

Hoarding Guidance

Southend Safeguarding Adults Board
Essex Safeguarding Adults Board
Thurrock Safeguarding Adults Board

In partnership with Southend, Essex and Thurrock
Safeguarding Children Boards

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Title:	Hoarding Guidance
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This should be read alongside:	This document is compliant with all relevant legislation at the time of publication and adheres to the current SET Safeguarding Adults Guidelines and SET Safeguarding and Child Protection Procedures .
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This guidance has been adapted from The London Borough of Merton Hoarding Protocol.

1. Introduction

This guidance sets out an understanding of the issues of hoarding behaviour and details the path a practitioner should take to risk assess and safeguard the individual using a person-centred, outcome focused, solution-based model. This guidance should be read alongside the [SET safeguarding adult guidelines¹](#) and [SET Safeguarding Childrens Guidelines](#)

2. Who does the guidance apply to?

This guidance applies to all those who may come across hoarding behaviour as part of their day-to-day duties. There is an expectation that everyone engages fully in partnership working to achieve the best outcome for the adult and any child(ren), while meeting the requirements and duties of individual agencies.

3. Aims of guidance

The aims of this guidance are to:

- Gather and share information on the complex personal and spatial issues arising from hoarding behaviour from different perspectives including the person with hoarding behaviour, professional and community perspectives.
- Develop “informal” multi-agency solutions which maximise the use of existing services and resources and which may reduce the need for compulsory solutions.
- Ensure that when formal solutions are required, there is a process for planning solutions tailored to meet the needs of the adult(s) and/or any child(ren).
- To establish best practice and improve knowledge of legislation that relates to hoarding behaviour.

4. Definition of hoarding

Mental disorder is defined by the World Health Organisation as:

- Comprise a broad range of problems, with different symptoms.
- Generally characterised by some combination of abnormal thoughts, emotions, behaviour and relationships with others
- Most of these disorders can be successfully treated.
- Mental health problems range from the worries we all experience as part of everyday life to serious long-term conditions.
- The majority of people who experience mental health problems can get over them or learn to live with them, especially if they get help early on.

According to [international classification of Diseases 11 \(2018\)²](#) hoarding disorder is characterised by:

¹ <https://www.essexsab.org.uk/professionals/guidance-policies-protocols/>

² <https://icd.who.int/browse11/l-m/en#/http%3a%2f%2fid.who.int%2fid%2fentity%2f1991016628>

- *“accumulation of possessions due to excessive acquisition of or difficulty discarding possessions, regardless of their actual value.*
- *Excessive acquisition is characterized by repetitive urges or behaviours related to amassing or buying items.*
- *Difficulty discarding possessions is characterized by a perceived need to save items and distress associated with discarding them.*
- *Accumulation of possessions results in living spaces becoming cluttered to the point that their use or safety is compromised.*
- *The symptoms result in significant distress or significant impairment in personal, family, social, educational, occupational or other important areas of functioning”.*

5. What is hoarding disorder?

As so few people with hoarding behaviour have a formal diagnosis of hoarding disorder, this guidance will use the descriptor or person with hoarding behaviour.

The Care Act (2014) statutory guidance includes self-neglect as a type of abuse. It states ‘this covers a wide range of behaviour neglecting to care for one’s personal hygiene, health or surroundings and includes behaviour such as hoarding’. Hoarding can also be result of other health problems; physical illness, dementia, depression, alcohol and drug misuse, schizophrenia, bipolar disorder, learning disability or obsessive-compulsive disorder.

It is important to remember that over 90% of all people with hoarding behaviour have other mental health and physical health issues and would meet the criteria in an assessment based solely on a level 5 or above Clutter Image Rating (Appendix 2). As such it is important to holistically assess social care and other needs.

Hoarding disorder is distinct from the act of collecting and is also different from people whose property is generally cluttered or messy. The main difference between someone who hoards and a collector is that person with hoarding behaviours have strong emotional attachments to their objects which are well in excess of their real value. Hoarding does not favour a particular gender, age, ethnicity, socio-economic status, educational/occupational history or tenure type. Anything can be hoarded, in areas including the adult’s property, garden or communal areas.

6. Types of hoarding

There are three types of hoarding:

- **Inanimate objects:** This is the most common. This could consist of one type of object or a collection of a mixture of objects such as old clothes, newspapers, food, containers or papers.
- **Animal hoarding:** Animal hoarding is on the increase. This is the obsessive collecting of animals, often with an inability to provide minimal standards of

care. The person with hoarding behaviour is unable to recognise that the animals are or may be at risk because they feel they are saving them. In addition to an inability to care for the animals in the home, people who hoard animals are often unable to take care of themselves. The homes of animal person with hoarding behaviours are often eventually destroyed by the accumulation of animal faeces and infestation by insects. Animal hoarding is not classified under Hoarding Disorder.

7. General characteristics of hoarding

- **Fear and anxiety:** hoarding behaviour may have started as a learnt behaviour or following a significant traumatic event such as bereavement. The adult hoarding collects compulsively as a dysfunctional coping mechanism e.g. I feel bad and collecting this makes me feel better. Attempt to discard hoarded items can induce distressing feelings varying from mild anxiety to a full panic attack and/or dissociation.
- **Long term behaviour pattern:** possibly developed over many years, or decades, of “buy and drop”. Collecting and saving, with an inability to throw away items without experiencing fear and anxiety.
- **Excessive attachment to possessions:** people who hoard may hold an inappropriate emotional attachment to items.
- **Indecisiveness:** people who hoard struggle with the decision to discard items that are no longer necessary, including items which may seem to have no value.
- **Socially isolated:** people who hoard can be socially isolated for a range of reasons, including shame. They may refuse home visits from individuals including professionals, in favour of office-based appointments and/or declining support / services.
- **Large number of pets:** people who hoard may have a large number of animals that can be a source of complaints by neighbours. They may be a self-confessed “rescuer of strays”.
- **Mental capacity:** people who hoard are typically able to make decisions that are not related to the hoarding.
- **Extreme clutter:** hoarding behaviour may prevent several or all the rooms of an adults’ property from being used for its intended purpose.
- **Churning:** hoarding behaviour can involve moving items from one part of an adult’s property to another, without ever discarding anything.
- **Self-care:** while an adult who hoards may appear unkempt and dishevelled, due to lack of toileting or washing facilities in their home, most people who hoard will use public facilities, in order to maintain their personal hygiene and appearance.

8. Hoarding insight characteristics

The following is a guide on whether the adult has insight into their hoarding behaviour.

Good or fair insight: The adult recognises that hoarding-related beliefs and behaviours are problematic. The adult recognises these behaviours in themselves.

Poor insight: The adult is mostly convinced that hoarding-related beliefs and behaviours are not problematic despite evidence to the contrary. The adult might recognise a storage problem but has little self-recognition or acceptance of their own hoarding behaviour.

Absent (delusional) insight: The adult is convinced that hoarding-related beliefs and behaviours are not problematic despite evidence to the contrary. The adult is completely accepting of their living environment despite it being hoarded and possibly a risk to health.

Detached with assigned blame: The adult has been away from their property for an extended period. The adult has formed a detachment from the hoarded property and is now convinced a 3rd party is to blame for the condition of the property. For example, a burglary has taken place, squatters or other household members.

9. Legal powers and duties

Local Authorities (LA) where appropriate will always try and work with an adult to identify a solution to a hoarded property, and professionals should contact the environmental waste services department they can be aware of procedures for waste collection and other local facilities available. However, in cases where the adult is not willing to co-operate the LA can serve notice on the owner or occupier.

A selection of the key Acts, duties and powers are included below:

The Care Act 2014

Please note that this Act does not provide a right of entry.

Section 6: Co-operation

Local authorities should co-operate in cases such as this. Specifically, this will mean that the local authorities should work in tandem with each other where appropriate.

Section 9: Assessing an adult's needs for care and support

The offer of an assessment should be made to the adult because it will likely appear to the local authority that the adult may have care and support needs.

Section 42: Safeguarding

Hoarding may qualify as self-neglect and also pose a safeguarding risk to others, for example family or carers. The statutory guidance states "this covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. It should be noted that self-neglect may not prompt a section 42 enquiry. An assessment should be made on a case-by-case basis. A decision on whether a response is required under safeguarding will depend on the adult's ability to protect themselves by controlling their own behaviour. A decision on whether a response is required under safeguarding will depend on the

adult's ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this, without external support.”. For further information regarding this the [SET Safeguarding Adult Guidelines³](#) should be reviewed.

Mental Capacity Act 2005

The Mental Capacity Act 2005 provides a statutory framework for people who lack capacity to make decisions for themselves. The Act has 5 statutory principles which underpin the legal requirements of the Act. Should a capacity assessment be considered, this is an assessment of capacity for whether the client has capacity to access help for their hoarding – so, does the client understand they have a problem with hoarding?; is the client able to weigh up the alternative options? e.g. being able to move around their accommodation unhindered, being able to sleep in their bed, take a bath, cook in their kitchen, sit down on a chair/sofa? (this list is not exhaustive!); can the client retain the information given to them? (e.g., if the accommodation is cleared, you would be able to move around your accommodation etc); can the client communicate their decision? It is essential that any mental capacity assessment is clearly documented on case records. The [Mental Capacity Act guidance⁴](#) should be followed. Please note that this Act does not provide a right of entry.

Section 4: Best Interests: If a person with hoarding behaviour has been assessed as lacking capacity regarding their hoarding, then a best interest decision can be made on their behalf. Depending on the situation, an application may have to be made to the Court of Protection.

Mental Health Act 1983

Section 2: Admission for Assessment

This section would allow a person with hoarding behaviour to be admitted to hospital against their will if:

- They suffer from a mental disorder to the degree which warrants their detention in hospital for a limited period of time for the purposes of assessment; and
- They ought to be detained for their own protection or the protection of others.

There is a strict legal procedure for this and it would only be applicable in extreme circumstances. Please note there is a power of entry by the police on grant of a warrant. The warrant is only granted if an Approved Mental Health Professional (AMHP) presents the Magistrate with the relevant information. It is at this point that the warrant can be issued and Police can enter with the AMHP.

³ <https://www.essexsab.org.uk/professionals/guidance-policies-protocols/>

⁴ <https://www.essexsab.org.uk/professionals/mental-capacity-act-and-deprivation-of-liberty-safeguards/>

Homelessness Reduction Act

Section 175 of the Homelessness Prevention Act 1996 defines that a person is threatened with homelessness if it is likely that they will become homeless within 28 days.

The Homelessness Reduction Act 2017 extends the number of days from 28 to 56. In addition, people who have received a valid notice under section 21 of the Housing Act 1988 and the expiry date is within 56 days, will be treated as being threatened with homelessness duty on English LAs to ensure that advice and information about homelessness, and preventing homelessness, is available free of charge to everyone in their district.

Under the 2017 Act, LAs would be required to provide or secure the provision of free services to give people in their area information and advice on:

- preventing homelessness
- securing accommodation if homeless
- the rights of people who are homeless or threatened with homelessness, and
- any help that is available for people who are homeless or likely to become homeless as well as how to access that help.

Housing Act 2004 - gives local authorities duties and powers to inspect housing and enforce repair and enforcement works where a significant hazard exists. Whilst this legislation applies to all tenures, it is usually applied to rented properties where a landlord fails to carry out essential repairs and in doing so, puts the tenants health and safety at risk.

Anti-Social Behaviour, Crime & Policing Act 2014 - powers to control hoarding where it is likely to have a detrimental effect on the quality of life to others in the locality. 'Environmental' ASB - Community Protection Notices are aimed at tackling littering, dog fouling, noise etc and can be issued against individuals and companies. The notices can be issued by more agencies than current measures, including police, local authorities and housing associations (if authorised to do so). Breach can result in fixed penalty notices and will be a criminal offence. A further step would be to issue an ASB injunction.

The following legislation is available to Environmental Health Officers.

Public Health Act 1936

Section 79: Power to require removal of noxious matter by occupier of premises

This is seldom used as there is more appropriate legislation. If it is used it would generally be in respect of outdoor areas. Allows the cost to be recovered.

Section 83: Cleansing of filthy and/or verminous premises

Where any premises is found to be;

- a) In such a filthy or unwholesome condition as to be prejudicial to health; or
- b) verminous (relating to rats, mice other pests including insects, their eggs and larvae),

Then the LA can serve a notice requiring clearance of materials and objects that are filthy, cleansing of surfaces, carpets etc. within a specified time period. This is generally a minimum of 21 days. If not complied with, Environmental Health (EH) can carry out works in default and recover the costs. Appeal provisions are in place.

Section 84: Cleansing or destruction of filthy or verminous articles

Any article that is so filthy as to need cleansing or destruction in order to prevent injury to persons in the premises or is verminous. The LA can serve notice requiring the identified article to be cleansed, purified, disinfected or destroyed at their expense. This section is also seldom used, if it were to be used it would be in conjunction with action taken under section 83.

Prevention of Damage by Pests Act 1949

Section 4: Power of LA to require action to prevent or treat rats and mice

Notice may be served on the owner or occupier of land/ premises where rats and/or mice are or may be present due to the conditions at the time. The notice served on the owner or occupier would specify a reasonable period of time in which to carry out reasonable steps to eradicate the rats/mice from the land/premises. This could entail pest control treatment, requirement to remove materials that may feed or harbour them and carry out necessary structural works. The LA may carry out works in default if the Notice is not complied with and charge for this. However, there is no power of entry available under this section, so if refused access to carry out works in default the LA are unable to enter.

Environmental Protection Act 1990

Section 79: Statutory nuisances and inspections therefor.

Statutory Nuisances (SN) are defined in Section 79 of the Act and include the following:

- (a) any premises in such a state as to be prejudicial to health or a nuisance
- (c) fumes or gases emitted from [private dwellings] premises so as to be prejudicial to health or a nuisance
- (e) any accumulation or deposit which is prejudicial to health or a nuisance
- (f) any animal kept in such a place or manner as to be prejudicial to health or a nuisance.

It is the duty of every local authority to cause its area to be inspected from time to time to detect any statutory nuisances which ought to be dealt with under section 80 and, where a complaint of a statutory nuisance is made to it by a person living within its area, to take such steps as are reasonably practicable to investigate the complaint. 'Nuisance' means something which interferes with another's land (or more rarely the population at large).

Section 80: Summary proceedings for statutory nuisances.

Where a local authority is satisfied that a statutory nuisance exists, or is likely to occur or recur, in the area of the authority, the local authority shall serve a notice (“an abatement notice”) imposing all or any of the following requirements -

(a) requiring the abatement of the nuisance or prohibiting or restricting its occurrence or recurrence;

(b) requiring the execution of such works, and the taking of such other steps, as may be necessary for any of those purposes;

and the notice shall specify the time or times within which the requirements of the notice are to be complied with. Appeal provisions are in place. Environmental Health (EH) can also carry out works in default and recharge the costs.

10. Fire safety

Hoarding may pose a significant fire risk to both the people living in the hoarded property and those living nearby. Where a hoarded property is identified regardless of the risk rating, adults need to be advised of the increased fire risk and identify a safe exit route. Appropriate professional fire safety advice must be sought and a fire safety visit requested. Following organisational policies (GDPR, confidentiality, etc) information should be shared with appropriate emergency services by alerting them to hoarded properties. This will allow crews to respond appropriately. Once properties are cleared the information must be updated. A fire safety check undertaken by [Essex County Fire and Rescue Service](#)⁵ may be appropriate.

11. Early work

Early work means getting involved early or as soon as possible to tackle any emerging issues by providing the right support at the right time. In most cases, this is achieved by services working together and may take the form of a multi-agency meeting involving the individual. Where appropriate seek support from the local housing department who can give advice on homelessness.

12. Information sharing

Practitioners must always seek the consent of the adult at the heart of the concern before taking action or sharing information. However, there may be circumstances when consent cannot be obtained because the adult lacks the capacity to give it but the best interests of the individual or others at risk of harm demand action. In these cases [Mental Capacity Act guidance](#)⁶ should be followed.

In some cases, where an adult refuses consent, information can still lawfully be shared if it is in the public interest to do so. This may include protecting someone

⁵ http://www.essex-fire.gov.uk/Home_fire_safety/?_sm_au=iVVZtfNH50KZQrFP

⁶ <http://www.essexsab.org.uk/professionals/mental-capacity-act-and-deprivation-of-liberty-safeguards/>

from serious harm or preventing crime and disorder. The key factors in deciding whether or not to share confidential information are:

- Necessity** –sharing is likely to make an effective contribution to preventing the risk,
- Proportionality** –the public interest in sharing outweighs the interest in maintaining confidentiality.

If there is any doubt about whether to share information, advice should be obtained from your organisations safeguarding lead. For more information see Wider Eastern Information Stakeholder Forum (WEISF) [information sharing protocols](https://weisf.essex.gov.uk/information-sharing-protocols/)⁷ and General Data Protection Regulations (GDPR).

13. The referral process (see flowchart)

Hoarding is a complex condition and requires a multiagency response. Any professional working with an individual who may have or appear to have a hoarding condition should ensure they complete the [Practitioners Hoarding Assessment](#) and use the [Clutter Image Rating](#) to inform decision making. Organisations should gather as much information as they can prior to making any referral. Where the hoarding behaviour of the adult places a child at risk of harm then this information should be shared with Children's Social Care in the area as appropriate (see below).

a) Safeguarding children - Safeguarding children is everybody's business and refers to protecting children from maltreatment, preventing the impairment of their health or development and ensuring that they are growing up in circumstances consistent with the provision of safe and effective care. Growing up in a hoarded property can put a child at risk of harm by affecting their physical and emotional development and in some cases, leading to the neglect of a child. Where a child is residing in a property with a parent/carer who hoards, the interests of the child are paramount; where there are concerns that the child is at risk of harm the child must be referred to Children's Social Care; GP's, Health Visitors and Teachers are a few examples of professionals who are most likely to come into contact with a child growing up in a hoarded house. The needs of the child at risk must come first and any actions we take reflect this. See the [Southend, Essex & Thurrock Safeguarding Children's Guidelines](#)⁸ for further guidance. The Local Safeguarding Children Boards in Southend, Essex and Thurrock also provide information regarding accessing Early Help and Intervention for children and young people (see appendix 7).

b) Safeguarding adults - Incidents that are low risk may be managed outside of safeguarding adults formal procedures and could potentially be addressed through mechanisms such as engagement with the adult, i.e. supporting the person to address their concerns; engagement with community activities; coordinating a multi-agency meeting; or access to health care and counselling. It is recognised that not

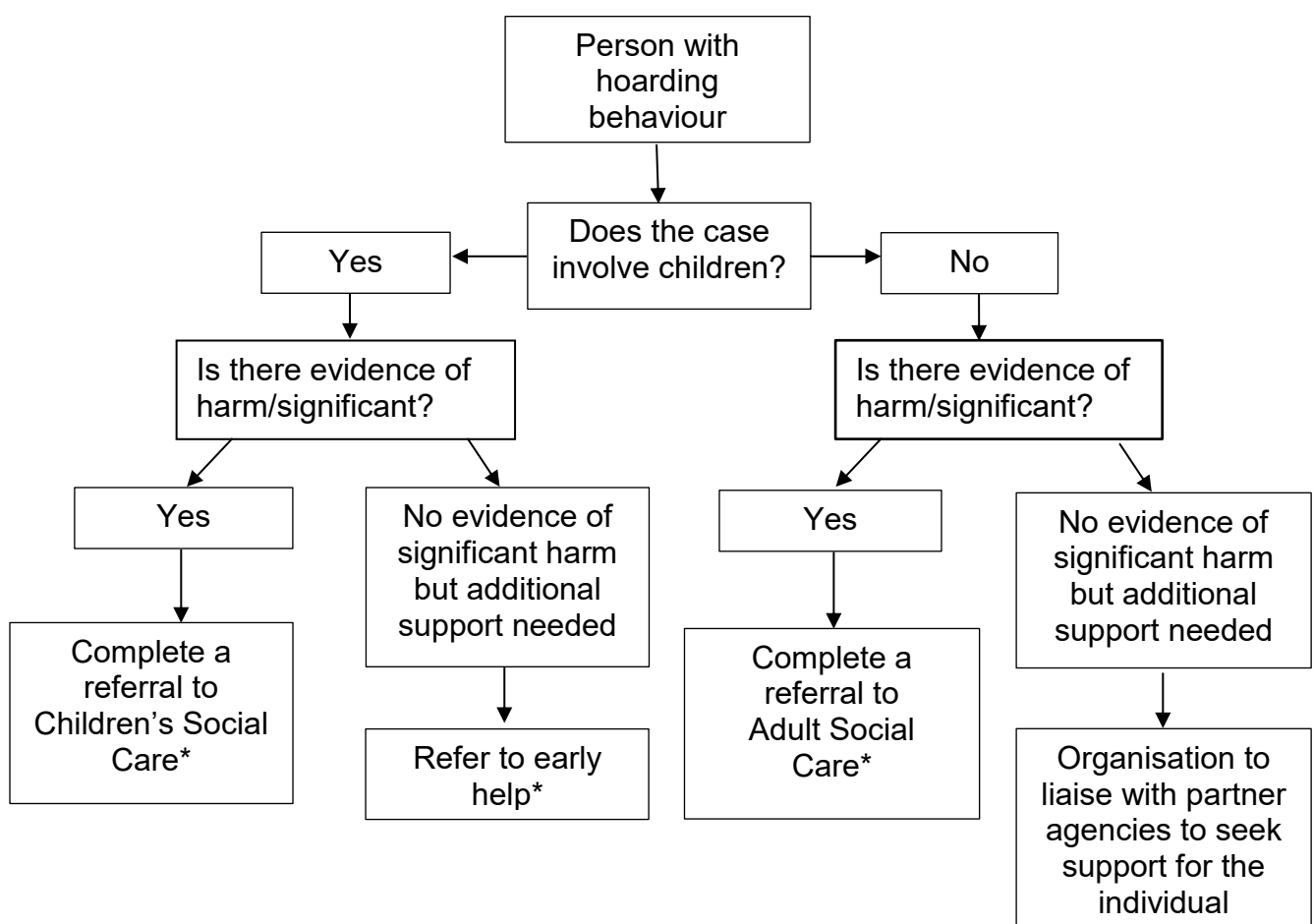
⁷ <https://weisf.essex.gov.uk/information-sharing-protocols/>

⁸ <http://www.escb.co.uk/working-with-children/policies-and-guidance/>

all individuals that hoard will have care and support needs and an assessment may result in a more appropriate pathway being followed to support the adult, instead of the safeguarding process. Where the risk to the safety and wellbeing of an adult or others are becoming more critical, a more formal safeguarding adults approach will be required and a SET SAF should be raised (see [SET Safeguarding Adult Guidelines⁹](#)). The Care and Support statutory guidance identified that not all cases of self-neglect need to go to a S42 enquiry – perhaps the situation is not impacting on the person’s wellbeing, does not impact on others, or is not a result of abuse or neglect.

- c) **Animals** - Evidence of animal hoarding at any level should be reported to the RSPCA.

Referral Process Flowchart



*See Appendix 7 for contact details

⁹ <http://www.essexsab.org.uk/professionals/guidance-policies-protocols/>

14. Multi-agency approach

A coordinated response with a person-centred approach will lead to improved outcomes. The Lead Coordinating Agency will be the agency best placed to coordinate the process. This could be for example the Local Authority, Fire Service, Housing, Mental Health Services or Environmental Health. When considering which agency is the best to coordinate the process the following should be considered;

- The agency concerned is already involved with the individual
- That agency has a duty of care to that individual because of their needs
- They hold the majority of information relating to the individual
- The individual engages well with that organisation
- The individuals' main needs relate to the service provided by the Agency
- The degree and immediacy of risk to the individual and/or the wider community.

Some areas of the county (i.e. Thurrock, Southend) have Hoarding Panels to provide support.

15. Multi-agency meetings

A multi-agency meeting may provide an opportunity for increased collaboration, shared decision making and provide a more innovative approach to engaging with the Adult, increasing feelings of support. The professionals involved should have a lead that is aware of their legal responsibilities and duties and comes fully prepared with all information that will be needed to develop a coherent and fully coordinated response. The purpose of the meeting is to:

- To review individuals views and wishes
- Develop an Action Plan
- Discuss and reassess risk
- Coordinate information sharing
- To discuss timescales and further reviews.

The meeting should include:

- Updating the support plan and risk assessment
- Actions – including contingency plans should the Adult refuse the support plan decided at the meeting
- Monitoring and review arrangements
- How communication is maintained with the Adult and who will take responsibility to liaise with the person and advocate (if necessary) in order that they understand what support plan is in place and what will happen if there is a continued refusal to engage.

Appendix 1 - Practitioners hoarding assessment

Date:

Assessment Number:

Resident			
Name:			
Address:			
DOB:		Age:	
Telephone:			
Household Members including Children under 18 or anyone other person with care and support needs:			
Pets / Animals:			
Other Agencies Involved:			

Property Details													
Owner / Occupier:													
Landlord:													
Contact Details:													
		Sheltered Accommodation ☐		Bed Sit ☐		Flat ☐		Maisonette ☐		Bungalow ☐		House ☐	
On what floor is the front door:						How many steps to the front door:							
On what floor is the bathroom:						How many steps inside the property:							
On what floor is the W.C:						How many rooms in the property:							

Description of Hoarding Problem (Presence of human or animal waste, rodents or insects, rotting food; combustibles, blocked exits etc)

Clutter Rating Index-Support Overview								
1 ☐	2 ☐	3 ☐	4 ☐	5 ☐	6 ☐	7 ☐	8 ☐	9 ☐
Room:								
1 ☐	2 ☐	3 ☐	4 ☐	5 ☐	6 ☐	7 ☐	8 ☐	9 ☐
Room:								
1 ☐	2 ☐	3 ☐	4 ☐	5 ☐	6 ☐	7 ☐	8 ☐	9 ☐
Room:								
1 ☐	2 ☐	3 ☐	4 ☐	5 ☐	6 ☐	7 ☐	8 ☐	9 ☐
Room:								

Clutter Rating Index-Person's Overview								
1 ☐	2 ☐	3 ☐	4 ☐	5 ☐	6 ☐	7 ☐	8 ☐	9 ☐
Room:								
1 ☐	2 ☐	3 ☐	4 ☐	5 ☐	6 ☐	7 ☐	8 ☐	9 ☐
Room:								
1 ☐	2 ☐	3 ☐	4 ☐	5 ☐	6 ☐	7 ☐	8 ☐	9 ☐
Room:								
1 ☐	2 ☐	3 ☐	4 ☐	5 ☐	6 ☐	7 ☐	8 ☐	9 ☐
Room:								

Condition of the Dwelling (to be completed at the property)

Please indicate whether the following appliances/utilities are in working order

	Yes	No	Unknown		Yes	No	Unknown
Stove/Oven	☐	☐	☐	Fridge/Freezer	☐	☐	☐
Kitchen Sink	☐	☐	☐	Bathroom Sink	☐	☐	☐
Washer/Dryer	☐	☐	☐	Toilet	☐	☐	☐
Electricity	☐	☐	☐	Water Heater	☐	☐	☐
Boiler/Heat	☐	☐	☐	Shower/Bath	☐	☐	☐

Please indicate the extent of each of the following problematic living conditions

	None	Mild	Moderate	Severe
Structural damage to house	☐	☐	☐	☐
Rotten food in house	☐	☐	☐	☐
Insect or rodent infestation in house	☐	☐	☐	☐
Large number of animals in house	☐	☐	☐	☐
Animal waste in house	☐	☐	☐	☐
Clutter outside of the house	☐	☐	☐	☐
Cleanliness of the house	☐	☐	☐	☐
Other (e.g. human faeces)	☐	☐	☐	☐

Please indicate the extent to which each of the following safety problems exist

	Not at all	Somewhat	Very much	Description
Does any part of the house pose a fire hazard? (e.g. unsafe electrical cords, flammable object next to heat sources like boiler, radiator, stove).	☐	☐	☐	
How difficult would it be for emergency personnel to move equipment through the home?	☐	☐	☐	
Are the exits from the home blocked?	☐	☐	☐	
Are any of your stairwells unsafe?	☐	☐	☐	
Is there a danger of falling due to the clutter?	☐	☐	☐	

Please indicate the extent to which clutter interferes with the ability of the client to do each of the following activities.

	N/A	Can Do	Can Do with Difficulty	Unable to Do	Comments
Prepare food (cut up food, cook, it)	☐	☐	☐	☐	
Use refrigerator	☐	☐	☐	☐	
Use stove	☐	☐	☐	☐	
Use kitchen sink	☐	☐	☐	☐	
Eat at table	☐	☐	☐	☐	
Move around inside the house	☐	☐	☐	☐	
Exit home quickly	☐	☐	☐	☐	
Use toilet (getting to the toilet)	☐	☐	☐	☐	
Use bath/shower	☐	☐	☐	☐	
Use bathroom sink	☐	☐	☐	☐	
Answer door quickly	☐	☐	☐	☐	
Sit in your sofas and chairs	☐	☐	☐	☐	
Sleep in your bed	☐	☐	☐	☐	
Clean the house	☐	☐	☐	☐	
Do laundry	☐	☐	☐	☐	
Find important things (e.g. bills)	☐	☐	☐	☐	
Care for animals	☐	☐	☐	☐	

Client Assessment (to include e.g. mental health issues; dementia; substance misuse; disability issues / equipment; mental capacity)

Family (including care and parenting) / Social Support / Network

Financial Situation / Ability / Willingness to pay for Services

Hoarding Interview (Questions to ask the client)

1) Because of the clutter or number of possessions, how difficult is it for you to use the rooms in your home?

Not at all difficult ☐ Mildly ☐ Moderately ☐ Extremely difficult ☐

2) To what extent do you have difficulty discarding (or recycling, selling, giving away) ordinary things that other people would get rid of?

No difficulty ☐ Mild ☐ Moderate ☐ Extreme difficult ☐

3) To what extent do you currently have a problem with collecting free things or buying more things than you need or can use or can afford?

No problem ☐ Mild problem ☐ Moderate problem ☐ Severe problem ☐

4) To what extent do you experience emotional distress because of clutter, difficulty discarding or problems with buying or acquiring things?

No distress ☐ Mild distress ☐ Moderate distress ☐ Severe distress ☐

5) To what extent does the clutter, problems discarding, or problems with buying or acquiring things impair or interfere with your life (daily routine, job/school, social activities, family activities, financial difficulties)?

Not at all ☐ Mildly ☐ Moderately ☐ Severely ☐

Summary

Level of risk None ☐ Mild ☐ Moderate ☐ Severe ☐

(Based on assessment of condition of the dwelling)

Level of insight None ☐ Mild ☐ Moderate ☐ Aware ☐

(Level of insight should be determined by comparing responses to the Hoarding Interview to the observed conditions of the dwelling)

Complicating factors (including care and parenting responsibilities)

Recommendations:

Appendix 2 - Clutter image rating tool

Clutter Image Rating Scale - Bedroom

Please select the photo that most accurately reflects the amount of clutter in the room



1



2



3



4



5



6



7



8



9

Clutter Image Rating Scale - Lounge

Please select the photo that most accurately reflects the amount of clutter in the room



1



2



3



4



5



6



7



8



9

Clutter Image Rating Scale – Kitchen

Please select the photo that most accurately reflects the amount of clutter in the room



1



2



3



4



5



6



7



8



9

Appendix 3 - Questions for practitioners

Listed below are examples of questions to ask where you are concerned about someone's safety, where you suspect a risk of self-neglect and hoarding.

Note – 'you' means 'you and other occupants including children'

- How do you get in and out of your property, do you feel safe living here?
- Have you ever had an accident, slipped, tripped up or fallen? How did it happen?
- How do you move safely around your home? (where the floor is uneven or covered, or there are exposed wires, damp, rot, or other hazards)
- Has a fire ever started by accident?
- Do you have hot water, lighting, heating? How do you get hot water, lighting, heating in here? Do these services work properly? Have they ever been tested?
- Do you ever use candles or an open flame to heat and light here or cook with camping gas?
- How do you manage to keep yourself warm? Especially in winter?
- When did you last go out in your garden? Do you feel safe to go out there?
- Are you worried about other people getting in to your garden to try and break-in? Has this ever happened?
- Are you worried about mice, rats or foxes, or other pests? Do you leave food out for them?
- Have you ever seen mice or rats in your home? Have they eaten any of your food? Or got upstairs and be nesting anywhere?
- Can you prepare food, cook and wash up in your kitchen?
- Do you use your fridge? Can I have look in it? How do you keep things cold in the hot weather?
- How do you keep yourself clean? Can I see your bathroom? Are you able to use your bathroom and use the toilet ok? Have a wash, bath? Shower?
- Can you show me where you sleep and let me see your upstairs rooms? Are the stairs safe to walk up? (if there are any)
- What do you do with your dirty washing?
- Where do you sleep? Are you able to change your bed linen regularly? When did you last change them? Have you got extra covers to put on your bed if you are cold?
- Are there any broken windows in your home? Any repairs that need to be done?
- Because of the number of possessions you have, do you find it difficult to use some of your rooms? If so which ones?
- Do you struggle with discarding things or to what extent do you have difficulty discarding (or recycling, selling, giving away) ordinary things that other people would get rid of?

Appendix 4 - Assessment tool guidelines

	Level 1 <i>Clutter image rating 1 - 3</i>	Level 2 <i>Clutter Image Rating 4 – 6</i>	Level 3 <i>Clutter image rating 7 - 9</i>
1. Property structure, services & garden area	• All entrances and exits, stairways, roof space and windows accessible. • Smoke alarms fitted and functional or referrals made to Essex Fire and Rescue service to visit and install. • All services functional and maintained in good working order. • Garden is accessible, tidy and maintained.	• Only major exit is blocked. • Only one of the services is not fully functional. • Concern that services are not well maintained. • Smoke alarms are not installed or not functioning. • Garden is not accessible due to clutter. • Evidence of indoor items stored outside. • Evidence of light structural damage including damp. • Interior doors missing or blocked open.	• Limited access to the property due to extreme clutter. • Evidence may be seen of extreme clutter seen through windows. • Evidence may be seen of extreme clutter outside the property. • Garden not accessible and extensively overgrown. • Services not connected or not functioning properly. • Smoke alarms not fitted or not functioning. • Property lacks ventilation due to clutter. • Evidence of structural damage or outstanding repairs including damp. • Interior doors missing or blocked open. • Evidence of indoor items stored outside.
2. Household functions	• No excessive clutter, all rooms can be safely used for their intended purpose. • No additional unused household appliances appear in unusual locations around the property. • Property is maintained within terms of any lease or tenancy agreements where appropriate. • Property is not at risk of action by environmental health.	• Clutter is causing congestion in the living spaces and is impacting on the use of the rooms for their intended purpose. • Clutter is causing congestion between the rooms and entrances. • Inconsistent levels of housekeeping throughout the property. • Some household appliances are not functioning properly and there may be additional units in unusual places.	• Clutter is obstructing the living spaces and is preventing the use of the rooms for their intended purpose. • Rooms not used for intended purposes or very limited. • Beds inaccessible or unusable due to clutter or infestation. • Entrances, hallways and stairs blocked or difficult to pass.

		• Property is not maintained within terms of lease or tenancy agreement where applicable. • Evidence of outdoor items being stored inside.	• No gas, electric or water is working at the property. • Toilets, sinks not functioning or not in use. • Adult at risk due to living environment. • Household appliances are not functioning or inaccessible. • Adult has no safe cooking environment. • Adult is using candles. • Evidence of outdoor clutter being stored indoors. • No evidence of housekeeping being undertaken. • Broken household items not discarded e.g. broken glass or plates. • Concern for declining mental health. • Property is not maintained within terms of lease or tenancy agreement where applicable. • Property is at risk of notice being served by Environmental Health.
3. Health and safety	• Property is clean with no odours, (pet or other). • No rotting food. • No concerning use of candles. • No concern over flies. • Adult is managing personal care. • No writing on the walls. • Quantities of medication are within appropriate limits, in date and stored appropriately.	• Kitchen and bathroom are not kept clean. • Offensive odour in the property. • Adult is not maintaining safe cooking environment. • Some concern with the quantity of medication, or its storage or expiry dates. • No rotting food. • No concerning use of candles. • Adult trying to manage personal care but struggling. • No writing on the walls.	• Human urine and or excrement may be present. • Excessive odour in the property, may also be evident from the outside. • Rotting food may be present. • Evidence may be seen of unclean, unused and or buried plates & dishes. • Broken household items not discarded e.g. broken glass or plates. • Inappropriate quantities or storage of medication. • Pungent odour can be smelt inside the property and possibly from outside. • Concern with the integrity of the electrics. • Inappropriate use of electrical extension cords or evidence of unqualified work to the electrics. • Concern for declining mental health.

			• Concern of increasing self-neglect, resulting in deteriorating physical health, eg. Pressure ulcer development, uncontrolled Diabetes etc
4.Safeguarding children, adults & family members	• No Concerns	• Hoarding on clutter scale 4 -7 doesn't automatically constitute a safeguarding alert. • Please note all additional concerns for householders. • Properties with children, young people or adult is with additional support needs may trigger a safeguarding alert under a different risk.	• Hoarding on clutter scale 7-9 constitutes a safeguarding alert regarding the adult (see SET safeguarding adult guidelines appendix 8) and a Safeguarding Referral for children and young people where appropriate. • Please note all additional concerns for other family members.
5. Animals and pests	• Any pets at the property are well cared for. • No pests or infestations at the property. • No concern for the amount of pets at the property	• Pets at the property are not well cared for. • Adult is not unable to control the animals. • Animal's living area is not maintained and smells. • Animals appear to be under nourished or over fed. • Any evidence of mice, rats at the property. • Spider webs in house. • Light insect infestation (bed bugs, lice, fleas, cockroaches, ants, etc). • Are animals cared for in preference to other household members?	• Animals at the property at risk due the level of clutter in the property. • Adult may not able to control the animals at the property. • Animal's living area is not maintained and smells. • Animals appear to be under nourished or over fed. • Hoarding of animals at the property. • Heavy insect infestation (bed bugs, lice, fleas, cockroaches, ants, silverfish, etc.). • Visible rodent infestation.

Appendix 5 - Agency actions roles and responsibilities

	Level 1	Level 2	Level 3
Referring Agency	• Discuss concerns with adult. • Raise a request to the Fire Service to provide fire safety advice. • Refer for support assessment if appropriate. • Refer to GP if appropriate.	Possible referrals to • Landlord if adult is a tenant. • Raise a request to the Fire Service to provide fire safety advice • Support assessment. • GP. • Debt advice. • RSPCA/ animal welfare. • Environmental health. Ensure information sharing with all agencies involved to ensure a collaborative approach and a sustainable resolution.	• Contact police and social care to request a welfare check where children or adults are at risk of harm • Raise Safeguarding Alert within 24 hours • Raise a request to Essex Fire and Rescue Service within 24 hours to provide fire prevention advice. • Attend safeguarding multi agency meetings on request
Environmental health	• No action.	• At time of inspection, environmental health officer decides on appropriate course of action. • Consider serving notices under Environmental Protection Act 1990, Prevention of Damage By Pests Act 1949 or Housing Act 2004 Consider Works in Default if notices not complied by occupier.	• At time of inspection, Environmental Health Officer (EHO) decides on appropriate course of action. • Consider serving notices under Environmental Protection Act 1990, Prevention of Damage by Pests Act 1949 or Housing Act 2004. • Consider works in Default if notices not complied by occupier. • Attend safeguarding multi agency meetings on request.
Social landlords	• Provide details on debt advice if appropriate to circumstances. • Refer to GP if appropriate. • Refer for support assessment if appropriate. • Provide details of support streams open to the adult via charities and self-help groups.	• Visit adult to inspect the property & assess support needs. • Referral to your local housing support assist in the restoration of services to the property where appropriate. • Ensure adults are maintaining all tenancy conditions.	• Visit adult to inspect the property & assess support needs. • Attend multi agency Safeguarding meeting. • Enforce tenancy conditions relating to adults responsibilities.

	• Provide details on debt advice if appropriate to circumstances. • Ensure adults are maintaining all tenancy conditions.	• Enforce tenancy conditions relating to adults responsibilities. • Ensure information sharing with all agencies involved to ensure a collaborative approach and a sustainable resolution.	• If adult refuses to engage serve Notice of Seeking Possession under Ground 13 to Schedule 2 of the Housing Act 1988.
Emergency services	• Ensure information is shared with statutory agencies & feedback is provided to referring agency on completion of home visits.	• Ensure information sharing with all agencies involved to ensure a collaborative approach and a sustainable resolution. • Provide feedback to referring agency on completion of home visits.	• Attend safeguarding multi agency meetings on request. • Ensure information sharing with all agencies involved to ensure a collaborative approach and a sustainable resolution. • Provide feedback to referring agency on completion of home visits.
Safeguarding children and young people	• No action unless any other risk of harm is identified	• Consider completion of a CAF or Early Help Assessment to access early help or intervention services (see appendix 7)	• Safeguarding referral should be made following the SET Child Protection Procedures (see appendix 7).
RSPCA/ Animal welfare	• No action unless advice requested.	• Visit property to undertake a wellbeing check on animals at the property. • Educate adult regarding animal welfare if appropriate • Provide advice / assistance with re-homing animals	• Visit property to undertake a wellbeing check on animals at the property. • Remove animals to a safe environment. • Educate adult regarding animal welfare if appropriate. • Take legal action for animal cruelty if appropriate. • Provide advice/assistance with re-homing animals. • Attend safeguarding multi agency meetings on request.
Safeguarding adults	• No action unless other concerns of abuse are noted.	• No action unless other concerns of abuse are noted. • If other concerns of abuse are of concern or have been reported, progression to safeguarding referral and investigation may be necessary (see appendix 7).	• Safeguarding alert should be made using the SETSAF form and following procedures set out in the SET Safeguarding Adult Guidelines (see appendix 8).

Appendix 6 – Hoarding Risk Assessment and Management Plan

Name of adult	
LA/NHS number	

Where significant risk has been identified, this form should be attached to full assessments and care plans (in accordance with guidance on sharing of information and confidentiality). Because this form is likely to contain sensitive information or information from third parties it must not be shared with the adult without prior agreement of those third parties and the team manager unless it has been completed with the adult. For Mental Health service users, use the Child Protection Assessment/Risk Assessment documentation provided by the NHS Trust.

Categories of Risk Identified: *Please tick all appropriate categories*

Category	Yes/No	Category	Yes/No
Aggression / Violence		Self-harm	
Exploitation (of others)		Self-neglect	
Risk to children (refer to Child Protection Policy)		Adult (refer to Safeguarding Adults Policy)	
Carer breakdown		Homelessness	
Extreme social isolation		Other (<i>please specify</i>)	

If Yes to any of the above, continue Risk Assessment:

Current factors which suggest there is apparent risk; on what is this assessment based (e.g. history; report from adult, carer or others); Severity of risk (low; medium, high, emergency); Consider alcohol or drug misuse; Threats to harm self or others; Reports of actual harm towards self or others in the past; Possible symptoms of mental illness such as excessively suspicious or paranoid ideas; Unexplained anger or other emotional or behavioural disturbance; Criminal record or self-reported forensic history; Is there a history of unpredictable or impulsive acts?; If violence is indicated have weapons been used?; If aggression is this verbal?; Has there been a damage to property?; Is there any evidence of racist abuse - is adult the person alleged to have caused harm or a victim?

Who is at risk - has any particular individual been identified or is the adult the only person at risk?
How immediate is the risk - is it part of an ongoing pattern / a "one off" past event / a current risk?
Are there any "early warning" signs or "triggers" to risk? Is there a predictable pattern or any factors that are known to increase / reduce risk - please provide details.
Are there any special safety factors that others working with the adult should be aware of (e.g. should they only be visited in pairs or not seen alone in the office or referred to another specialist service).

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Outcome			
Risk Management Plan required?	Yes ☐	No ☐	Review Date _____
If "No" – Signature of Assessor			Date _____
Agreed by Manager			Date _____

Risk Management - To be completed in all situations where a significant risk has been identified.

Action plan to reduce/ minimise the risk and who will be responsible for maintaining the plan
Contingency Plan - what action should be taken if the Action Plan breaks down?
Emergency Plan- What action should be taken in a crisis situation, with particular reference to out-of-hours responses

Assessors Signature: _____	Date: _____
Agreed by Manager: _____	Date: _____
Review Date: _____	

Risk History - CONFIDENTIAL

Record of incidents of risk behaviours including violence or aggression or episodes of self-harm or known criminal activity. State whether actual or threatened, in date order. New episodes must be recorded.

Date of Incident	Record of Incident - Give as full an account as is possible, including source of information, Whether this has been verified and outcome of incident.	Assessors Signature + date	Managers Signature + date

Appendix 7 - Useful Contacts

Southend Safeguarding Service (adults and children)	Tel: 01702 215008 Email: accessteam@southend.gov.uk
Essex – Adult Operations	Tel: 0345 603 7630 Email: Socialcaredirect@essex.gov.uk
Essex – Children and Families Hub	If you are concerned that a child or young person is being harmed or neglected or is at risk of this you should go to Report a concern about a child: Report a concern about a child - Essex County Council . Tel: 0345 603 7627 Out of Hours: 0345 606 1212
Thurrock Safeguarding Adults Team	Tel: 01375 511000 Email: Thurrock.First@thurrock.gov.uk Out of hours: 01375 372468
Thurrock MASH (childrens)	Tel: 01375 652802 Out of hours: 01375 372468 Address: Civic Offices, New Road, Grays, RM17 6SL
EPUT	Tel: 0300 123 0808
Essex County Fire and Rescue	Website: http://www.essex-fire.gov.uk/Home_Fire_Safety/
HoardingUK	Website: www.hoardinguk.org
The Association of Professional De- clutterers & Organisers (UK)	Website: www.apdo-uk.co.uk/about.php
Help for Person with hoarding behaviours	Website: www.helpforhoarders.co.uk