

TSAB Newsletter


January 2021

A graphic featuring two spotlights on the left and right sides, casting a yellow beam of light onto the text. The text is centered and reads "Self Neglect In the Spotlight".

Self Neglect
In the
Spotlight

Summary of the Work of the Board


The Board last met virtually on 7 December 2020. The minutes of [previous meetings](#) can be accessed via our website.



Could you recognise the signs of SELF-NEGLECT?
Self-Neglect is when someone:

- Neglects their personal hygiene
- Neglects to care for their own health (this can include drug and alcohol dependency or not taking medication as prescribed)
- Neglects to care for their own surroundings
- Hoards (to the point it affects day to day functioning)

For more info visit:
www.tsab.org.uk



Spotlight on Self-Neglect

The TSAB are hosting a week long campaign on self-neglect during January. We aim to explore what self-neglect is and the less understood forms of it, we will be sharing guidance, good practice pointers and training tools for professionals.

What is Self-Neglect?

Self-neglect is an extreme lack of self-care, it is sometimes associated with hoarding however may be a result of other issues such as addictions.

Spotting the Signs of Self-Neglect

- ✓ Poor hygiene
- ✓ Malnutrition/ Obesity
- ✓ Unmet medical or health needs
- ✓ Alcohol and/or drug misuse/dependency
- ✓ Eating disorders
- ✓ Social isolation
- ✓ Unsanitary, untidy or dirty conditions which create a hazardous situation that could cause serious physical harm to the individual or others or a potential fire risk
- ✓ Poor maintenance of property
- ✓ Vermin at the person's property
- ✓ No running water / lack of sanitation / lack of heating
- ✓ Refusal of services and interventions



For further information on Self-Neglect, please see the Board's [Self-Neglect](#) information page.

Safeguarding and Self-Neglect

The Care Act includes self-neglect as a category of abuse or neglect that may prompt a safeguarding enquiry.

Not all cases of self-neglect would prompt an enquiry under Section 42 of the Care Act, however, where there is a serious risk to the health and wellbeing of an individual, it may be appropriate to raise self-neglect as a safeguarding concern. Safeguarding duties will apply where the adult has care and support needs and they are at risk of self-neglect, and they are unable to protect themselves because of their care and support needs.

Responding to self-neglect can be a complex and difficult area of safeguarding work, often cases can be high risk, complex and resource intensive and it is only by working together collaboratively that we can really make a difference. For further information, please see the Board's [Self-Neglect Guidance](#)

Good Practice Points

What works well when supporting adults who self-neglect?

- ✓ Build up a level of trust and rapport
- ✓ Be patient (research suggests a 'slowburn' approach, repeat visits and longer term engagement)
- ✓ Be proactive and address patterns
- ✓ Be professionally curious but not intrusive
- ✓ Identify if any risks require immediate action
- ✓ Identify support available and offer choices
- ✓ Listen to the adult taking into account their views and wishes
- ✓ Explore family dynamics
- ✓ Offer advocacy
- ✓ Work collaboratively with other services
- ✓ Ensure there is a clear record of interventions, decisions and rationale
- ✓ Training, supervision and support for staff dealing with people who self-neglect to help them understand the complexities of this area of work, the possibilities for intervention and the limitations.



It is important to consider capacity when Self-Neglect is suspected.

There are a number of adults with care and support needs, who self-neglect and may well have capacity and do not engage with services; the Care Act includes those very people to be considered under Section 42 as requiring safeguarding support because of the risks of serious harm.

The Care Act recognises that people can have mental capacity and still self-neglect. In cases of self-neglect it is essential that a person's capacity to make informed choices about their personal and domestic care is assessed carefully. Assessment of capacity should involve not only the ability to understand the consequences of a decision but also the ability to execute the decision.

Also consider how self-neglect may impact on other family members and whether this gives rise to a safeguarding concern. The Local Tees Children Partnerships and TSAB have produced [Think Family](#) Guidance to assist with this.

It is important that professionals talk openly and honestly with individuals and apply the [Making Safeguarding Personal](#) principles including; 'no decision about me without me'.

For more Information on Mental Capacity visit: [Mental Capacity Act 2005](#) and [5 principles underpinning Mental Capacity](#)

Find Support in Your Area

The Board's website also sets out relevant [support services](#) by type of abuse and by each individual Borough across Tees. If you think someone with care and support needs is neglecting themselves you can contact your [Local Authority](#) or for hoarding matters your Environmental Health Office for advice.

This list is not intended to be a definitive source of Information for all Service Providers.



Alcohol/Substance Misuse Related Self-Neglect

Alcohol & substance misuse is often less readily perceived as self-neglect compared to other behaviours such as hoarding or lack of personal hygiene. Self-neglect and substance misuse is sometimes perceived as a 'lifestyle choice' which can create barriers and prevent a deeper understanding of the underlying causes of the issues and attempts to address them. Such assumptions can prevent practitioners from recognising people as vulnerable and in need of safeguarding. [Trauma-informed practice](#) ensures that the person's history and life experiences are considered to provide a greater understanding of how these may have impacted on the person's lifestyle and well-being.



The infographic features two circular icons at the top: a blue circle with a white medical bag and a red cross, and another blue circle with a white pill. Below these icons, the text reads: "Alcohol and/or substance misuse can be a main factor in cases of self-neglect". Underneath, it says "For more information visit; www.tsab.org.uk". At the bottom, there is a logo for Teeswide Safeguarding Adults Board, which consists of four stylized human figures in blue, red, yellow, and green, with the text "Teeswide Safeguarding Adults Board" below them. The background of the infographic is white with a blue border, and it sits on a horizontal bar with green, yellow, red, and blue stripes.



The infographic features two circular icons at the top: a green circle with a white pill, and another green circle with a white medical bag and a red cross. Below these icons, the text reads: "An adult who self-neglects may not be taking prescribed medication and not be attending health/social care appointments." Underneath, it says "For more information visit; www.tsab.org.uk". At the bottom, there is a logo for Teeswide Safeguarding Adults Board, which consists of four stylized human figures in blue, red, yellow, and green, with the text "Teeswide Safeguarding Adults Board" below them. The background of the infographic is white with a green border, and it sits on a horizontal bar with green, yellow, red, and blue stripes.

Refusal or non-compliance with medication/medical intervention

In cases of self-neglect the individual may refuse to engage with services and/or accept support. If the person refuses initial contact, it is important not to close the case whilst uncertainty remains about the level of risk and the person's capacity to make informed decisions about their circumstances and need for support. More information can be found at Social Care Institute for Excellence (SCIE) website: [Self-neglect at a glance](#).

Team Around the Individual Panels (TATI) Panel

The Team Around the Individual (TATI) Panel will consider cases in respect of adults aged 18 years or over, where existing mechanisms within agencies for resolving or minimising risk have not been achieved.

The focus of the panel is on addressing the risk to the adult and in doing this will also consider other persons affected, the panel will enable better risk sharing and risk management between agencies and facilitate better outcomes for people. The panel will support agencies in their work to lower and manage risk.

Aims:

- ✓ To share information to identify, clarify and agree on risk
- ✓ Promote safety and wellbeing of high risk adults
- ✓ Improve multi-agency communication pathways
- ✓ To utilise resources more efficiently
- ✓ To develop risk management plans
- ✓ For those who are not engaging, co-ordinate a risk management plan to seize the opportunities that can enable engagement and/or monitor the well-being of the person.
- ✓ To improve agency accountability
- ✓ To share risk across agencies
- ✓ Identification of a lead/key worker

Referrals to the Team Around the Individual Panel differ within each local authority area, please consult with your Local Authority Safeguarding Adults Team for further information and details regarding the process.

Case Study from a Safeguarding Practitioner within Tees

In recent years I have worked with a number of individuals who have self-neglected in terms of their living environment and displayed behaviour like hoarding and been able to work with them to achieve positive outcomes which have reduced risk and had a positive impact on their wellbeing.

In the first instance it is vital to understand the risks, many of these are complex and beyond the scope of what can be assessed by a Social Worker, so a multi-agency approach is necessary. When working with an individual who displayed behaviours of hoarding but chose to remain living in this environment and was also a smoker, it was necessary to engage with the Fire Service to take steps to mitigate this through the provision of safety blankets, smoke detectors as well as detailed risk assessment around the fire safety risk. In other cases where individuals have neglected their home environment, risk assessment has been carried out by professionals such as Quantity Surveyors to understand the risks posed by any hazards within the property and provide guidance around specifically what repairs are needed.

As well as effective multi-agency working, it is also important to work to develop a positive relationship with individuals so that they will trust professionals to support them. A trusting relationship is developed by understanding the person's views, values and any barriers which might create reluctance to engage with professionals. This enables them to be more accepting of support in changing their circumstances, so that they will work to problem solve or accept support from others. In some cases it has been possible to utilise the relationship of trust, to encourage individuals to accept support to have urgent repairs carried out to their property to prevent incidents such as roof collapse which could have caused significant harm if not addressed.

Some of the individuals have been quite socially isolated, with difficulties such as accessing the community or doing their shopping and attending appointments. Even when trusting relationships are developed, individuals can still be reluctant to accept formal support because they want to retain their independence. Working in a strengths-based way to build informal networks of support around the individual can help to identify support in their community or to reconnect with friends, this ensures that they can be provided with safe, reliable informal support with tasks such as shopping.



In other cases, I have worked with partner agencies such as the NHS to develop effective support based on monitoring health needs, support through District Nurses or Social Care Prescribers who are based in GP practices. This can help monitor the welfare of individuals and encourage them to attend health appointments. The effect of this is that individuals are less isolated, their welfare can be better monitored, and their needs are better met without them having to accept formal care and support – meaning their autonomy is preserved.

When working with individuals who self-neglect, it is important to respect their choices and autonomy but as shown work with them to manage, reduce or remove risk. Often this means building on their strengths and coordinating an effective multi agency response to promote their safety.

Other News

Resources

NHS England have produced an [informative leaflet](#) for people who have suspected coronavirus and will be isolating at home, including information on the 119 contact centre for booking a test.

Documentation



Learning Briefings

Following on from the Josh Safeguarding Adults Review, and the Adult C Lessons Learning Review (LLR) learning briefings have been developed in line with the recognised seven minute technique, to ensure the learning is manageable and memorable, please circulate as appropriate.

[Josh Safeguarding Adult Review \(SAR\) Learning Briefing](#)

[Adult C learning lessons review \(LLR\) Learning Briefing](#)

Training Update

We have recently reviewed our Workbooks and as a result the Learning from Serious Instances of Abuse and Neglect workbook has now been removed. This topic is covered by a module in our e-learning package.

Please check our website regularly for updates as to when [new bookings](#) open.



Stay Scam Aware



COVID-19 has provided an opportunity for a wide range of scams — on the doorstep, over the phone, via social media and online.

There is currently a fake NHS text that is circulating advising people that they are eligible for the Covid-19 vaccine. The link takes you to a fake NHS website that asked for your personal details.

The NHS will never ask you for bank account or card details

NHS

**COVID-19 VACCINE
FACT CHECK**

-  The COVID-19 vaccine will always be available free of charge.
-  The NHS will never ask you to share bank details to confirm your identity.

Social Media and Website

We aim to share key messages from official sources via our social media channels as well as other communications



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www.tsab.org.uk

Your Comments

If you have any suggestions for the Newsletters:

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