



Self-Neglect Guidance Summary for Professionals Who Deliver Health and Care Services in Primary Care and in the Community

This brief guidance is for professionals who may have visited someone at home, or for an appointment, and are concerned that they may be neglecting themselves or are displaying hoarding behaviours, and are considering what to do next.

Definition - Self-Neglect

The complexity and multi-dimensional nature of self-neglect means that it can often be difficult to detect and identify. There is no accepted definition either nationally or internationally.

Gibbons et al (2006) defined it as *'the inability (intentionally or unintentionally) to maintain a socially and culturally acceptable standard of self-care with the potential for serious consequence to the health and well-being of those who self-neglect and perhaps too to their community.'*

A review of literature suggests the following definitions:

- Persistent inattention to personal hygiene, nutrition, hydration, health and / or environment
- Repeated refusal of some /all indicated services which can reasonably be expected to alleviate associated risks and improve quality of life
- Self-endangerment through the manifestation of unsafe behaviours

Managing the balance between protecting adults at risk of self-neglect against their right to self-determination is a serious challenge for services. Working with people who are difficult to engage with can be exceptionally time consuming and stressful to all concerned. However, failure to engage with people 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 well-being. It can also impact on the individual's family and the local community.

Often the cases that give rise to the most concern are those where an individual refuses help and services and is seen to be at grave risk as a result. If an agency is satisfied that the individual has the mental capacity to make an informed choice on the issues raised, then that person has the right to make their own choices, even if these are considered to be unwise. **But** - this should not be seen as a 'take it or leave it' strategy.

Serious self-neglect is a complex issue which usually encompass a complex interplay between mental, physical, social and environmental factors. It frequently covers inter-related issues such as hoarding, drug and alcohol misuse, homelessness, street working, mental health issues, criminality, anti-social behaviour, inability to access benefits and / or other health related issues.

An adult may be at risk of serious harm where they are:

- Either unable, or unwilling to provide adequate care for themselves
- Not engaging with a network of support
- Unable to or unwilling to obtain necessary care to meet their needs
- Unable to make reasonable, informed or mentally capacitated decisions due to mental disorder (including hoarding behaviours), illness or acquired brain injury
- Unable to protect themselves adequately against potential exploitation or abuse
- Refusing essential support without which their health and safety needs cannot be met and the individual lacks insight to recognise this.

Public authorities, as defined by 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, the authorities are expected to act fairly, proportionately, rationally and in line with the principles of the Care Act 2014, the Mental Capacity Act 2005, and, where appropriate, consideration should be given to the application of the Mental Health Act 1983.

[The Care Act](#), which came into force on 1 April 2015, sets out the Local Authority's responsibility for protecting adults with care and support needs from abuse or neglect in primary legislation. For the first time, this makes direct reference to self-neglect. Section 1 of The Act provides particular focus on well-being in relation to an individual, and requires that organisations should always promote the adult's well-being in their safeguarding arrangements. This includes establishing with the individual what 'safe' means to them and how this can be best achieved. Well-being in the Act is described as:

- a. Personal dignity (including treatment of the individual with respect)
- b. Physical and mental health and well-being
- c. Protection from abuse and neglect
- d. Control by the individual over day to day life (including over care and support, or support provided to the individual and the way in which it is provided)
- e. Participation in work, educations, training or recreation
- f. Social and economic well-being
- g. Suitability of living accommodation
- h. The individual's contribution to society

The principles of promoting a person's well-being are also supported by [Making Safeguarding Personal](#) which seeks to ensure that where possible, the individual is involved in their own safeguarding and that it is 'person-led', 'out- come' focused but not process driven.

Duty of Care

All members of staff dealing with adults at risk should be aware of their duty of care when dealing with cases of serious self-neglect, even when the individual has mental capacity. According to civil (tort) law, Duty of Care can be summarised as '*the obligation to exercise a level of care towards an individual, as is reasonable in all circumstances, by taking into account the potential harm that may reasonably be caused to that individual or his property*'. A failure in the duty of care that results in harm could lead to a claim of

negligence and consequent damages. Where necessary, a legal view should be sought.

It is noted that in such cases of serious self-neglect, it can be very challenging to professionals / agencies / organisations involved to balance 'the individuals' rights and agencies' duties and responsibilities. All individuals have the right to take risks and to live their life as they choose. These rights, including the right to privacy must be respected and weighed when considering duties and responsibilities towards them. They should not be overridden other than where it is clear that the consequences would be seriously detrimental to their, or another person's health and well-being and where it is lawful to do so.

Mental Capacity Act:

The Mental Capacity Act (2005) states that a person is assumed to have mental capacity unless there is a reason to believe otherwise. It also states that a person should not be deemed to lack mental capacity just because they make an 'eccentric or unwise decision. In view of the nature of self-neglect, it is important that capacity assessments are carried out face to face where possible to minimise the risk of assumptions.

These key principles should be kept in mind when considering any particular case where there are concerns of self-neglect:

The involvement of an independent advocate as determined under The Care Act (2014) Statutory Guidance – section 7:93 or an Independent Mental Capacity Advocate (IMCA) - The Mental Capacity Act Code of Practice (chapter 10) should be considered under appropriate circumstances. Where the individual is subject to the Mental Health Act, Independent mental health advocacy is available (S130A. MHA 1983)

Where an individual who is self-neglecting is unable to agree to have their needs met because they are assessed as lacking mental capacity to make specific decisions in relation to this, then the principles of the Best Interest process must be followed in line with the Mental Capacity Act. This may take the form of a multi-agency, Best Interests meeting where the risks are considered to be high. Applications to the Court of Protection may need to be considered.

Where it is difficult to assess whether the individual lacks mental capacity to make specific decisions regarding their serious self-neglect and there is a conflict of opinion between professionals, then an application should be made to the Court of Protection to request an independent assessment via a Court Appointed Visitor.

Assessment of mental capacity should consider whether there are any concerns about possible duress and whether the individual is being influenced or exploited by others who may not have their best interests at heart. Where the individual has mental capacity but is not able to exercise choice as a result of duress or exploitation, legal advice should be sought regarding an inherent jurisdiction application to the High Court.

Remember, mental capacity assessments are both time and decision specific and should therefore be considered and / or repeated as risk increases and in relation to each individual risk.

Hoarding

Definition of Hoarding

'Hoarding' is the excessive collection and retention of any material to the point that it impedes day to day functioning (Frost & Gross, 1993). Pathological or compulsive hoarding is a specific type of behaviour characterised by:

- Severe "cluttering" of the person's home so that it is no longer able to function as a viable living space.
- Acquiring and failing to throw out a large number of items that would appear to hold little or no value and would be considered rubbish by other people.
- Significant personal distress or impairment of work or social life (Kelly O (2010) What is hoarding? Journal of Hoarding)

Hoarding and Mental Health

Hoarding can be a symptom of an underlying mental disorder. Hoarding is classified under the International Classification of Disorders system as a mental or behavioural disorder (ICD 10). Hoarding Disorder is distinct from the act of 'collecting' or keeping your home in a generally cluttered or messy state.

The main difference between a person who has hoarding behaviour and a collector is that people who have hoarding behaviour have strong emotional attachments to their items, and these attachments are well in excess of the real value of the items. Anything may be hoarded by the person at their home – inside or outside the property. Hoarding has no relation to gender, age, ethnicity, socio-economic status, educational or occupational history, or tenure type.

Clutter Image Rating (CIR) Tool

Hoarding and defining what is a hoard can be very subjective. By using the following Clutter Image Rating Tool you can assess what level the person's hoarding behaviour is at. The flow chart below summarises the process to be followed. If in doubt, please ask your supervisor/manager for assistance.

Images 1-3 indicate Low risk – self referral




Offer advice, sign post to other agencies
Arrange fire safety check with Cambridgeshire Fire and Rescue Service
Enlist person's supporters to help modify issue and prevent escalating
Consider arranging an inter-agency meeting to follow up to prevent worsening




Images 4-6 indicate Medium risk Multi-agency meeting and Images 7-9 indicate high risk Alert 24hrs and Multi-agency meeting




Convene multi-agency meeting - with action plan as the outcome and lead agency identified and roles of each party identified

Clutter Image Rating – Bedroom

Please select the photo that most accurately reflects the amount of clutter in the room

		
1	2	3

		
4	5	6

		
7	8	9

Clutter Image Rating – Kitchen

Please select the photo that most accurately reflects the amount of clutter in the room

		
1	2	3
		
4	5	6
		
7	8	9

Clutter Image Rating – Living Room

Please select the photo that most accurately reflects the amount of clutter in the room



1



2



3



4



5



6



7



8

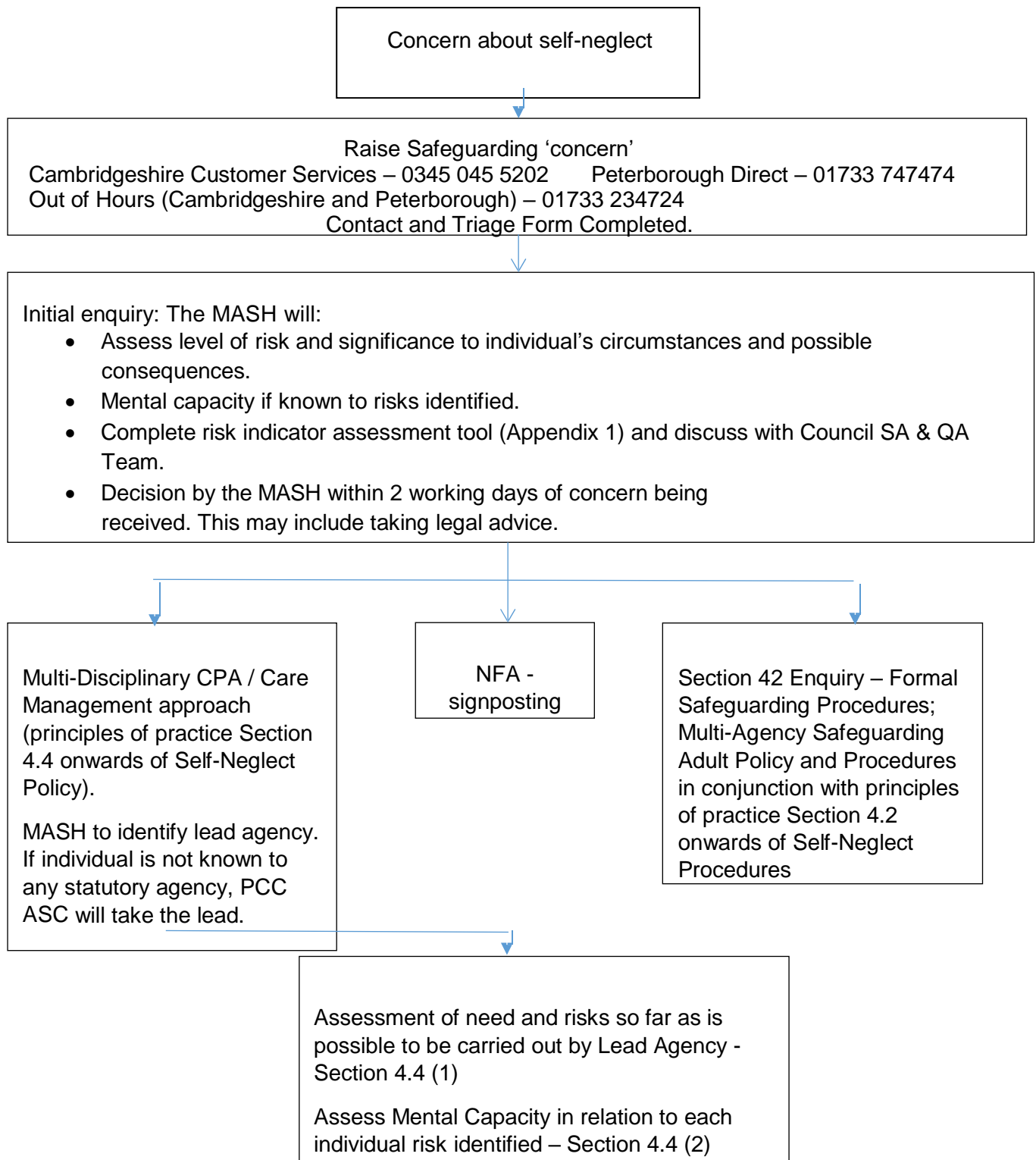


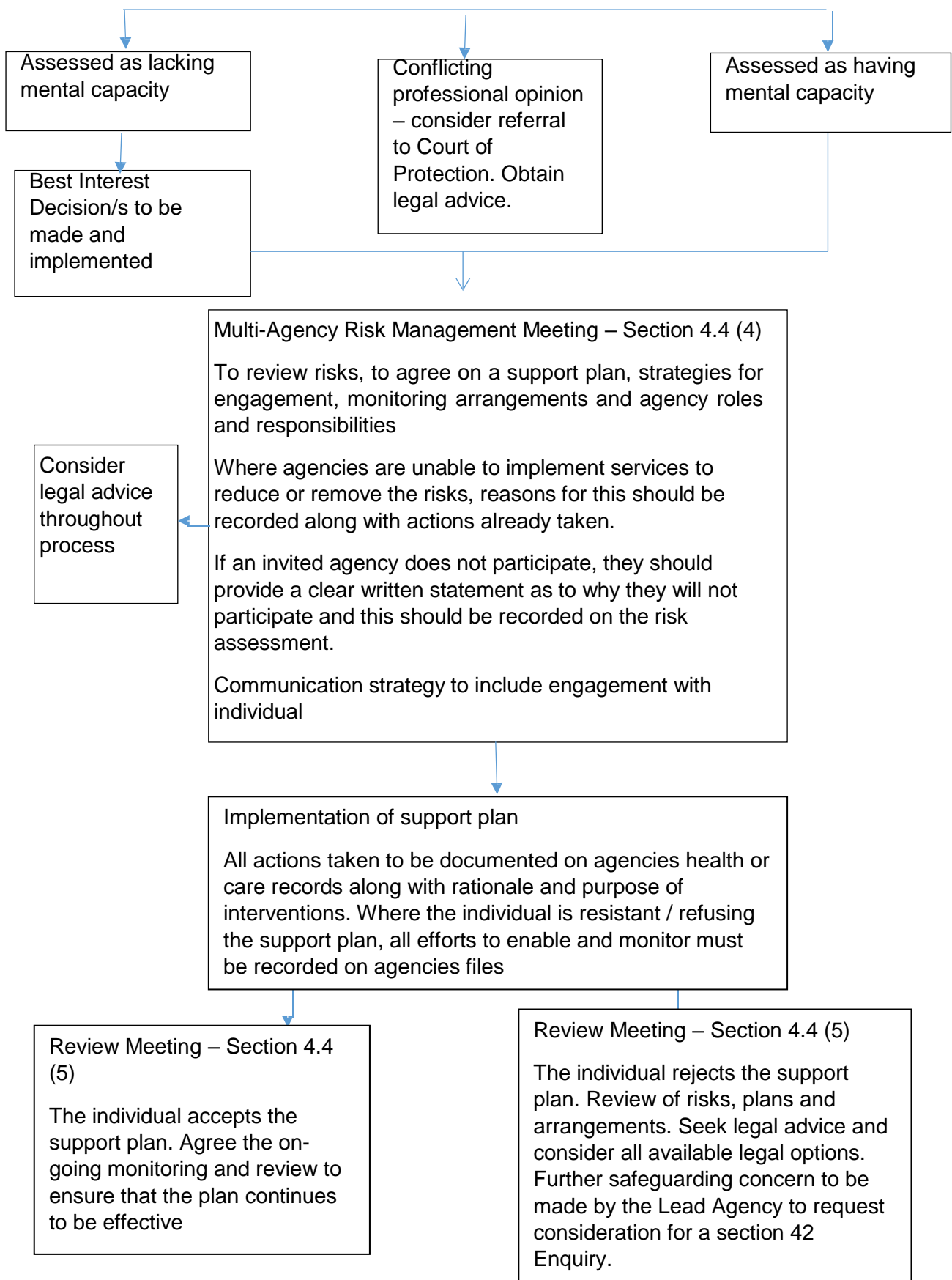
9

If you identify the behaviours, or signs of self-neglect, as outlined in this guidance you should discuss with your supervisor/line manager and consider raising a safeguarding concern.

The following flowchart outlines the process that is followed when a concern is raised.

Practice Flowchart





Further guidance:

- Cambridgeshire and Peterborough Multi-Agency Policy and Procedures to support People Who Self-Neglect
- Cambridgeshire and Peterborough Protocol for Working With People with Hoarding Behaviours
- Peterborough Multi-Agency Adult Safeguarding Procedures
- Social Care Institute for Excellence - Self-neglect policy and practice: research messages for managers

Also:

For more information about safeguarding of adults at risk, please visit our website:

www.peterborough.gov.uk/safeguardingadults