

Background

The Safeguarding Adults Review (SAR) Subgroup received a referral for Adult N, a man in his 40's who passed away. He was known to be alcohol dependent and had appeared to be self-neglecting. Adult N appeared to have care and support needs, which arose from or were related to physical or mental impairment or illness, which can include conditions as a result of substance misuse.

Adult N was in the Kirklees area for 3 months during which time touched on a number of services and there were missed opportunities identified. The SAR subgroup reviewed records from the organisations who had worked with Adult N and found that it met the criteria for a review to be conducted.

Safeguarding Concerns

- There is evidence of communication between services, however not all agencies may have had a complete picture indicating patterns of risk
- Making Safeguarding Personal is a core component of adult safeguarding practice with individuals. There is sporadic evidence of agency staff discussing options for support with Adult N, however, little is known about his wishes, feelings and desired outcomes
- No referral for a care and support assessment appears to have been sent to Adult Social Care in Kirklees.
- No referral down the self-neglect pathway
- No Safeguarding referral (Section 42*) raised
- No Mental Capacity Assessment (including Executive functioning*) carried out
- Disclosed had moved from one area to another and this did not prompt Professional Curiosity* to gain further insight into his level of need

Key Learning

Timely responses to presenting needs:

- undertaking capacity assessments and making referrals under [The Care Act 2014](#)
- Knowing when to follow the Self-neglect pathway

Sharing information at the right time

Holding Multi-agency meetings

Practitioners were reassured by his articulate accounts of his intentions when sober

All agencies need to have an awareness of when and how to use Mental Capacity Act to safeguard adults

There was delay in agencies coming together to share information and concerns in this case.

Practitioners need to know how and when to refer. See the [Joint Multi-agency Safeguarding Adults Policy and Procedures](#)

Good Practice

Multi-agency meetings are common practice in Kirklees
Housing/an agency involved approached family to gain more insight into the situation and carried out welfare checks and raised a self-neglect referral
GP seeking Adult N's consent to share information
Evidence of outreach and concerned curiosity by Housing Solutions
Housing Solutions used discretion and flexibility when applying Homeless Reduction Act legislation to Adult N's case in an attempt to meet his needs
Evidence of good practice in other areas

Kirklees Safeguarding Adult Board Response

Audited the outcomes of the revised and relaunched [Self-neglect pathway multi-agency policy](#) including the Risk Escalation Conference (REC)
To consider how it can support practitioners to include executive functioning in mental capacity assessments
Report was shared with the Director of Quality and safeguarding / regional safeguarding lead NHS England with specific reference to the transfer of GP records
Convened a summit of commissioners and providers to review the response to individuals who are alcohol dependent, and specifically, whether there are gaps in practice and in services

*Glossary of Terms used

Professional Curiosity is the capacity and communication skill to explore and understand what is happening within a family rather than making assumptions or accepting things at face value. Professional Curiosity can require practitioners to think 'outside the box', beyond their usual professional role, and consider families' circumstances holistically. Curious professionals engage with individuals and families through visits, conversations, observations and asking relevant questions to gather historical and current information. [Professional Curiosity Resource Pack](#)

Executive functioning is about the ability to use or weigh information. The Code of Practice (para 4.21) notes: 'For someone to have capacity, they must have the ability to weigh up information and use it to arrive at a decision. A person must accept the information and take it into account. A person may appear to be able to weigh facts while sitting in an interview setting but if they do not transfer those facts to real life situations in everyday life (executing the plan) they may lack mental capacity.'

Safeguarding concern sometime referred to as a **Section 42** under the Care Act is the process to refer allegations of abuse and neglect of an adult at risk (someone with care and support needs)

If you need to raise a safeguarding concern contact Gateway to Care – call 01484 414933 or email GatewayToCare@kirklees.gov.uk

If any agency who was involved wishes to see copy of the report they are requested to contact ksab@kirklees.gov.uk