

7-Minute Briefing

1. Purpose of this Briefing

This briefing shares the learning from a Leicestershire & Rutland Safeguarding Adult Review (SAR), with the aim to enhance and improve agencies' responses to people who find themselves in a self-neglect cycle.

2. Background

Philip had a background of trauma. Philip was self-neglecting and various health and social care services were offered to him in the year running up to his death. He had variable engagement and often refused services. At the start of the Covid-19 pandemic, services for housing support and addiction support became virtual. Philip lived with William who slept on the sofa. Both had substance and alcohol addiction. Philip and William had been friends all of their adult lives. They had a complex relationship and considered themselves to be carers to each other.

3. Risks Identified and Safeguarding Concerns

- Self-Neglect
- Allegations of abuse (denied by victim and alleged perpetrator)
- Mental Ill Health
- Substance/Alcohol Misuse
- Cuckooing / Criminal Exploitation

7. Raising Awareness and Implementing Learning

[LLR SAB Self-Neglect Procedure](#)
[Leicester, Leicestershire and Rutland \(LLR\) Vulnerable Adult Risk Management \(VARM\) Guidance and Local Templates](#)
[LLR SAB Thresholds Guidance](#)
[LLR SAB Escalation Procedure](#)

6. Reviewing Practice

Reflective questions to consider around self-neglect cases:

- Have you accessed the Thresholds guidance? Have any of your previous judgements become fixed? Have you employed critical thinking and challenge? Does the case make/still make the threshold for the agreed process?
- Are there any safeguarding concerns? Have they been referred to Adult Social Care in a timely manner? Are referrals and responses formally recorded in case notes?
- Are you aware of escalation procedures? Are you prepared to challenge the views/responses of others if you think the response is not robust enough?
- If the VARM process has been initiated, is there evidence of change? Have the family been involved in the process in an appropriate manner? Have you used the available VARM meeting templates?



4. Findings

➤ Thresholds for Vulnerable Adult Risk Management (VARM) and Safeguarding

Philip's case was considered under the VARM process because there was significant risk of death due to self-neglect. The first VARM meeting was called too late and, by the time of the second VARM meeting, the threshold for initiating an enquiry under Section 42 of the Care Act 2014 had already been reached because of alleged abuse. There were missed opportunities to raise an Adult Safeguarding Enquiry.

➤ Mental Capacity

Philip had fluctuating capacity due to his alcohol and substance misuse and, potentially, the deterioration in his health. Formal capacity assessment was undertaken once when assessing his care and support needs. There were missed opportunities to assess Philip's capacity.

➤ Professional Curiosity

There was lack of professional curiosity regarding the nature of the two men's relationship by all agencies and William's carer status was never recognised or assessed. As William was not seen as a carer, the caring stress that he was experiencing was not explored and the relationship between him and Philip became more volatile.

➤ Confidentiality

Most agencies took implied consent as permission to discuss Philip in front of William, particularly because they shared a mobile phone.

5. Key Learning

- The self-neglect narrative was dominant and the abuse narrative, in essence, subsumed by it. The issues of self-neglect and having capacity to make unwise decisions should not cloud agencies' judgement to assess the risk of abuse under the appropriate process – a Section 42 enquiry under the Care Act 2014 – and in a timely manner.
- Accumulating concerns are a risk factor for people who self-neglect to be vulnerable to abuse or exploitation.
- The VARM process should be formally reviewed if significant progress is not being made.
- All agencies should formally record in line with their procedures that there is consent to share confidential information with others, including friends who provide aspects of care. In safeguarding, agencies should aim to achieve informed consent, rather than implied consent.
- In co-dependent relationships, as indicated in Domestic Abuse research, mobile phones have the potential to become vehicles for coercive control.