Staffordshire County Council

Safeguarding and Education Overview and Scrutiny Committee - Thursday 12 September 2024

Managing Self-neglect

Recommendation

I recommend that the Committee:

a. Receives the report and considers what future assurance they require.

Local Member Interest:

N/A

Report of the Cabinet Member for Health and Care and the Cabinet Support Member for Public Health and Integrated Care.

Summary

What is the Overview and Scrutiny Committee being asked to do and why?

1. We are requesting that the committee considers the current response to Self-Neglect by adult social care and safeguarding, the steps that are being taken to improve practice and advises of any further assurance and monitoring that the committee may want to see in the future.

Report

Background

2. Self-neglect is one of the types of abuse and neglect identified within the Care Act 2014. This is the one type of abuse that removes the requirement for any third party to be involved when considering the need for safeguarding action.

3. It is defined as covering a wide range of behaviour including, neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. It is where someone demonstrates a lack of care for themselves and/or their environment and refuses assistance or services and can be a long-standing or recent concern.

4. The statutory guidance does also note that self-neglect may not always require a safeguarding enquiry under section 42 but suggests that the need for a safeguarding enquiry should be made on a case-by-case basis. A safeguarding response depends on whether the adult is able to protect themselves by controlling their own behaviour.

5. The regional self-neglect best practice guidance states that where an adult is engaging with and is accepting assessment or support services that are sufficient and proportionate to meet their care needs then they are demonstrating that they are able to protect themselves. Therefore best practice suggests that a assessment is completed initially as the least restrictive and proportionate response in the first instance.

6. With this is in mind where a person is referred to Staffordshire County Council for self-neglect the pathway is that they will initially be referred for an assessment unless the person is at immediate high risk of harm. This is in line with statutory guidance that where the local authority has to take actions which restrict rights or freedoms, they should ensure that the course followed is the least restrictive necessary. Concerns about self-neglect do not override this principle.

7. National research of Safeguarding Adult Reviews highlights that 60% of SAR's completed related to self-neglect. This second national analysis of Safeguarding Adult Reviews (SARs) in England was published in July 2024 and was funded by the Local Government Association (LGA) and the Association of Directors of Adult Social Services (ADASS). This report reviewed 652 SAR's that had been completed over a 4 year period. The findings of this report are interesting and highlights that whilst self-neglect is not the most prevalent type of abuse reported in section 42 enquiries it is more likely to result in a SAR than other types of abuse.

8. The very nature of self-neglect means that the circumstances are complex, often the adult has capacity and is expressing views not to have involvement or support from services. It is also not uncommon for a person's circumstances to go unnoticed until significant incident has occurred e.g. admittance to hospital, fire in the home etc, therefore preventative work can be harder to identify.

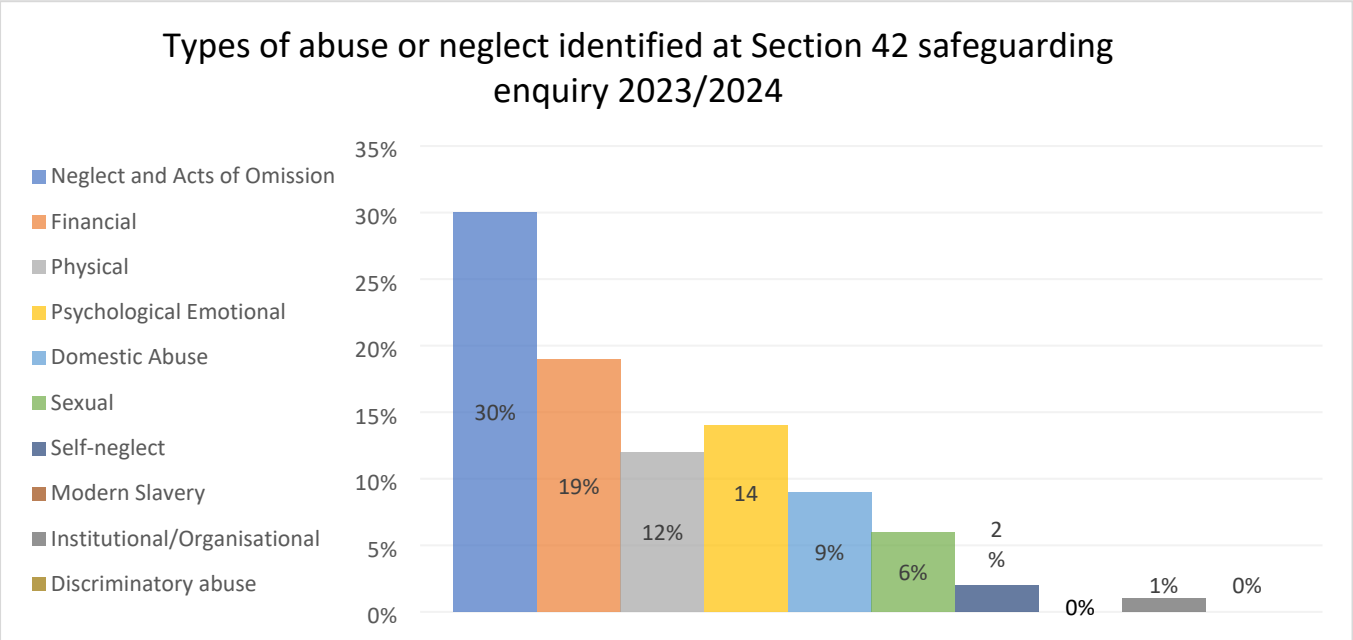
9. Locally, SAR referral made have been low and in those where a SAR has been completed recently self-neglect has been prevalent and with consistent themes or areas for learning being identified including -

    a. Application of Mental Capacity
    b. Escalation of risk
    c. Co-ordination of response
    d. Understanding of the person's situation

10. Practitioners have reported that they do find it complicated and are uncertain when working with people where self neglect is evident. This is due to a range of reasons including developing relationships, involvement of other professionals, and the complexities of balancing capacity, choice and protection.

Local Data

11. The table below identifies the prevalence of the categories of abuse within Staffordshire for the 2023/24 reporting year, which demonstrates that Self-Neglect is the 7th most prevalent type of abuse. This demonstrates that Staffordshire is comparable with national data where self neglect is likely to be less common often 6th or 7th most prevalent, however it is noted that at 2% of all enquiries completed Staffordshire is lower than the England average of 7% .



12. However, within this year From Apr 2024 - 6% of concerns raised relate to self-neglect as shown in the below table which is showing an increase in the recognition of self-neglect and consideration for a safeguarding enquiry.

	Apr-24	May-24	Jun-24	Jul-24	**Total**
Self Neglect	73	60	76	96	**305**
Total Concerns	1397	1273	1275	1428	**5373**
% Self Neglect	5%	5%	6%	7%	**6%**

Learning the Lessons

13. The Adult Safeguarding Board has completed two SAR's within the last 12 months which related to self-neglect and from this lessons have been learned and action plans have been developed which the board monitor to ensure compliance by Staffordshire County Council. We provide updates on these actions within the specified timescales.

14. The safeguarding board has also held a number of learning events for both of the SAR's related to self-neglect, 'Andrew' and 'Gillian'. These have been generally well attended and staff have reported that this has highlighted the need for further training and guidance.

Current progress

15. The SAR's have identified areas for learning for all agencies. The SAR 'Gillian' was a Staffordshire person, the report identified six recommendations for the Staffordshire and Stoke on Trent Adult Safeguarding Partnership Board (SSASPB) and they are as follows.

    a. The Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership Board (SSASPB) should seek assurance that partner agencies use training sessions, learning events and one-to-one management meetings to support their staff to recognise self-neglect, especially when someone is receiving care and support services, and to use the self-neglect process, including holding MDT meetings.

    b. The SSASPB should seek assurance from partner agencies that where interventions are planned for an individual who has a history of service refusal, relevant professionals are involved in planning for how they might avoid, minimise or otherwise respond to, future refusals.

    c. The SSASPB should seek assurance from partner agencies that they listen to the needs of people who self-neglect and support and facilitate access to interventions they want and are willing to receive even if these are outside the traditional remit of services.

    d. The SSASPB should assess whether the local care market and housing support has the skills available to meet the needs of people who self-neglect, and if it falls short, consider how the care market may be encouraged and supported to develop such skills in sufficient quantities.

    e. The SSASPB should seek assurance from partner agencies that, where appropriate, mental capacity assessments of people who self-neglect are made jointly with someone who knows them, has a relationship

with them and also has an understanding of alcohol related brain damage and its impact on mental capacity.

f. The SSASPB should consider how people can best be supported in circumstances where they are mentally capacious, self-neglect, refuse help and have made a decision about the quality of their life.

16. As detailed above some of the actions relate to increasing staff confidence and competence in responding to self-neglect. Therefore a number of actions have been identified for Staffordshire County Council and include the following

17. The Practice Guidance is being refreshed - including
    a. new risk assessments
    b. Tools to help guide conversations with adults, including discussions regarding refusal of services, health support etc.
    c. Mental capacity guidance, including tools to use and training
    d. Escalation process

18. Training is being developed to support embedding the new practice guidance. Further to this we are looking at further sessions within teams to give practitioners the appropriate support to reflect and consider the learning that the practice guidance and training has provided. This will include going to individual teams to discuss as well as a forum and reflective sessions, for both individual practitioners and group sessions.

19. We are considering ongoing 'surgeries' for practitioners to support them and identify solutions when risks are high and solutions are limited. We would also use these to enact escalation when needed, this should provide practitioners with the support needed to manage risks and also balance the rights of the individual. The hope for these surgeries is that they would be multi-agency and support innovative thinking to respond proactively where required.

20. We will be monitoring the progress of the actions being taken both through the Safeguarding Board and through the Quality Performance Group

Link to Strategic Plan

21. Encourage good health wellbeing, resilience and independence

Link to Other Overview and Scrutiny Activity

22. N/A

Staffordshire County Council

Community Impact

23. No Community Impact as this is not changing service or response provided.

List of Background Documents/Appendices:

N/A

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