

Self-Neglect Panel Terms of Reference

Introduction:

This Panel is endorsed and produced by the Bexley Safeguarding Adults Board within the context of the duties set out in the Care Act (2014) Care and Support Statutory Guidance. It should be referred to when an adult at risk is believed to be self-neglecting and the current risks are elevating /other panels aren't working. The Board is the appropriate forum where strategic decisions can be made to deal with what are often complex and challenging situations for practitioners and managers as well as communities more broadly.

Under Section 42 of the Care Act 2014, Safeguarding duties apply to an adult who meets the following criteria: has needs for care and support (whether or not the local authority is meeting any of those needs) and; is experiencing, or at risk of, abuse or neglect and; as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

An adult who meets the above criteria is referred to as an 'adult at risk'. Safeguarding duties also apply to unpaid carers experiencing intentional or unintentional harm from the adult they are supporting or from professionals and organisations they are in contact with.

The Aims of the Panel:

Our purpose is to reduce risk and where possible prevent serious injury or death of individuals who appear to be self-neglecting by ensuring that:

- Individuals are empowered as far as possible, to understand the implications of their actions and/or behaviours.
- There is a shared, multi-agency understanding and recognition of the issues including those involved in working with individuals who self-neglect.
- There is effective multi-agency working and practice and concerns receive appropriate prioritisation.
- That all agencies and organisations uphold their duties of care.
- There is a proportionate response to the level of risk to self and others.

How the panel works:

Step 1: Referral process:

A referral form must be filled in where there is a concern that an individual is at significant risk of harm due to self-neglect and a multiagency case conference is required.

The Chair of the panel will screen the referrals to see if it fits the criteria or should be heard at another existing panel.

Step 2: A Multi-Agency Case Conference:

The case conference will be held every **6 weeks on a Wednesday 2-5**.



A conference will be considered where:

- The current level of professional intervention has not reduced the level of risk and significant risk remains.
- It has not been possible to coordinate a multi-agency approach through work undertaken up to this point.
- The level of risk requires a more formal information sharing process to agree and record a multi-agency action plan.

The principles for arranging a Multi-Agency Case Conference are to consider:

- The individual's view and wishes as far as known;
- Information, actions, and current risks;
- The on-going lead professional/agency who will coordinate this work and
- Evaluate relevant information to inform the most effective action plan.

Guidance for Multi-Agency Case meeting:

The referring agency will plan to involve the individual concerned.

Every effort must be made to engage with the individual and to enable them to communicate their views to the meeting. If the individual does not wish to attend the meeting, representatives will need to consider how their views and wishes are to be presented at the meeting e.g. by the appointment of a formal or invitation extended to an informal advocate.

Panel members should attend the meeting with an understanding of their responsibilities to share relevant information to reach an agreement on the way forward.

It is important to ensure that any actions agreed comply with legislation and statutory duties. Legal representation at the meeting may need to be considered to facilitate discussions around relevant legal options. This may include application to the Court of Protection where there are concerns about mental capacity or to the High Court (Inherent Jurisdiction) where the individual is believed to be mentally capacitated.

An action plan should be developed and agreed by members of the meeting. Where there are disagreements about any aspects of the plan, these should be resolved by consultation with a senior manager from the Local Authority.

The chair of the panel will ensure clarity is brought to timescales for implementing contingency plans, so that where there is legal and professional remedy to do so, risk is responded to, and harm is reduced/prevented. (The chair is not responsible for ensuring that identified action points are correctly followed up).

It is the responsibility of the panel members to ensure identified actions are implemented and followed up.

Who are the Panel members?

There will be two Co-Chairs:

1. Sue Chandler, Head of Safeguarding Adults/Principal Social Worker



2. Philippa Uren, Designated Nurse, Integrated Care Board, Bexley

The business duties will sit with the Bexley Safeguarding Adult Board team, such as – admin/rooms/meetings times/ etc.

The core panel members will be:

- Statutory Partners
 - London Borough of Bexley
 - Metropolitan Police Service
 - o Integrated Care Board

For the meeting to be quorate there has to be three core Statutory partners for decision-making.

The following agencies/teams will be invited as and when required (non-exhaustive):

- Acute and Community Health Care Services SLAM, MIND
- Primary GP
- Housing Provider
- London Ambulance Service
- Care Agencies
- Oxleas Safeguarding Adult Team; Practitioner
- Acute Trusts- DVH, QEH Safeguarding Teams
- Probation
- Public Health
- Environmental Health
- Legal Services
- Advocate
- Community Safety
- One Bexley or Community/Voluntary Sector/ Community Networks
- Housing Services
- London Fire Brigade
- Any other agency/team that is deemed appropriate to the individual.

Outcomes of the meeting may include the following:

- An action plan including contingency plans and escalation process and time scales.
- Agreement of monitoring and review arrangements and who will do this.
- An agreement of a communication plan with the individual / other key people involved.
- An agreement regarding which agency/ies will take the lead in the case.
- An escalation to the BSAB Independent Chair