

## Mr TL Case Study – Self-Neglect

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### Mr. TL's Story

Mr. TL had one brother and one sister and is described by his family as preferring to keep his own company and going about his own business. He was not a person inclined to seek out friendships, however when minded to, Mr. TL would happily converse on topics of interest and was a keen motorbike and car enthusiast.

As a young man Mr. TL lived with his parents and worked at a garden centre as a Nurseryman. Whilst employed he was quite outgoing and sociable; however, this came to an abrupt end following a serious motorbike accident which left him with life-long injuries, combined with the loss of his mother Mr. TL rapidly became withdrawn and solitary.

Following the death of his father, over a period of years Mr. TL had difficulties looking after himself and often neglected his personal care and general physical health. He maintained his interest in motorbikes and cars and would purchase topical magazines and other general information on the subject. This interest often extended to Mr. TL purchasing cars and motorbikes through loans which was unrealistic given his physical disability and financial status. The family home became neglected and unkept which often required a 'deep clean' and 'sort out' with help from his brother and sister-in law who lived close by.

Despite their efforts Mr. TL continued to assert intentions to keep his home clean, supported by his efforts in buying multiple cleaning products, including a new Hoover and rental of a new washing machine; however, all remained untouched and unused as his home became more unsanitary. Over the years Mr. TL purchased a number of cars and motorbikes, other electrical goods and IT equipment, all of which remained unused.

Mr. TL's 'low mood' continued to be a concern as his physical health deteriorated further, combined with financial debt including bankruptcy his living conditions became very difficult, therefore with his agreement the family worked with Mr. TL to find a residential home where he was supported by staff, made friends and his health was notably improved, with family believing he was happy there.

Mr. TL later moved from the residential home to independent living at his own choice. Whilst living independently Mr. TL's personal hygiene deteriorated, displaying previous intentional shopping habits of buying cleaning products and such like. In addition, Mr. TL had entered into a number of financial agreements including a rental of a garage with ambition to buy a motorbike.

Although the family were always respectful of Mr. TL's liberty to live an independent and private life, it was of great sadness and frustration that key information about Mr. TL was not passed on to his family, nor in a timely way (including when he was taken into hospital when he broke his arm and importantly that he had moved from the residential home to independent living).

Following Mr. TL's sad death, the family feel this may have been prevented had statutory services been in place to better support Mr. TL.

## **Summary of Learning**

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### **What went well?**

- Mr. TL accessed GP services and had a good relationship with the surgery
- Consistency of care through GP surgery
- Mr. TL was confident and able to self-refer to services
- Mr. TL's choices about how he wanted to live his life were respected
- Good service received in assessing benefits and eligibility position
- Appropriate response from social care in relation to clutter and self-neglect
- Every organisation involved in Mr. TL's life individually worked to support him

### **What were we worried about?**

- Mr. TL's reluctance to engage his family in his care
- Non-engagement with neighbors meant no one really knew if Mr. TL was ok. Mr. TL was not connected to the local community in this way
- Mr. TL was prescribed medication that increased his appetite
- Mr. TL did not eat well, and his home had excessive amounts of empty pizza boxes adding to clutter
- Mr. TL's mental health needs were not adequately addressed
- Lack of effective co-ordination and silo working between agencies and professionals

### **What is the learning from this case?**

- Enough professional curiosity was not shown around Mr. TL's lack of support networks
- When support was withdrawn, there was no follow up to ensure Mr. TL's care needs could effectively be met in a way that he wanted
- Finance forms became a barrier to Mr. TL accessing services
- Options for mental health support not explored with Mr. TL
- Lack of professional join up and co-ordination between agencies involved in Mr. TL's life
- Hospital discharge care planning not effective (following broken arm)