



SELF-NEGLECT

Investigators may observe self-neglect if they are conducting a wellness check or another investigation. In cases of self-neglect, there is no perpetrator.

Self-neglect generally manifests itself as a refusal or failure to provide himself/herself with adequate food, water, clothing, shelter, personal hygiene, medication (when indicated), and safety precautions.

Signs and symptoms of self-neglect include, but are not limited to:

- Failure to take essential medications.
- Refusal to seek medical treatment for serious illness.
- Leaving a burning stove unattended.
- Poor hygiene.
- Not wearing suitable clothing for the weather.
- Confusion.
- Inability to attend to housekeeping (piles of trash and belongings everywhere).
- Dehydration
- Malnutrition.

Hoarding may be present in some cases of self-neglect. Hoarding is the excessive collection and retention of things or animals until they interfere with day-to-day functions such as home, health, family, work, and social life. Severe hoarding causes safety and health hazards. Other hoarders will collect objects and be unable to throw anything away so their homes become full of trash. Sometimes it is impossible to walk through the house without creating a path.

Animal hoarders collect many dogs, cats, or other animals. They often claim they are rescuing the animals from harm or death and are unable to see that many of the animals under their care are ill or dying.

National Clearinghouse on Abuse in Later Life (NCALL)

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Investigative Response to Self-neglect Cases

Prior to determining if an older individual is self-neglecting, **investigators should conduct a routine investigation to determine whether a crime has been committed.** Some cases that appear to be self-neglect are actually cases of financial exploitation or neglect.

An investigation should include questions about:

- Who might be providing care and assisting with financial resources?
- Does anyone else live in the home or visit regularly?

If it appears that no crime has been committed, consider these potential referrals:

- General self-neglect: contact adult protective services (APS) or a health care provider.
- Animal hoarding: contact the Humane Society or similar organization.
- If the property is a danger to the older individual or neighborhood: contact building or code enforcement.

Social service workers are not able to remove competent older individuals from their home or tell them how to live their lives without a court order. APS may work with individuals and try to help them access needed medical care and deal with home safety issues as much as possible within the statutory guidelines that regulate their work.

Notes:

NEGLECT

Neglect is defined as the refusal or failure of a caregiver to fulfill any part of that person's obligations or duties to care for an older adult. Neglect may also include the failure of a person who has fiduciary responsibilities to provide care for an older adult (e.g., to pay for necessary home care services), or the failure of a nursing home, adult family home, or in-home service provider to provide necessary care.

Neglect typically refers to the refusal or failure to provide an older adult with necessities such as:

- Food.
- Water.
- Clothing.
- Shelter.
- Personal hygiene.
- Medication.
- Medical care.
- Adaptive devices.
- Comfort.
- Personal safety.
- Other essentials included in an implied or agreed-upon responsibility (contract to care for) to an older adult.

Neglect cases can present unique challenges for investigators. It can often be very difficult to determine when an older person's condition is deteriorating even with quality health care and when neglect has risen to the level of a crime. For example:

- Persons with medical conditions, such as osteoporosis, can break bones easily and accidentally so these types of injuries may not be signs of abuse.
- "Wasting" or malnutrition may be caused by a disease state, not neglect. Investigators must know what the victim's medical history shows.
- Even with proper turning, bedsores (pressure sores or decubitus ulcers) may still occur.
- Chemical or mechanical restraints should not be used unless under medical supervision, and if used should be carefully and frequently monitored.
- Abusers often will limit or block an elder abuse victim's access to health care so when the older person last saw a doctor could be a key indicator. However, persons with a terminal illness or religious or spiritual beliefs about using modern medicine may voluntarily decline to seek health care. This issue will require well documented evidence of the elder's wishes expressed at a time when s/he had the capacity to make an informed decision. Review any advanced directives including powers of attorney for health care and do not resuscitate (DNR) orders.

- Abusers often limit or block the older individual's access to social services, friends, family, and neighbors. However, persons who are not feeling well or are depressed may determine on their own that they no longer want contact with others.

Keep in Mind the Following:

- Treat allegations or your suspicions of neglect no differently than any other incident or crime with potentially life-threatening injuries.
- Call paramedics if immediate medical attention seems appropriate or necessary.
- Thoroughly investigate the scene and collect as much evidence as possible in case the victim is not willing or able to testify.
- Treat the victim's location as a crime scene. Take photographs of the victim's bed, bedroom, bathroom, kitchen, suspect's bedroom, etc. Collect as much evidence as possible.
- Remember that the victim will often be unable to testify at trial, so treat your case from an evidence-based perspective. Be as thorough as possible in collecting evidence, taking photographs, and taking statements.
- Speak to the victim's physician as soon as possible after the incident to determine whether the cause of injuries/symptoms is likely neglect.
- The crime of neglect usually is a general intent crime. Determine if financial ties exist between the victim and suspect or if the suspect has financial gain motives. Get a search warrant for bank records if necessary.
- Take a statement from the caregiver early on in the investigation.
- Consider involving APS in the investigation after the initial evidence has been collected.

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