Protecting adults at risk: Self-neglect – dilemmas and guidance

March 2014
Self Neglect and Hoarding Seminar

• Dear All

• Please note that after today’s forum, all PowerPoint presentations and/or documents will be uploaded to:

Aims of Presentation

1. To give a context to the issue of self neglect and safeguarding
2. To identify key practice issues
3. To identify key definitions and characteristics
4. To go through SCIE report number 46
5. Links to Pan London policy
6. To identify outstanding issues
Definition

• Self neglect is recognised as the failure or unwillingness to provide oneself with the basic care needs required to maintain health.

• Excludes a situation in which a mentally competent person who understands the consequences of their actions makes a conscious and voluntary decision to engage in acts that threaten their health or safety as a matter of personal choice.
Resources available to workers

• Social Care Institute for Excellence
• Skills for Care
• Croydon’s local policy
• E learning resource re Mental Capacity Act
SCIE Materials

• On self neglect
• On safeguarding and the law – with links to self neglect
SCIE Report Number 46

- Commissioned by DoH
- Safeguarding and Self Neglect Related
- Acknowledged that nationally no set guidance
- In US self neglect falls within SVA remit as it did in some London Boroughs prior to pan London
Self Neglect and Adult Safeguarding

Self-neglect and adult safeguarding: findings from research

PUBLISHED SEPTEMBER 2011
Safeguarding adults at risk of harm: A legal guide for practitioners
Self Neglect and The Law

• SCIE Report Number 50 – Safeguarding and The Law
• Case study 5 page 14
• Dilemmas in right to private life and our duty to protect
• See case study and discuss in groups*
• NEED TO P/COPY UP AND THEN GIVE RESPONSE
Legal Response to Self Neglect

• Case study 5
• Legal response only
Skills for Care Material Scoping Exercise

The key questions addressed through the study were:

• What are the range of social care workforce groups involved with self-neglect.
• What evidence is available on the nature and extent of self-neglect cases coming to the notice of social care agencies.
• What are the perceived workforce development needs in different agency contexts.
• What is the available evidence on the costs of unmet need in self-neglect.
• What are the potential roles for Skills for Care and other relevant partners in workforce development on self-neglect.
Skills for care – what works?

• Four factors were identified for effective working through these small-scale studies:
• Knowledge of self-neglect and the legal framework surrounding it
• Assessment skills
• Relationship-building skills and a client-centred approach
• Effective multidisciplinary working.
Challenges related to self-neglect per se:

• The complexity of the concept and its manifestations.
• Contrasting agency perspectives on thresholds that trigger concern.
• The need for complex assessment and difficulty of engagement.
• Balancing competing demands, for example, duty of care and respect for autonomy and privacy.
Challenges related to self-neglect *per se*:

- Assessment of mental capacity, particularly fluctuating capacity and the difference between decisional capacity (ability to make decisions) and executive capacity (ability to implement decisions).

- Interventions for self-neglect when many recognised forms of intervention require consensual engagement from the service user, and where the use of enforcement was recognised as necessary on occasion but unlikely to lead to long-term change.
Challenges related to self-neglect *per se*:

- Legal framework about which practitioners were uncertain or uneasy.
- Lack of training specific to self-neglect.
Challenges related to the organisational and service environments in which self-neglect work takes place:

• Barriers on access to services through the operation of eligibility thresholds.
• A culture that prioritises independence as a goal and operates care pathways which are not achievable in cases of self-neglect.
• Workflow patterns based on time-limited care management rather than longer-term involvement that would enable relationships to be built over time.
• Difficulties associated with interagency working.
Context and Capacity to Make Decisions

• Where exactly the boundaries fall between inability and unwillingness, and how to decide the extent of the competence of the individual concerned, is at the heart of efforts to tackle the problem.

• Having capacity does not equate to “there’s nought we can do”

• Need to work with people around risk
Categories of Abuse – 7 in Pan London

- Physical
- Financial
- Neglect
- Emotional
- Sexual
- Discriminatory
- Institutional
- NB Excludes self neglect
“Self neglect does not come under the scope of these procedures – which relate to circumstances where there is a person or agent, other than the adult at risk, who is causing significant harm. Practitioners should refer to other procedures relating to handling self-neglect.”
Other procedures relating to handling self-neglect.

- Community Care Assessments
- Mental Health Act Assessments
- Care Programme Approach
- Mental Capacity Assessments
- Anti-social behaviour referrals
- Environmental health
- Trading Standards
- Child safeguarding if children impacted
- London Fire Service
- Staying Put Team
- Safer neighbourhood team
Key Issues

• Unwillingness to address concerns
• Inability to address concerns model
• No third party or agency involved
• Lifestyle choice model in some cases
• Lack of knowledge of definition and characteristics
• Interventions – what works and what does not?
Who experiences self neglect?

• Disproportionate number of older people in DoH research – 117 out of 155 research references
• Younger adults with mental health needs
Government Statement on Principles

The following 6 principles should underpin all safeguarding work – including self-neglect

• 1 Protection
• 2 Prevention – NB SCIE Report 43 Prevention of SVA
• 3 Proportionality
• 4 Partnership
• 5 Accountability
• 6 Empowerment
Self Neglect and Empowerment

• Personalisation agenda
• Independence
• Choice
• Control
• Risk
• Protection
Adults with capacity who self neglect

• Talk to them about your concern
• Find out what is happening – this may take time
• Carry out risk assessment – do they understand issues?
• Be satisfied about their ability to make decision
• Check for undue influence, pressure or exploitation
• Check for obvious signs of ill health
Service Users and Capacity Decisions

• Need to be specific and clear about decision making – what specific decision is the service user making that is being queried?
• Cultural issues to be considered
• Previous history of service user
• Key factors identified – “clusters of features”
Clusters of Features

- Physical living conditions
- Mental health
- Financial issues
- Personal living conditions – “lifestyle choice” issues
- Substance and Alcohol Dependency
- Physical health
- Social network
- Personal endangerment
Existing Forums That Could Be Used

• ASB
• Community Safety
• Liaison housing meetings for people with MH needs
• London Fire Brigade
Pan London Risk Assessment Process – Can also address self neglect issues

See page 52 for the process of recording -

• What are the risks?
• The persons ability to protect themselves
• Who or what is causing the harm
• Factors that contribute – personal, environmental and relationships – positive/negative
• The risk of future harm from same source
• Usual stage process –
• Never use a Risk Assessment Tool as a substitute for overview and review or reassessment. Case Recording Policy
Interventions

• Protocol to manage self neglect locally.
• No “magic bullets”
• Emphasis placed on sensitive and comprehensive assessment
• Importance of multi agency assessments – medical, psychiatric, functional and social history
• Screening assessment to identify presence of key indicators
• Practical help – e.g. no transport to tips
The Law Commission re adult social care legislation recommends that self harm and neglect should be treated under safeguarding.
Recommendations

• Raise awareness of local policy in place
• Identify a small multi-agency working party to develop work in this area?
• Raising awareness of practice guidance document outlining key issues, roles and responsibilities
• Raise awareness and reference to SCIE reports on self neglect and best practice
• Responsibility lies within all agencies not just social work and care management teams
Plenary

- Multi-agency work is key
- Capacity
- Awareness of local and national guidance
- Building relationships
- Considerations over Eligibility
- Working with adults and their human rights not children
- Impact of behaviour on others e.g. children and neighbours
Skills for Care Summary on Self Neglect

• Space and time for building relationships of trust are at the heart of this approach, as are support and practice development mechanisms to facilitate creative practice, and interagency systems for shared risk-management and decision making