

Self-Neglect and Hoarding Strategy

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ЭТЦЦ	Title: Version:	Self Neglect and Hoarding Strategy and Toolkit
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Strategy

Introduction

This strategy will be referred to where an adult is believed to be self-neglecting.

The scope of this Strategy does not include cases of risk associated with **deliberate self-harm**; the intentional infliction of physical damage or injury by an individual to their own body. Anyone who self-harms should be advised to see their GP or other relevant health professional as a matter of urgency or referred with their approval.

What is self-neglect?

The definition of self-neglect from the Care Act 2014 is as follows:

'self-neglect - this covers a wide range of behaviour neglecting to care for one's own personal hygiene, health or surroundings and includes behaviour such as hoarding'

Indicators of self-neglect:

- Neglecting personal hygiene impacting upon health
- Neglecting home environment, with an impact on health, well-being and public health issues
- Poor diet and nutrition leading to severe weight loss, or excessive weight gain, and associated health issues
- Lack of engagement with health and other services/agencies who can offer appropriate support
- Hoarding items
- Substance misuse

A failure to engage with individuals who are not looking after themselves (whether they have mental capacity or not) may have serious implications for, and a profoundly detrimental effect on, an individual's health and wellbeing. It can also impact on the individual's family and the local community.

Locally there has been learning from a multi-agency adult review where a woman with complex needs, Adult A, was living in self-neglectful conditions. The learning was that professionals needed to better understand the factors that led to the root cause of the issue.

A Safeguarding Adult Review for Adult B recognised that, although single agencies worked well with Adult B, a lack of information sharing and joined up action planning meant that not all agencies had access to information that could have improved the quality of involvement with Adult B.

Public authorities, as defined in the Human Rights Act 1998, must act in accordance with the requirements of public law. In relation to adults perceived to be at risk because of self-neglect, public law does not impose specific obligations on public bodies to take particular action. Instead, authorities are expected to act within the powers granted to them. They must act fairly, proportionately, rationally and in line with the principles of the Care Act 2014, the Mental Capacity Act (2005) and consideration should be given to the application of the Mental Health Act (1983).

Aim of the Strategy

The Aim of the Strategy is to prevent serious injury or even death of individuals who appear to be self-neglecting by ensuring that:

- individuals are empowered as far as possible, to understand the implications of their actions
- there is a shared, multi-agency understanding and recognition of the issues involved in working with individuals who self-neglect
- there is effective multi-agency working and practice
- concerns receive appropriate prioritisation
- agencies and organisations uphold their duties of care
- there is a proportionate appropriate response to the level of risk to self and others.

This is achieved through:

- promoting a person-centred approach which supports the right of the individual to be treated with respect and dignity
- promoting a person-centred approach which supports the individual to be in control of, and as far as possible, to lead an independent life
- aiding recognition of situations of self-neglect
- increasing knowledge and awareness of the different powers and duties provided by legislation and their relevance to the particular situation and individuals' needs
- increasing knowledge and awareness of the extent and limitations of the 'duty of care' of professionals

- promoting adherence to a standard of reasonable care whilst carrying out duties required within a professional role, in order to avoid foreseeable harm
- promoting a proportionate approach to risk assessment and management
- clarifying different agency and practitioner responsibilities and in so doing,
- promoting transparency, accountability, evidence of decision-making processes, actions taken and promoting an appropriate level of intervention through a multi-agency approach.

Our Ambition

The strategy aims to build on the already important work that has been started by RBSAB and its partners who work to protect people who need help and support. The introduction of the Care Act 2014 created a legal framework so organisations and individuals with responsibility for adult safeguarding can agree on how they can best work together and what roles they must play to keep persons at risk safe. This strategy will aim to strengthen and encourage a more preventative approach to cases of self-neglect and hoarding.

Our Vision

Is for all professionals to be supported to recognise and respond to individuals who as a result of their care and support needs may self-neglect and/or hoard, with the desired replacement of worker as the expert to the practitioner as the advocate or facilitator. Our interventions will be person centred, responsive, sensitive and proportionate.

Our Pledge

Ensure we listen to the person and they are at the centre of the self-neglect and/or hoarding concern.

Encourage professional curiosity.

Early recognition and identification of the signs of self-neglect and hoarding.

Work with each individual on their terms and at their pace.

Ensure effective information sharing between agencies

Re-enforce the importance of collaboration amongst agencies.

Public and professionals are able to recognise the indicators of self-neglect and hoarding.

Provide and ensure the assessment tools used among partner agencies are consistent.

Ensure all professionals and partners used the Mental Capacity Act appropriately to support decision making.

The Multi-Agency Risk Management (MRM) Protocol is used when appropriate by all professionals and partners.

A multi-agency approach

Research¹ suggests that on average between 2% and 5% of the population will be living within varying degrees of self-neglect and/or hoarding. Some individuals may not meet agency eligibility thresholds and as such previous experience of attempting to engage may have had limited or no success. These factors increase the potential risk of harm and should be identified as risk indicators that will prompt action under these self-neglect and hoarding procedures.

The RBSAB partnership agrees that responding to individuals with self-neglect/ hoarding behaviours must be a multi-agency priority and there is a presumption that all partner agencies will actively engage when this is requested by the lead agency as appropriate or required; and the agency holding the case will take responsibility for initiating a multi-agency partnership working approach.

Failure to engage with individuals who are not looking after themselves (regardless of whether they have mental capacity or not for decision about their self-neglect or hoarding behaviours) may have serious implications for, and may have a profoundly

¹ A Psychological Perspective on Hoarding (2015) Holmes S. (Ed), British Psychological Society, Leicester.

detrimental effect on, an individual's health and wellbeing and home environment. It can also impact on the individual's family and the local community.

Underpinning this strategy and toolkit and its ability to deliver outcomes, will be individual organisations' own policies and procedures around self-neglect and hoarding and the RBSAB policies and procedures, with the aim of preventing serious injury or even death of individuals who appear to be self-neglecting and/or hoarding by ensuring that:

- Individuals are empowered as far as possible, to understand the implications of their actions and/or behaviours on themselves and others
- There is a shared, multi-agency understanding and recognition of the issues including those involved in working with individuals who self-neglect and/or are deemed as hoarders
- There is effective and proactive multi-agency working, which challenge practice and ensure that concerns/ risks receive appropriate prioritisation
- The Multi-Agency Risk Management Protocol (MRM) is used where appropriate.
- That all interventions to work with an individual who has self-neglecting and/or hoarding behaviours are based on the principles of Making Safeguarding Personal (MSP).
- There is a proportionate response to the level of risk to self and others.
- There is a knowledge and awareness of the different powers and duties provided by legislation and their relevance to the particular situation and individuals' needs, this includes the extent and limitations of the 'duty of care' of professionals

Governance and accountability

Governance will be provided by RBSAB and challenge provided by monitoring progress against the strategic objectives. This will be done in the Excellence in Practice Sub-Group and the Quality Assurance and Performance Improvement Sub-Group of the Safeguarding Adult's Board.

Measuring effectiveness

The following outcome based indicators will demonstrate the effectiveness of the strategy:

- Reduction in the number of referrals and re-referrals to Adult Social Care
- Increase in early intervention offers to address self-neglect issues

- Individual case studies which look at the impact on services pre/post support offer
- Measuring cost effectiveness of the Housing Triage Service and identifying savings to services
- Multi-agency case file audits (MACFAs) to demonstrate improvements in outcomes