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**Self-Neglect and Hoarding**

**Policy**

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| **TITLE** | Title: Self Neglect and Hoarding Policy  Version: 2 |
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**Introduction**

This policy will be referred to where an adult is believed to be self-neglecting. An individual may be considered as self-neglecting and therefore maybe at risk of harm where they are:

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

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.

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) where appropriate.

The Aim of the Policy 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.

**Six key principles underpin all adult safeguarding work**

**Empowerment**

People being supported and encouraged to make their own decisions and informed consent.

**Prevention**

It is better to take action before harm occurs.

**Proportionality**

The least intrusive response appropriate to the risk presented.

**Protection**

Support and representation for those in greatest need.

**Partnership**

Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

**Accountability**

Accountability and transparency in delivering safeguarding

**When is self-neglect a safeguarding issue?**

Whenever and wherever there is a belief an individual is, or may be, self-neglecting there needs to be a response. It should never be ignored. It makes no difference whether the person is a home owner, in a rental property, in supported housing or in a care home. There will be circumstances when there is a statutory duty to respond under the safeguarding adults duties. The statutory duty applies when the adult is unable to protect themselves because of the care and support needs that they have.

In other circumstances, staff and volunteers should follow their own agency’s procedures.

The statutory duty is set out in the Care Act 2014. The supporting statutory guidance, issued by the Department of Health recognised self-neglect as a category of abuse and neglect, and within that category further identified the behaviour of hoarding.

This policy will be referred to where an adult at risk, with care and support needs, is believed to be self-neglecting.

The duties apply where the individual who is self-neglecting is an ‘adult at risk’. When the individual who is self-neglecting is an ‘adult at risk’, the agency should raise a safeguarding concern with Adult Social Care.

This policy aims to ensure that:

* There is a shared multi-agency understanding and recognition of the issues involved in working with adults who self-neglect
* There is effective multi-agency working and practice
* There is a proportionate appropriate response to the level of risk to the individual and others, and that individuals are empowered to understand the implications of their actions.

If the individual is a carer for an ‘adult at risk’, i.e. provides unpaid care to someone who meets the definition of an ‘adult at risk, then the circumstances should always be discussed with Adult Social Care to come to a decision as to whether a safeguarding response should be put in place.

If the person is a carer for a child or young person, a decision should be made whether to refer to Children’s Social Care to ensure the child’s or young person’s welfare is considered.

In accordance with the Care Act 2014 and the accompanying Statutory Guidance, ‘self-neglect may not prompt a section 42 enquiry’ and ‘an assessment should be made on a case-by-case basis’ with a decision on whether a response is required under safeguarding dependent on the adult’s ability to protect themselves by controlling their own behaviour.

**Making Safeguarding Personal**

In addition to the six principles, Making Safeguarding Personal (MSP) aims to ensure that the safeguarding process:

* Is person-led and outcome-focussed
* Enhances the individual’s involvement, choice and control, and
* Seeks to improve the quality of life, wellbeing and safety of the individual.

Adult who is self-neglecting

The adult must be involved from the beginning of safeguarding procedures unless there are exceptional circumstances, and where possible their consent should be sought prior to concerns being shared on an interagency basis. The adult’s (or their representative’s) views and wishes including their desired outcomes must be considered as part of the on-going procedures (Enquiry).

Family involvement

Where the adult has mental capacity, involvement of family, friends or informal carers should be agreed with the adult. In any case where the adult does not have mental capacity, family, friends or informal carers must be consulted in accordance with the Mental Capacity Act 2005.

The Local Authority has a duty to involve an appropriate person to facilitate an adult’s involvement in the safeguarding adult’s process if it is deemed that they would have substantial difficulty in participating themselves.

Advocacy

As part of the safeguarding adults procedure, consideration must be given as to whether the adult may benefit from the support of an independent advocate. Where the adult has substantial difficulty in participating in the safeguarding adults process, and there is no other appropriate person to assist them, independent advocacy must be arranged by the Local Authority in accordance with the Care Act 2014 (Sections 67 and 68). The details of local arrangements for advocacy are held by each Local Authority.

**Empowering individuals**

Building a positive relationship with individuals who self-neglect is critical to achieving change for them, and in ensuring their safety and protection.

Consideration needs to be given at an early stage, to determining if the individual has the mental capacity to understand and make informed decisions about their responses to agencies concerns about their apparent self-neglecting behaviour. In cases of self-neglect it will often take considerable time to build the relationship that enables the person to want to make changes and this needs to be understood by all agencies engaging with the individual. It is always important to involve the family and carers. The Rochdale Borough Safeguarding Adults Board (RBSAB) Multi Agency Information Sharing Protocol provides the framework for sharing information.

When empowering individuals to engage:

* Ensure they have necessary information in a format they can understand
* Ask them who else they would like you to talk to e.g. family, carers, friends, neighbours, people with Power of Attorney.
* Check out that they do understand options and consequences of their choices
* Listen to any reasons they have for mistrust, disengagement, refusal and their choice.

Remember the individual may have experienced significant trauma in their life such as bereavement, homelessness, sexual / physical / emotional abuse or health issues. They may have had poor experiences of engagement with services in the past and these factors may be the reason why they appear to be unwilling to engage.

If the individual cannot, or is unable to, engage with any support offered, and the consequence of the risks could be death or serious injury, practitioners should consider using the Multi-Agency Risk Management (MRM) protocol, which can be found at [www.rbsab.org](http://www.rbsab.org). The purpose of the MRM is to identify risks and build a support plan with the individual.

The Self Neglect Strategy and Toolkit can be found at [www.rbsab.org](http://www.rbsab.org). This document provides more information and resources.