



Self Neglect Learning Briefing

What is Self-Neglect?

Self-neglect can describe a wide range of situations or behaviors. It could be someone not looking after their own health or personal care or not maintaining a home environment for so long that it becomes cluttered or dirty.

The Care Act recognises self-neglect as a category of abuse & emphasises the importance of working together & preventative actions to minimise risk.

The need for safeguarding processes is dependent on risk levels. Lower levels of risk, could be addressed by:

- Care Act assessment
- signposting to alternative support
- arranging mental health &/or health support

Safeguarding processes may be required if there are significant risks, such as:

- Risk of life-threatening consequences e.g., fire risk, substance misuse, self-harm
- Risk to tenancy or home security
- Non-engagement with essential treatment or support
- being vulnerable to exploitation or domestic abuse
- Environment presents high risks, such as inadequate plumbing, washing or toileting facilities
- Little/no informal support networks

What are the possible signs of Self-Neglect?

- Excessively unclean/cluttered home, signs of vermin, hoarding
- Neglecting household maintenance
- Unkempt personal appearance, malnutrition, dehydration
- Declining essential health or social care support
- Financial debt issues

What are the possible reasons for Self-Neglect?

- Physical/mental health problems, substance misuse
- Psychological & social factors
- Diminished social networks
- Traumatic histories & life-changing events

What have Safeguarding Adult Reviews told us?

Importance of:

- Information sharing & collaborative working
- Robust face to face assessment/risk assessment
- Understanding of legislation e.g., Mental Capacity Act
- Challenging & reflect on practice
- Robust guidance to assist practitioners
- Assessment processes involve carers/significant others

What is the self-neglect process in West Sussex?

1: Self-neglecting identified, consider

- Immediate actions required to minimise risk
- Raising a safeguarding concern or requesting a social care assessment, and/or;
- Arranging a multi-agency meeting.

2: Identify lead agency

If there is a Safeguarding Enquiry, this will be the Local Authority. In other cases, this could be another agency because:

- The agency is already involved
- The agency has a duty of care
- The agency holds significant information
- The individual has shown a likelihood to engage with them and /or
- Needs appear to relate to the service provided by that agency

3: Lead agency co-ordinates information gathering

Consideration of the most appropriate actions to address the concerns raised, & initial considerations about the adult's mental capacity.

4: Multi-agency meeting

Lead agency convenes a meeting under the self-neglect procedures to:

- Consider risks & issues of mental capacity
- Share information between agencies
- Devise a shared action plan

Lead agency involves the adult concerned as much as possible &/or their representative/advocate.

5: Comprehensive assessment of risk

Outcomes are determined & risk addressed, resulting in:

- Support accepted
- Ongoing monitoring

Outcomes are determined & risk remains, resulting in:

- Escalation (to risk panels if available/senior managers/legal services)/ongoing monitoring
- Repeat multi-agency meetings
- Safeguarding concern raised where required

For full details, further advice & guidance please see [Self-Neglect Briefing Note](#), [Pan-Sussex Multi-Agency Procedure](#) & listen to our [Self-Neglect Podcast](#).

Resources you can use to ensure your practice is current:

- [Mental Capacity Act](#)
- [Care Act](#)
- [Pan-Sussex Safeguarding Policy and Procedure](#)
- [Professional Curiosity Learning Briefing](#)
- [WSSAB Threshold Guidance](#)
- [Pan- Sussex Information Sharing Protocol](#)
- [Making Safeguarding Personal Learning Briefing](#)

For cases where an individual is putting themselves or others at significant risk by refusing services and all options have been explored and, the level of risk is still high, a referral to [MARM](#) should be considered.