Dudley Safeguarding People Partnership

Safeguarding Adult Neglect Strategy 2024-2029

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Foreword

On behalf of the Dudley Safeguarding Adults Board, I am pleased to present and launch this Adult Neglect Strategy.

Neglect, unfortunately, remains a prevalent issue that affects many adults, leading to significant harm and distress. As a safeguarding board, we are committed to ensuring every adult lives a life free from neglect, where their rights are respected, and their needs are met. It is our duty to protect those who are unable to protect themselves, and this strategy serves as a comprehensive framework to guide our collective efforts in addressing adult neglect.

The Adult Neglect Strategy encompasses a range of objectives, each designed to address the various dimensions of neglect and its underlying causes. It outlines our commitment to enhancing awareness and understanding of neglect, promoting effective multi-agency collaboration, improving the early identification and assessment of neglect cases, and providing appropriate support and interventions for adults at risk.

We recognise that tackling adult neglect requires a multidisciplinary approach that extends beyond the confines of a single agency or organisation. It necessitates a coordinated effort, where professionals from different organisations work together, sharing information, knowledge, and skills. This strategy emphasises the importance of partnership working and aims to foster a culture of collaboration, where everyone involved understands their role and responsibilities in safeguarding adults with care and support needs.

I would like to express my appreciation to all those who have contributed to the development of this strategy. I am confident that this strategy will serve as a valuable tool for all professionals working with adults with care and support needs, empowering them to take decisive action and make a positive difference. Together, we can create a community where every adult is safe, respected, and supported.

Dr Paul Kingston, Chair of Dudley Safeguarding Adults Board

Introduction

The Care Act 2014 sets out a clear legal framework for how local authorities and partners should protect adults at risk of abuse or neglect. Furthermore, how the system should work to actively promote wellbeing and independence of adults with care and support needs in addition does not wait to respond when people reach a crisis point.

It is vital that the care and support system intervenes early to support individuals, helps people retain or regain their skills and confidence, and prevents need or delays deterioration wherever possible. This approach applies equally to adult safeguarding.

The Care Act 2014 places a duty on local safeguarding adult boards (SAB) to develop and implement a clear strategy around the prevention of abuse or neglect of adults at risk. Prevention is one of the core principles of safeguarding and as such forms a fundamental part of local adult safeguarding policy framework and arrangements.

This is a five-year strategy to ensure that sufficient time and resource is allocated to achieve the aims and outcomes of the strategy. The strategy acknowledges that there are issues and ambitions that will require consistent, medium to long term action due to the existing customs, culture and practice that require improvement. This strategy aims to deliver real transformation that would not be feasible to achieve in a shorter time frame, the extended period will enable improvement to be achieved and sustained.

This strategy applies to adults aged 18 and above.

Definition of Neglect

Neglect and acts of omission.

Whilst there is no overarching definition of neglect, this strategy uses the following definition.

Definition of neglect: The failure of any person, who has responsibility for the charge, care, or custody of an adult at risk, to provide the amount and type of care that a reasonable person would be expected to provide.

Neglect of this type may happen within an adult's own home or in an institution. Repeated instances of poor care may be an indication of more serious problems. Neglect can be intentional or unintentional.[1]

Neglect and Acts of Omission includes:

- Ignoring medical, emotional, or physical care needs
- Failure to provide access to appropriate health, care and support or educational services.
- The withholding of the necessities of life, such as medication, adequate nutrition, and heating.
- The following are also potential indicators of Neglect and Acts of Omission:
- Poor environmental conditions
- Inadequate heating and lighting
- Poor physical condition of the vulnerable adult
- Clothing is ill-fitting, unclean and in poor condition.

[1] West Midlands Policy and procedures for Adult Safeguarding Nov 2019

- Malnutrition
- Failure to give prescribed medication properly.
- Failure to provide appropriate privacy and dignity.
- Inconsistent or reluctant contact with health and social care agencies
- Isolation – denying access to callers or visitors.

Organisational abuse

In the Care Act defines institutional abuse (or "organisational abuse") as one of the 10 types of harm. It includes neglect and poor care practice within a specific care setting. This could be a hospital or a care home, or in relation to care provided in a person's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice because of the structure, policies, processes and practices within an organisation.

Organisational abuse may include.

- Inappropriate use of power or control.
- Inappropriate confinement, restraint, or restriction.
- Lack of choice – in food, in decoration, in lighting and heating, and in other environmental aspects.
- Lack of personal clothing or possessions.
- No flexibility of schedule, particularly with bed times.
- Financial abuse.
- Physical or verbal abuse.
- An unsafe, unhygienic or overcrowded environment.
- A strict or inflexible routine.
- Lack of privacy, dignity, and respect for people as individuals.
- Withdrawing people from community or family contacts.
- No choice offered with food, drink, dress or activities.
- No respect or provisions for religion, belief, or cultural backgrounds.
- Treating adults like children, including arbitrary decision-making.

Self-neglect

Most forms of neglect or abuse are perpetrated by another person and the law generally presumes there is a perpetrator as well as a victim. An exception is self-neglect.

Self-neglect covers a wide range of behaviour, neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. Self- neglect it is also defined as the inability (intentional or non-intentional) to maintain a socially and culturally accepted standard of self-care with the potential for serious consequences to the health and well-being of the individual and sometimes to their community[2]

Self-neglect covers a range of behaviour related to neglecting to care for one's personal hygiene, health, or surroundings and includes behaviour such as hoarding. Evidence of self-neglect may not prompt a formal safeguarding enquiry but may lead to other forms of social care intervention.

For further information on self-neglect see the DSPP website

[2] WM Policies and Procedures for Adult safeguarding (2019)

Pathways

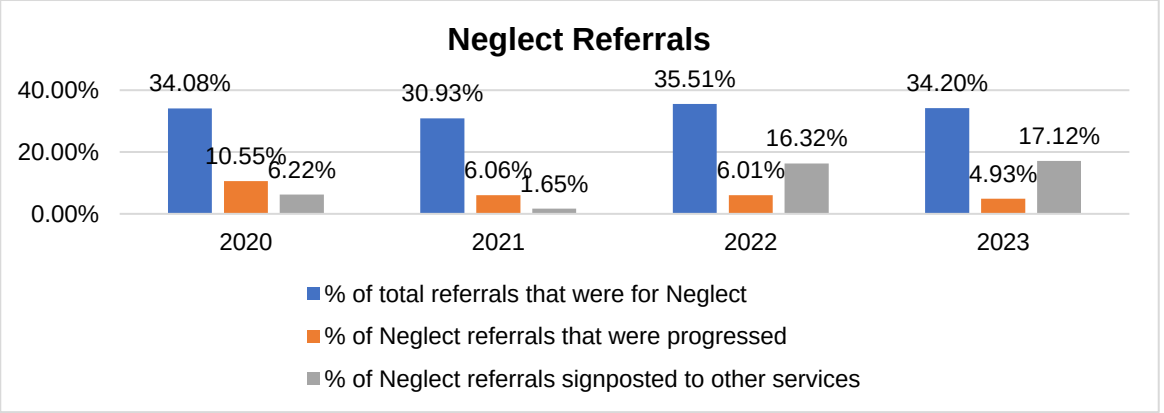
In Dudley we use the following processes and pathways:

- Self-Neglect
  https://www.safeguardingwarwickshire.co.uk/images/downloads/WM_Self-neglect_guidance_v30.pdf
- Neglect - Acts of Omission
  https://www.safeguardingwarwickshire.co.uk/images/downloads/West-Midlands-Policy-and-Procedure/WM_Adult_Safeguarding_PP_v20_Nov_2019.pdf

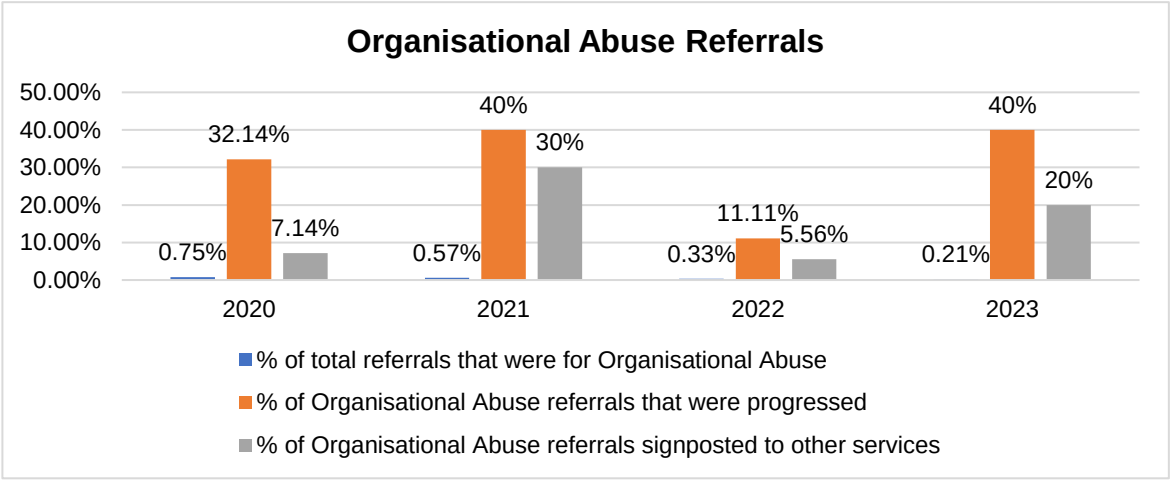
What does the data tell us about adult neglect in Dudley?

On average, Neglect referrals have accounted for around 33% of all referrals to Adult Social Care since 2020:

Neglect				
	2020	**2021***	**2022**	**2023****
Total referrals received	**3727**	**1762**	**5385**	**2374**
Neglect referrals	1270	545	1912	812
Progressed to enquiry	134	33	115	40
MASH signposted to other services	79	9	312	139

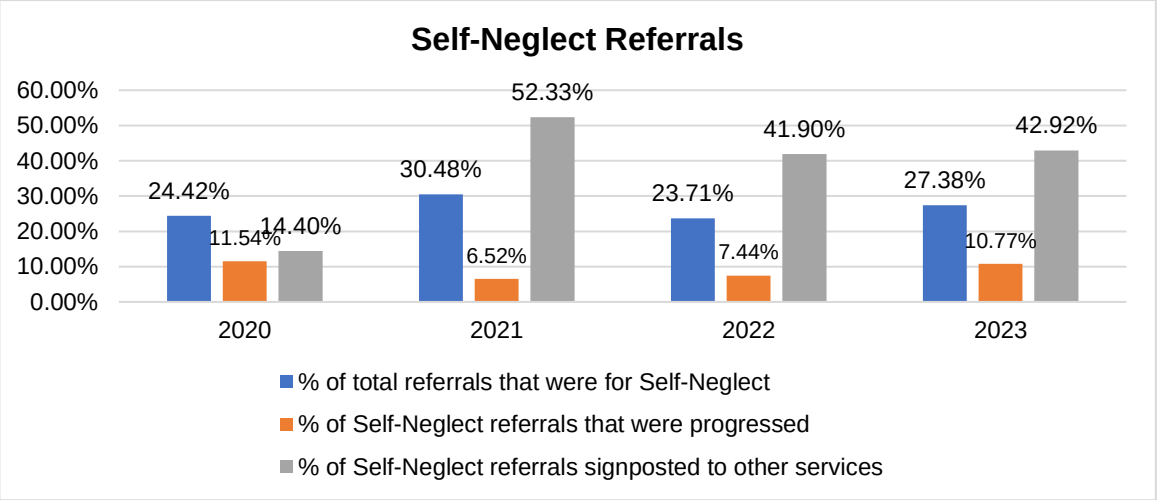


Organisational Abuse				
	2020	**2021***	**2022**	**2023****
Total referrals	**3727**	**1762**	**5385**	**2374**
Organisational Abuse referrals	28	10	18	5
Progressed to enquiry	9	4	2	2
% signposted	7.14	30.00	5.56	20.00



Self-Neglect				
	2020	**2021***	**2022**	**2023****
Total referrals	**3727**	**1762**	**5385**	**2374**
Self-Neglect referrals	910	537	1277	650
Progressed to enquiry	105	35	95	70
MASH signposted to other services	131	281	535	279

* 2021 data is not complete
** 2023 data complete up to 3rd May 2023



The data currently available has limitations and could have different interpretations – the long-term ambition is to establish a robust multi agency data set that includes a range of evidence.

The Care Act: Safeguarding Adults

The Care Act 2014 sets out a clear legal framework for how local authorities and other parts of the system should protect adults at risk of abuse or neglect.

Local authorities have specific safeguarding duties. They must:

- Lead a multi-agency local adult safeguarding system that seeks to prevent abuse and neglect and stop it quickly when it happens
- Make enquiries, or request others to make them, when they think an adult with care and support needs may be at risk of abuse or neglect and they need to find out what action may be needed
- Establish Safeguarding Adults Boards, including the local authority, NHS and police, which will develop, share and implement a joint safeguarding strategy
- Carry out Safeguarding Adults Reviews (SAR's) when someone with care and support needs dies or is seriously harmed as a result of neglect or abuse and there is a concern that the local authority or its partners could have done more to protect them
- Arrange for an independent advocate to represent and support a person who is the subject of a safeguarding enquiry or review, if required.

Any relevant person or organisation must provide information to Safeguarding Adults Boards as requested.

Dudley's Vision

A borough where all adults can live a life free from neglect.

The Dudley Safeguarding Adult Board (DSAB) is committed to the vision and has developed this prevention strategy, in line with the requirements in the Care Act 2014, to demonstrate Dudley's commitment to preventing and reducing the risk of neglect to those adults with care and support needs.

The Board cannot realise this vision alone and this strategy details how the DSAB will work, in partnership with citizens as well as both statutory and non-statutory partners in order to achieve the vision.

Principles

This strategy is aligned to the 6 principles of the Care Act:

DSAB Principles

DSAB principles are the way we expect each other to work with adults and their families.
We will:

- Have conversations and listen to adults and their families as early as possible
- Understand the adults lived experience by making safeguarding personal
- Work collaboratively to improve adult's lived experiences using trauma informed approaches
- Be open, honest and transparent with adults and their families in our approach
- Empower adults and their families by working with them
- Work in a way that builds on the families' strengths

We will achieve our vision by:

There are four strategic objectives that underpin our approach:

Recognise: Practitioners and managers in all agencies are able to recognize the various signs of neglect when working with adults and families to ensure the appropriate initial response.

Respond: Partner agencies will provide appropriate responses to adults and their families through a multi-agency “Think Family” approach in line with the guiding principles in this strategy.

Quantify: Across the partnership we will aim to identify the extent and range of neglect in Dudley through information gathering to inform improvements in practice.

Evaluate: Using DSAB audit and evaluation of adult protection processes and guidance we will assure ourselves of the quality of our multi-agency response to adult neglect across the borough demonstrating that our work has impacted on outcomes and the quality of life for adults suffering neglect and their families.

Priorities for 2024 – 2029

Priority 1 – Strategic commitment across all agencies

Preventing neglect is a priority for Dudley.

To address this, we will:

- Launch Dudley's Adult Neglect Strategy
- Drive neglect as a key priority of the DSPP with a whole family approach
- Develop an adult neglect scorecard to enable us to measure success
  Moving forward develop a quality statement and minimum standard re neglect – i.e., develop a response expectation mapped against the available resources
- Raise awareness and collaboration around neglect with other partnership boards.
- Develop practice guidance to support professionals working with adults and their families where neglect is identified.
- Ensure agencies take responsibility to communicate, implement and embed in their service this strategy, practice guidance, and reviewed policy, embedding a strong audit process to review their own effectiveness on a regular basis.
- Develop a programme of multi-agency neglect themed audits to support enhancements in service delivery
- Consult adults and their families within audit and evaluation to understand what services made the biggest positive impact for them
- Agree a Multi-agency Action Plan that will set out what we need to do to achieve the aims and objectives of this strategy

Priority 2 – Prevent neglect through early identification and support

It is imperative that frontline practitioners identify signs of neglect at an early stage of partnership involvement. The impact of neglect is often gradual and therefore there is a risk that agencies do not intervene early enough to prevent harm.

To address this, we will:

- Ensure that adult neglect is included in the DSPP training offer.
- Require assurance from partner agencies that frontline practitioners have completed appropriate training.
- Carry out audits of concerns received by adult social care including adult MASH referrals and referrals for allocated cases to determine if neglect was recognised and acted upon in a timely manner.
- Complete Multi Agency audit
- Develop a neglect screening tool to use across the partnership.
- Develop good practice case studies.
- Embed Graded Care Profile2 Antenatal for pregnant women.
- To understand what signposting / early help is available for adults across the Borough.

Priority 3 – Improve awareness, understanding and recognition

There is a potential for adult neglect to be overlooked or misinterpreted by professionals.

To address this, we will:

- Work with adults and families to gain a better understanding of neglect from their perspective

- To ensure that information on adult neglect is included in the updated DSPP website to include procedures and content around neglect.
- Improve the use of communication channels and campaigns to raise awareness of adult neglect within the community in order to promote awareness, understanding and recognition of neglect, including newsletters, Twitter, Facebook, etc.
- Provide a Dudley wide workforce development offer about recognising and responding to neglect at the earliest possible opportunity.

Priority 4 – Improve effectiveness of interventions and reduce the impact of neglect on adults across the Dudley borough

Ensure our interventions make an immediate improvement to the lived experience of our adults to prevent re-referrals of concerns.

To address this, we will:

- Consult with practitioners to understand their knowledge levels when dealing with neglect, their perceptions of impact of their work and what ongoing professional development they may need to carry out their role
- Review the multi-agency process to repeated concerns of neglect for the same citizen
- Consider the increased risk of neglect to adults with learning disabilities/complex health needs and/or a lack of capacity in all areas of work
- Continue to have strategic oversight of neglect across Dudley via the DSPP neglect subgroup whereby members can share concerns, good practice and develop ongoing processes for managing cases of neglect.
- Improve our responses to specific target groups, e.g., adults with learning difficulties, those who lack capacity or have complex health needs.
- Analyse the data locally and compare it with national (comparators) data and published reports and research.
- Provide regular reports on findings to enhance service delivery.
- Identify themes and trends, using this information to inform our service developments and identify vulnerabilities across the partnership landscape

Making our Priorities happen

Governance and Accountability

This strategy is owned and overseen by the Dudley Safeguarding Adults Board (DSAB) however; it requires all partners in the borough to commit to embedding the strategy across their organisations.

The DSAB will monitor progress against the strategic objectives on an annual basis. The effective delivery of the strategy will be reported to the DSPP Executive.

In Dudley we focus on impact and outcomes, taking a step-by-step approach to improve conditions of wellbeing by understanding how we want those conditions to look and feel, how to measure changes; decide who needs to be involved and what practical steps need to be taken

Measuring Success

It is important that measures of success are established and agreed. The following outcome indicators will demonstrate the effectiveness of the strategy and its implementation. The DSAB will produce an action plan linked to the aims in this strategy. We will measure our success by the achievement of our aims and, ultimately, our vision of “A borough where all adults can live a life free from neglect”.

This means we will:

- Reduce the incidence of neglect in Dudley.
- Support and protect individuals who experience repeat instances of neglect and work with organisations to reduce this.
- Put an emphasis on prevention in all multi-agency DSAB learning opportunities.
- Seek assurance that learning opportunities to relevant staff groups delivered by partners include links to safeguarding and preventing neglect.
- Improve strategic and operational working between children and adult services, enabling a whole family approach, to support an effective transition into adulthood for all. The importance of transition planning is paramount to enable a responsive service to adolescent needs, aiming to avoid a "cliff-edge" experience for those who may not necessarily meet adult care thresholds for support. The well-being of the individual will always be at the centre of any transition process.
- Reduce the number of repeat referrals to adult social care due to neglect.
- Reduce the number of Section 42 enquiries involving cases of neglect and reduce the numbers of referrals received for a second or subsequent time.
- Seek adult’s views of neglect through the DSAB safeguarding survey, feedback during Section 42 enquiries and case conferences or Large-Scale Enquiries (LSE) and specific work as part of the neglect strategy.
- Multi-agency audits of adult neglect cases to identify learning and good practice including outcomes of adult protection plans.

It should be acknowledged that in the short to medium term, through improved recognition of neglect etc. there may be an increase in some of the above indicators where a reduction would normally demonstrate effectiveness

Case Study 1 – Mrs C

Mrs C was 78 years old and living with dementia. She was resident in a care home in the Dudley borough and was the victim of a sexual assault perpetrated by a peer. Several similar concerns were received around how the care home were keeping residents safe from harm and a large-scale enquiry was opened.

An enquiry was undertaken; Mrs C's views and wishes were sought with the support of her daughter and information was collated from partner agencies including Police, community health professionals and the GP. The care home had not recognised when her health was deteriorating, did not sufficiently support with fluids, nutrition, personal or catheter care, and was not recording or assessing falls appropriately. It was determined the care home had neglected Mrs C and other residents by not managing risks, leading to her and others being harmed.

Mrs C was kept at the centre of the section 42 enquiry through the close involvement of her daughter, who ensured her voice was heard. The outcomes informed the large-scale enquiry and helped agencies understand the first-hand experience of residents. Subsequently the care home closed.

Mrs C's daughter believes it is important that her mom's story is heard to show abuse affects real people. She wants her mom's experience to "have a greater impact, so she does not just become an unknown person, but a mum and a grandma who was loved and was let down terribly". Mrs C's daughter thanked Dudley safeguarding for all the work undertaken in completing the enquiry.

Case Study 2 – LWFS

The person's name has been anonymised to protect their identity.

Ms X lives alone in an owner-occupied terraced house. Ms X has family, who is also a next of kin living nearby. Ms X has a health condition, COPD, and her current living conditions are impacting on her breathing. Mrs X partner died a few years ago suffers with depression and anxiety which has led her to self-neglect and unable to look after her property.

A Living Well Feeling Safe (LWFS) Referral was received from a senior social worker for the LWFS team to carry out a home safety assessment due to the central heating boiler not working, the front lounge full of debris from a previous storm and extensive ceiling damage, a recent water leak from underneath the kitchen sink had caused the water to be turned off with Ms X having little funds available to get this fixed. Ms X had previously turned down a referral to Winter Warmth but was happy for advice from LWFS.

A LWFS technician attended the property to complete a LWFS assessment.
Ms X met the LWFS Technician at the rear door and was visibly upset. Ms X stated that she has been having panic attacks due to the visit. Ms X was very concerned about the state of her property and was very reluctant to let the technician into the property. The technician told Ms X that they could briefly talk outside if she preferred, to which she did agree. Ms X had previously lost her partner and since then she has declined in health and due to depression, had lost all interest in keeping the house clean and tidy. Ms X informed the technician that due to leaks in the roof the ceiling in the front lounge had collapsed causing it to look like a building site. Ms X also stated that the boiler had stopped working, meaning she had had no heating over the winter, there had also been a flood in the kitchen, which meant the water had to be turned off. Ms X was currently unable to afford to have the water leak repair completed and was buying bottled water to make drinks, wash and flush the toilet. The rear door also did not lock which was a security risk. Ms X was not able to use the front door because of the debris in the front lounge. Ms X stated that she wished to leave her property for warden/sheltered housing. After talking to Ms X, she offered the LWFS technician into her property to take a look.

Ms X spends most of her time in a rear room which she currently lives and sleeps. The kitchen is located at the rear with a downstairs toilet.
Due to fire risks and no working smoke detectors in the property the LWFS technician asked if Ms X would let the Fire service attend and install the detectors and carry out a safe and well visit for her. Ms X got upset saying that she would not be happy with this but would accept the offer of the LWFS technician to fit the smoke detectors for her. The LWFS technician following the visit notified WMFS, who provided 2 smoke detectors to be installed by the technician. Ms X agreed to the LWFS technician returning to install the smoke detectors, ease the rear door and replace the mortice lock and handles. Ms X was also happy for the technician to refer to Enabling Community Support (ECS) to help support with completing application forms for moving property and to the MASH Safeguarding team.

A visit was booked up with the LWFS team to revisit and a smoke detector was installed downstairs, Ms X at this time did not want the technician to go upstairs to install a second detector. The security to the rear door was also addressed.

The LWFS Technician arranged for the ECS team to make contact for a visit which was carried out at Brett Young Centre where Ms X felt more comfortable. The Housing application was completed.

ECS have completed a joint visit with an Assistant Care Coordinator (ACC) who has been allowed to make suggestions on decluttering and also to make contact with the West Midlands Fire Service, Vulnerable Persons Officer, to address the fire risks within the property. Ms X would like the ACC to accompany fire on the visit. Cleaning companies have also been identified to help with the clean-up of the property accompanied by the ACC.

Visits with the ACC and cleaning companies to get quotes on the clean have started to commence. Funding is going through Panel.

The LWFS technician will also obtain quotes from a registered Plummer regarding fixing the water leak.

Case ongoing.

Learning points / best practice:

- Time taken to build relationships / confidence / listening to the person to go “at their pace”.
- Putting the person at the centre of all interventions and being guided by the person with regards to what they want to happen, when and who with
- Effective communications between all agencies
- Multi-disciplinary approach
- Recognising that the person may be traumatised as a result of the death of their loved one.

Challenges:

- Building a trust-based relationship
- Not rushing but working with the person at their pace and tackling small “quick wins” to build on tackling bigger picture needs.

DSPP would like to thank the members of the multi-agency task and finish group as part of the Neglect sub group for their input into the adult neglect strategy.