



ADULT PRACTICE REVIEW – APR3/2015 - SUMMARY

Background:

Adult A passed away March 2015. Adult A was employed as a shift worker until being made redundant in 2007. Adult A and partner worked alternate shift patterns for many years. Professionals involved in his case note that redundancy had a significant impact upon Adult A's self -esteem and perceived role within the marital relationship.

Information gathered during the review indicated that the marital home was significantly cluttered with clear signs of hoarding behaviour. It is not believed that the hoarding behaviour was directly associated with Adult A.

Areas considered during the review were:

- ➤ History of self –neglect:
- ➤ Hoarding and cluttering:
- Lengthy hospital stays:
- Mental capacity:
- > Insight into own needs

Findings:

It is evident that Adult A, during the latter part of life self-neglected on a cyclical basis. There is no evidence to suggest that consideration was given to the reasons for Adult A's self-neglect and agencies tended only to deal with the effects of this self-neglect. At various times during the course of the 2 year focus of this review, Adult A was in need of health and social care services. The family home was extremely cluttered, in poor condition and unhygienic.

Throughout this 2 year period there is very little evidence of any consideration or any work being carried out with Adult A's partner or wider family.

There is no evidence of any psychological interventions being explored or offered.

The review highlighted some areas of effective practice, namely the development and maintenance of a positive working relationships.

Recommendations:

In circumstances such as Adult A, where self-neglect is recognised, the Adult protection plan should be clear and specific indicating trigger points at which a multi-disciplinary meeting will be called to discuss the individual and interventions to support them.

A lead officer / designated officer should be agreed in all cases were self-neglect is prevalent. The lead officer should be the person who knows the individual best from any agency.

In cases of self-neglect, all members of the multidisciplinary team should be aware of their individual responsibilities to report contact / lack of contact, with adult to the lead officer / designated officer.

In circumstances were multidisciplinary team meetings / discussions are called to discuss self-neglect, a review of capacity should always be considered.

In cases were self-neglect and hoarding are indicated, the wider family context should be considered. The focus of any intervention should take this into account.