

Adult Neglect Best Practice Guidance

Adults with care and support needs are often dependent on others to meet their most basic needs. Sometimes these needs go unmet, putting the adult at risk because a person supporting them either cannot or does not do what is necessary to meet their needs. This is neglect.

Neglect can be wilful, or deliberate, but it can also be inadvertent. Neglect can happen because someone doesn't understand the care that someone needs, or is unable to meet their needs and doesn't know how to get help.

Neglect of adults makes up a significant proportion of safeguarding concerns raised about adults in Hillingdon.

Neglect includes:

- ignoring medical, emotional, or physical care needs
- failure to provide access to appropriate health, care and support or educational services
- withholding the necessities of life, such as medication, adequate nutrition and heating

In this briefing:

- Signs and Indicators of Neglect
- Opportunities to Prevent Neglect
- When Someone Cancels or Declines care
- The Importance of Working With Informal Carers
- Engaging Resistant or Hostile Carers
- When is Neglect a Criminal Offence?

If you suspect neglect, by anyone, please make a safeguarding referral with as much detail as possible using the [online referral form](#) or, if urgent, call 01895 556633.

Signs and Indicators of Neglect

Professionals should look out for signs of neglect in order to address it and improve the support available to adults at risk. Be curious and explore what is going on if you notice any of these factors. They might indicate unmet need.

- Refusal of support even when there are clearly identified needs
- Poor environment – dirty or unhygienic
- Poor physical condition and/or personal hygiene e.g long toenails or malodour
- Pressure sores or ulcers
- Malnutrition or unexplained weight loss
- Untreated injuries and medical problems
- Inconsistent or reluctant contact with medical and social care organisations
- Accumulation of unused medication
- Uncharacteristic disengagement from social interaction
- Inappropriate or inadequate clothing

If you are concerned that a person is being neglected, think about whether there are any other people reliant on the same carer or carers. You need to consider all people who may be at risk. You need to raise the alarm if you think someone is not receiving support they need.

Opportunities to Prevent Neglect

There are many ways that professionals can act to prevent neglect, both in our interactions with adults and their families, and in terms of organisational processes and procedures. Think about how to do this in your own work and how the tips below apply in your role.

Steps to Prevent Inadvertent and Unintentional Neglect

- Thorough assessment of care and support needs, and assessment of carers' needs including an honest and frank assessment of their willingness and ability to meet needs.
- Ensuring carers, paid and informal, are clear on how they can meet the needs of the adult and exactly what is expected of them, and how they can seek help if they are not sure.
- Contingency planning, especially with informal carers, particularly when the adult has a deteriorating condition such as dementia or other degenerative disease.
- Being realistic about the level of care that someone is agreeing to undertake - no one can provide care on their own 24 hours a day. In an attempt to be loving and supportive people sometimes overestimate what they can cope with.
- Sharing accurate, clear and thorough information with care providers, including family carers, at points of transition such as hospital discharge, and moves from one care provider to another, or when informal carers are taking over care.
- Clear care plans and recording of needs held by paid care providers and care managers and informal carers.

Steps to Prevent Wilful Neglect

- Safer recruitment processes, where references and DBS checks are completed and training and supervision are provided regularly.
- Use the Adult Local Authority Designated Officer (LADO) Process when you have concerns about the behaviour of any person in a position of trust outside of their work role.
- Thorough investigation of complaints and spot checking practice can also help reduce risk.
- Exploration and professional curiosity about family dynamics. Take account of background information or current concerns about domestic abuse or family conflict when exploring a person's ability and willingness to care for someone.
- Respectful but frank challenge when seeing something that contradicts what you are being told, such as poor personal hygiene or an unkempt home environment.
- Paying attention and thinking about the lived experience of the adult receiving care. Be curious about what life is like for them.

When Someone Cancels or Declines Care

There are times when people cancel their care or decline care that they appear to need. Sometimes, people attributed the decision to cost of care, or they prefer to depend on an informal carer. Whatever the reason, it can increase risk of neglect or self neglect.

- A request to cancel, or a refusal of care, should be fully explored. The decision should not be taken at face value.
- Sometimes reluctance to pay for care can indicate neglect by family members with control and influence over the person's finances. This should be explored and challenged.
- Sometimes informal carers can agree to take on a caring role without understanding the person's needs. It is important to explore their ability and willingness to meet needs thoroughly if withdrawing paid care.
- A cancellation of care should prompt a reassessment of needs and risks, including whether there are realistic and sustainable plans in place to meet the person's needs and manage the risk of neglect.

The Importance of Working with Informal Carers

The Safeguarding Partnership produced a briefing focusing on the importance of working with carers to safeguard practice with children and adults.

The briefing covers:

- Young Carers - A Safeguarding Response
- Carers for Children with Disabilities
- Identifying and Assessing Adult Carers: Are They Able and Willing to Care?
- Learning from Practice
- Engaging Intimidating or Resistant Carers



Engaging Intimidating or Resistant Carers

If an informal carer or family member refuses your involvement or that of other services, be curious about why.

- What are they worried about? Be curious, ask questions, explore their reasoning and concerns.
- Is there another specialist organisation, such as the Carers Trust, you could go to for support, or which the family might be more responsive to? Or another professional they already trust?
- Consider whether they may have mental health problems or drug and alcohol issues or might be hiding something, e.g. domestic abuse/financial abuse.
- If you have reason to believe the adult might have care and support needs, do not walk away until you are confident that they are receiving the support they need.
- Always discuss difficulties engaging family/informal carers in supervision. It can indicate safeguarding concerns.
- Beware about disguised compliance - sometimes people have reasons for misleading professionals and sometimes this indicates significant risk of abuse.

There is substantial transferable learning from serious child safeguarding cases about 'disguised compliance' by carers and family members. Click here for an NSPCC briefing to support all safeguarding practice



If an informal carer or family member is resistant, forceful or intimidating towards you or other professionals, consider the following:

- Think about what it might feel like for the adult with care needs, or children, to live with or depend on that carer/family member. Intimidating or forceful behaviour can indicate that they may be perpetrating coercion and control or other forms of domestic abuse.
- It is normal for professionals to feel uncomfortable when working with intimidating or hostile families. This can impair professional judgement, so supervision, support and critical reflection are vital.
- Gather information from other agencies and share your concerns - this aids risk assessment.
- Consider methods of safe engagement, such as visiting jointly with colleagues.
- Managers should consider the most appropriate staff to allocate work to - not all practitioners have the same level of skill in managing conflict. It is crucial to ensure that children or vulnerable adults in need of support are not side-lined because of intimidation of professionals by family members and informal carers.

When is Neglect a Criminal Offence?

Some neglect is criminal. It is important to report concerns about suspected criminal neglect to the police as soon as you identify that a crime may have been committed. This briefing on reporting crimes to the police can help you navigate any dilemmas about this.



Sections 20 and 21 of the Criminal Justice and Courts Act 2015 makes it a criminal offence for an individual or an organisation to wilfully neglect or mistreat any person who is in receipt of any type of health and/or social care provision. This offence can apply even where no actual harm was caused.

The offence applies:

- to all formal healthcare provision for adults and children in both the NHS and private sector, other than in specific excluded children's services and settings;
- to all formal adult social care provisions, in both the public and private sectors, including where care is self-funded; and
- to individuals and organisations paid to provide or arrange for the provision of these health and adult social care services.

Section 44 of the Mental Capacity Act 2005 makes it a criminal offence to ill-treat or wilfully neglect an adult who lacks mental capacity. This offence can apply even where no actual harm was caused.

This applies to anyone who:

- provides care - paid or informal - for a person who lacks, or whom the carer reasonably believes lacks capacity,
- holds Lasting Power of Attorney for the person who lacks mental capacity
- are court appointed deputies for the person who lacks mental capacity

Definition of ill-treatment and wilful neglect:

- deliberate conduct which could reasonably be described as ill-treatment, or neglect, irrespective of whether it damaged or threatened to damage the health of the victim; and
- an understanding by the offender at the time of the offence that s/he was inexcusably ill-treating an adult with care and support needs or healthcare needs, or that s/he was reckless as to whether s/he was inexcusably acting in that way.
- Intentional or reckless neglect of a person.