act 1998** gives us a right to respect for private and family life. However, this is not an absolute right and there may be justification to override it, for example, protection of health, prevention of crime, protection of the rights and freedoms of others.
- **Mental Health Act (2007) s.135** - if a person is believed to have a mental disorder and they are living alone and unable to care for themselves, a magistrate's court can authorise entry to remove them to a place of safety.

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- **Mental Capacity Act (2005) s.16(2)(a)** - the Court of Protection has the power to make an order regarding a decision on behalf of an individual who lacks capacity. The court's decision about the welfare of an individual who is self-neglecting may include allowing access to assess capacity.
- **Public Health Act (1984) s.31-32** - local authority environmental health could use powers to clean and disinfect premises but only for the prevention of infectious diseases.
- **The Housing Act 1988** - a landlord may have grounds to evict a tenant due to breaches of the tenancy agreement.

Best Practice

- **Adults who self-neglect may not recognise it for themselves.** Practitioners can sometimes assume this is a 'lifestyle' choice, or an 'unwise choice'. It is best practice for practitioners to ensure that when adults make apparently unwise choices, this should prompt a proper consideration of the adult's mental capacity. Likewise, it is crucial to document when/if the adult's mental capacity has been considered (not just when it has been more formally assessed). This is especially important in terms of ensuring that we, as practitioners, reach 'defensible' evidence-based decisions.
- **Practitioners should be mindful of the potential for 'professional optimism'** in self-neglect cases. Longer-term working with adults who self-neglect can help to build trusting relationships which are key to achieving the desired change. However, it is also possible to become 'adjusted to risk' and become less concerned over time, rather than more concerned when change is slow to happen. Supervision is therefore especially important in cases of adult self-neglect. Ensuring that self-neglect cases are discussed regularly with peers, colleagues or managers will help to ensure our decisions and plans are respectfully open to professional challenge.
- Maintain a sense of professional curiosity! If the conditions within the individuals home gives rise to concerns, the lead professional needs to think about whether this should also prompt a concern for the adult's own health or wellbeing. Remember: self-neglect concerns can initiate a statutory safeguarding response and practitioners should always be open to the possibility that a case may meet the threshold for a section 42 enquiry.

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Further Information for Best Practice

- [4LSAB Multi-Agency Safeguarding Adults Policy, Process and Guidance](#)
- [4LSAB Multi-Agency Guidance on Self-Neglect and Persistent Welfare Concerns](#)
- [4LSAB Multi-Agency Risk Management Framework \(MARM\)](#)
- [4LSAB Multi-Agency Hoarding Guidance](#)
- [SCIE guide - Gaining access to an adult suspected to be at risk of neglect or abuse](#)
- Also see the Adopting a Family Approach [Short Guide](#) on the Mental Capacity Act (MCA) 2005 and the 4LSAB Multi-Agency Risk Management Framework (MARM)

What can I do if I am concerned for an adult at risk of self-neglect?

Safeguarding duties apply where an adult has care and support needs, are at risk of self-neglect, and are unable to protect themselves because of their care and support needs. Practitioners should seek to minimise the risk of harm to the adult whilst respecting their choices. However, remember that any abuse or neglect is unacceptable. If you believe a crime has been committed, please contact the police.

Practitioners can:

- Take action – don't assume that someone else is doing something about the situation.
- If anyone is injured get a doctor or ambulance.
- Make a note of your concerns, what happened and any action you take.
- If you think a criminal offence has been committed, contact the police straight away.
- Contact their organisational safeguarding team or lead for advice and guidance.
- Access supervision and support from your manager to discuss cases where self-neglect is an issue to help them understand the complexities of this area of work, the possibilities for intervention and the limitations.
- Make a safeguarding referral to the local authority detailing concerns – click the links below to take you to safeguarding adult contact information for each 4LSAB area:
 1. [Hampshire](#)
 2. [Isle of Wight](#)
 3. [Portsmouth](#)
 4. [Southampton](#)