



# Northamptonshire Hoarding Framework

Endorsed by Northamptonshire Safeguarding Adults Board

Northamptonshire   
*Safeguarding Adults Board*

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## 1 Introduction

This framework seeks to embed an integrated, coordinated approach to reducing the impact of hoarding on individuals, their families and the local community.

The development of this work has been informed by:

- The National Fire Chiefs Council (NFCC) Hoarding Working Group
- A Northamptonshire Health and Wellbeing Board (HWBB) Development Workshop
- Practitioners Workshop – Developing a Hoarding Framework
- The Northamptonshire Safeguarding Adults Board (NSAB) - Self Neglect Practice Guidance

The Framework aims to:

- Improve understanding of hoarding across organisations
- Improve understanding of the role that different agencies can play to reduce the health, safety and wellbeing risks associated with hoarding
- Improve the way organisations work and communicate with people who hoard
- Help organisations to work together, share intelligence and good practice
- Improve the way agencies report and record data about hoarding
- Learn from incidents and safeguarding concerns that arise in hoarded homes

**In order for the Framework to meet its aims, common principles have been established across partner agencies. Together we will work to:**

- Create a safer and healthier environment for the individual and others affected by the hoarding behaviour, e.g. family, neighbours
- Develop a multi-agency pathway which will maximise the use of existing services and resources, which may reduce the need for statutory services, and enforcement action
- Ensure a “*person-centred approach*” when working to improve health, safety and wellbeing tailored to meet the needs of an individual
- Develop creative ways of engaging individuals
- Provide options for:
  - Professional support including from mental health services
  - Property repairs and improving the safety of the property
  - Home Safety Visits that consider all risks including fire
  - Permanent or temporary re-housing
  - Monitoring and motivation
- Review and improve knowledge of best practice and legislation that relates to hoarding behaviour through the Hoarding Working Group.

This framework can be used by front line staff within housing, environmental health, community safety, health and social care and emergency services.

There is an expectation that everyone using the framework will engage fully in partnership working to achieve the best outcome for an occupier, while meeting the requirements and duties of individual agencies.

## 2 Understanding Hoarding

### 2.1 Definition of hoarding

A hoarding disorder is where someone acquires an excessive number of items and stores them in a chaotic manner, usually resulting in unmanageable amounts of clutter. The items can be of little or no monetary value. Hoarding can cause problems if:

- The amount of clutter interferes with everyday living
- The clutter is causing significant distress or negatively affecting the quality of life **NHS England**

Hoarding is the excessive acquisition of an inability to discard a large number of possessions resulting in extensive clutter. Hoarding impedes the use of living spaces being used for their designated purpose, negatively impacting upon the life of the person and that of their family. **Frost and Gross, 1993**

A person with a hoarding disorder experiences distress at the thought of getting rid of the items, leading to excessive accumulation of items, regardless of actual value. The main difference between a hoarder and a collector is that people who hoard have strong emotional attachments to their objects which are in excess of their real value.

It is estimated that between 2 - 5% of the population hoard. This equates to over 14000 homes in Northamptonshire. It is estimated that only 5% of hoarders come to the attention of statutory agencies.

Hoarding does not discriminate or favour a particular gender, age, ethnicity, socio-economic status, educational/occupational history or tenure type. Typically, though hoarding becomes more apparent in later life when adults have lived independently and accumulation has happened over a number of years.

Hoarding does not only occur within a home, but can spill out into other buildings, the outside space and communal areas.

### 2.2 Types of hoarding

Individuals can hoard a range of items, those commonly found include:

- I. Inanimate objects, such as clothes, newspapers, magazines, food, containers, bills, receipts and other papers, electrical items, collectable items such as toys, DVDs and CDs. Accumulations can relate to one type of object or a mixture.
- II. Animal hoarding: This is often accompanied with the inability to provide minimal standards of care. The hoarder is unable to recognise that the animals are at risk because they feel they are saving them. The homes of animal hoarders are often eventually destroyed by the accumulation of animal faeces and urine and infestation by parasites and insects.
- III. Data Hoarding: A relatively new phenomenon, this could present with the storage of data collection equipment such as computers, electronic storage devices or paper, an example may be the need to store copies of emails.

The OCD-UK 2013 (Obsessive Compulsive Disorder) identifies 3 factors which give an insight into how an individual may feel about accumulated items:

- Prevention of harm – when an individual struggles to throw things away, as they feel/think that bad things may happen if they do
- Deprivation hoarding – when an individual feels as though they may need the things they hoard, or that they are too useful to throw away
- Emotional hoarding – when hoarding becomes emotional, which can occur from trauma and or loss

### 2.3 Some general characteristics of hoarding

- **Fear and anxiety:** compulsive hoarding may start as a learnt behaviour or following a significant event such as bereavement. Buying or saving things relieves the anxiety and fear that is felt. Hoarding effectively becomes a comfort blanket. Attempts to discard items can induce feelings from mild anxiety to a full panic.
- **Long-term behaviour pattern:** can develop and continue over many years or decades, with an inability to throw away items because of fear and anxiety.
- **Excessive attachment to possessions:** people who hoard may hold an inappropriate emotional attachment to items even if they are no longer usable because they are broken or damaged.
- **Indecisiveness:** people who hoard may struggle with the decision to discard items that are no longer necessary, including rubbish and old food containers.
- **Socially isolated:** people who hoard can alienate others to avoid the shame felt when people visit or to avoid difficult conversations about their home. Friends and family can become more distant as they repeatedly raise the issue or try to help by forcing clearance. Home visits from professionals will be refused or put off.
- **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' to the detriment of their own health.
- **Mentally competent:** people who hoard are typically able to make other decisions that are not related to hoarding and so have mental capacity.
- **Extreme clutter:** hoarding behaviour may be in a few or all rooms and prevent them from being used for their intended purpose.
- **Churning:** hoarding behaviour can involve moving items from one part of the property to another, without ever discarding them.
- **Lack of self-care:** unkempt and unhygienic, this can be due to lack of bathroom or washing facilities in their home or because mental health is deteriorating.
- **Functional hoarding:** Some people who hoard will go to great lengths to hide the issue, using public or work facilities in order to maintain their personal hygiene and appearance and to function day to day.
- **Poor insight:** a person who hoards will typically not see/accept their behaviours as impacting on them and others.

### 2.4 Hoarding and mental health

There is more to be done to understand hoarding, partly because those who hoard do not often want to discuss it and are not open to sharing their experiences and feelings with others. From the research that has taken place there are some very clear links between hoarding and mental health. Hoarding behaviours are often a manifestation of mental health issues which means that any intervention has to be understood through this lens. This is where difficulties and misunderstanding can start.

Hoarding disorder used to be considered as a form of OCD but research suggests there are some distinct differences and so Hoarding Disorder is now classed by the World Health Organisation (WHO) as a separate mental disorder in the "[International Statistical Classification of Diseases and Related Health Problems](#) (ICD11) and Diagnostic and Statistical Manual of Mental Disorders" (DSM-5) which is used as a diagnostic tool.

Hoarding or chronic disorganisation is also seen as a symptom of other mental health diagnosis such as depression or OCD and can co-present along with Post-Traumatic Stress Disorder (PTSD), Attention Deficit Hyperactivity Disorder (ADHD) and Autism. It is also often linked to bereavement or other kind of loss.

20-30% of OCD sufferers are hoarders (The Chartered Institute of Environmental Health).

## **2.5 Deterioration and recognising risk**

As hoarding accumulates and a property becomes more cluttered there is a reduction in functional space which can start to impact on daily living. As this progresses occupiers will find it harder to take proper care of themselves and also their home. This self-neglect coupled with isolation and poor insight, results in a natural deterioration of physical and mental health and can result ultimately in serious harm or death.

## **2.6 Risks of hoarding**

As hoarding and self-neglect increases, the condition of the living environment and property condition also deteriorates. This leads to more hazards in the home and increases the likelihood of accidents and emergencies such as falls, electrical faults, water leaks, infestations, infections, fires and collapse of hoarding or building structure.

This means that general vulnerability will also increase. Occupiers can then become targets for criminals and their neglected looking properties can attract further anti-social behaviour and criminal damage.

Because of these varied consequences, the risks of hoarding can affect not just those who hoard but also other people around them. This can include those who need to enter the property such as family, carers and emergency responders but also those who live in attached and neighbouring properties.

Because of this the needs and safety of others becomes a consideration in hoarding cases.

More information about specific risks can be found from [section 4](#).

## **Other implications of hoarding**

Other unseen implications of hoarding can include where a patient in an acute hospital cannot be safely discharged because of the extent of hoarding and property neglect. This places additional pressure on health systems.

Conversely, health practitioners will not always see or be aware of a patient's home environment which can lead to discharge home to a hoarded and unsafe property. This can lead to further health complications or injury.

## **3 Information Sharing**

General sharing information is essential to safeguard adults who may be at risk of abuse or neglect. Almost all safeguarding adult reviews across the country identify that there is a failure to share information between agencies, and is a significant contributory factor when things have gone wrong. The duty to share information can be as important as the duty to protect confidentiality. Workers should therefore have the confidence to share information in the best interests of the people they support, within their own organisational policy guidelines and local protocols.

### **Consent**

Information should always be shared with consent wherever possible; but a person's right to confidentiality is not absolute and may be overridden where there is evidence that sharing information is necessary in the public interest, is required by law, is necessary to protect personal safety, or where there are other legal reasons to do so.

In some instances, the individual will not have the capacity to consent to disclosure of personal information relating to them. Where this is the case any disclosure of information needs to be considered against the conditions set out in the Data Protection Act and must be in their Best Interests in line with the Mental Capacity Act.

### **Information sharing protocols**

Decisions about what information is shared and with whom should be taken on a case-by-case basis. But whether or not information is shared, with or without the adult's consent, the information should be:

- Necessary for the purpose for which is being shared
- Shared only with those who have a need for it
- Accurate and up to date
- Shared in a timely fashion
- Shared accurately
- Shared securely
- Follow this link for more information [NSAB Information Sharing Protocol](#)

## **4 Hoarding and Fire Safety**

The NFCC has pulled together learning from several fatal fire incidents over the last 10 years which involved hoarded homes. It is clear that hoarding increases fire risk for occupiers and others:

- Higher likelihood – electrical safety is poor (wiring, cables and sockets are buried and cannot be checked for damage), clutter around cooking/heating appliances, unusual heating methods because the home environment becomes neglected
- More serious consequences – more intense and fast spreading fire, no clear escape routes, occupier becomes lost in hoarding, hoarding collapses, limited access for rescue personnel
- From case history it is clear that hoarding can adversely affect neighbouring properties as there is an increased risk of fire spread if hoarding is severe or if flammable items such as gas containers are being stored amongst the hoard
- A fire in a hoarded property would pose a risk to firefighters who gained entry and indeed to any first responders attending an emergency within the home

Northamptonshire Fire and Rescue Service (NFRS) is required to be compliant with the Fire Services Act 2004, Regulation 7.2d to make arrangements for obtaining information needed for the purpose of extinguishing fires and protecting life and property in their area.

A multi-agency approach to sharing information about hoarding enables compliance with the Act and also strengthens the operational risk assessment when dealing with incidents and fires where hoarding is present.

Under the Regulatory Reform (Fire Safety) Act 2005 common areas of Houses In Multiple Occupation (HMOs), blocks of flats and bedsits must be kept free from obstruction at all times so that in the event of a fire, the stairwells, hallways etc. are clear to prevent delaying the escape of occupiers and/or the Emergency Services gaining access. Where one dwelling is significantly hoarded there may be an impact on other dwellings which would need to be considered.

NFRS can record where partner agencies are concerned about a hoarded property and record where external observation shows impact on operational risk assessment.

However, NFRS does not have power of entry into a single private dwelling unless in the case of an emergency to preserve life and/or property.

This means that the approach to improving fire safety within someone's home is therefore person centred and can only be done effectively with occupier engagement.

#### 4.1 NFRS working with occupiers and Home Fire Safety Visits (HFSVs)

NFRS can provide fire safety advice to those living in hoarded or cluttered homes. This can be done face to face during a visit within the home, on the doorstep or at another location, by telephone or via a trusted advocate.

Advice will centre on discussing and checking:

- There is a working smoke alarm on each floor as an early warning of a fire
- The occupier is able to communicate and take action in an emergency
- If escape routes are clear enough to be used safely
- That internal doors can be shut to high risk rooms to maximise chance of escape
- The likelihood and consequence of a fire starting close to hoarded items

When there are serious concerns NFRS can help to mitigate fire risks by installing smoke alarms, helping and supporting occupiers to take small steps and to develop action plans to make escape routes clearer.

Where there is a housing provider or landlord NFRS will proactively seek to share information about risks. NFRS will treat hoarding above a level 6 as a safeguarding concern.

This is in line with the NFCC Position Statement which states that fire services will work to:

**Eliminate the hazard:** Work with the homeowner or local landlord to ensure that the homeowner is keeping exits and entrances clear, being able to shut doors and has a good night time routine. Give advice regarding the benefits of clearing items and encouraging use of local referral pathways.

**Reduce the hazard:** Encourage behaviour change and new routines to avoid the hazard of hoarding and storage of clutter (household waste management, Waste collection routine, individual pride).

**Isolate the hazard:** Examine options in terms of removal of items of clutter. This must be done with carer/health professional input to ensure there is no detriment to the mental health of the homeowner.

**Control the hazard:** Remind and prompt landlords and health partners about the fire safety issues. Provide information and follow-up advice via further visits, phone calls, information on websites, partner agency newsletters, campaigns etc. Work with local safeguarding boards to address issues through multi-agency involvement.

**Fire safety equipment:** Provide interventions, or recommend that interventions be provided, which are appropriate to the risk. These may include additional smoke and heat detection in areas where more risk is evident and working with local authority partners to secure a care line link in the event of an emergency.

#### 5 Hoarding and Environmental Health

Hoarding can pose a risk to individual and public health. The Chartered Institute of Environmental Health (2012) notes that Environmental Health has certain powers which can be used in hoarding cases.

The use of enforcement powers is only considered after attempts to engage with the occupier are unsuccessful. Whilst they can be detrimental and traumatic, the power of entry afforded to Environmental Health Officers does enable proper assessment of internal conditions and hazards, particular in a freehold or leasehold property where there is no housing provider.

Use of legislation can often be seen as a way to resolve immediate risk but also as a catalyst for someone to accept the extreme nature of their hoarding and the need for help and support.

## **Public Health Act 1936 sections:**

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

The Local Authority (LA) will always try and work with the individual to identify a solution to a hoarded property, however in cases where the resident is not willing to co-operate the LA can serve notice on the owner or occupier to "remove accumulations of noxious matter". Noxious is usually classified as "harmful and/or unwholesome". No appeal is available. If not complied with in 24 hours, the LA can organise the necessary works in default and recover expenses.

### **Section 83: Cleansing of filthy or verminous premises**

Under this section, any premises including - tent, van, shed, ship or boat has the authority to be cleansed if:

- a. Filthy or unwholesome so as to be prejudicial to health; or
- b. Verminous (rats, mice, other pests including insects, their eggs & larvae)

The LA serves notice requiring clearance of materials and objects that are filthy, cleansing of surfaces, carpets etc., within a reasonable amount of time. If not complied with, Environmental Health can carry out works in default and charge. There is no right to appeal against the notice but an appeal can be made against the cost and reasonableness of the works involved.

### **Section 84: Cleansing or destruction of filthy or verminous articles**

Any item that is so filthy as to need cleansing or destruction to prevent injury to persons in the premises, or is verminous, the LA can serve notice and remove, cleanse, purify, disinfect or destroy any such article at their expense.

### **Section 287 Power of Entry/Warrant**

To gain entry for examination/execution of necessary work (all tenure including Leaseholders/Freeholders). In practice this is used as a last resort unless there is a risk to public health and or a statutory nuisance (Environmental Protection Act 1990). Police attendance is required for forced entry. However, all steps need to be taken to try to gain entry into the premises and a warrant will only be sought after a number of attempts/ and or risk is imminent.

## **Environmental Protection Act 1990**

### **Section 80: Dealing with Statutory Nuisances (SNs)**

SNs are defined in section 79 of the Act and include any act or omission at premises that prevents the normal activities and use of another premises, including the following:

#### **Section 79 (1)**

- (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

The LA serves an Abatement Notice made under section 80 to abate the nuisance if it exists at the time or to prevent its occurrence or recurrence.

## **Prevention of Damage by Pests Act 1949 – (external outdoors only)**

### **Section 4: Power of LA to require action to prevent or treat Rats and Mice**

Notice may be served on owner or occupier of land or premises where there are possibly rats or mice present due to the conditions at the time. The notice may be served on the owner or occupier and provide a reasonable period of time to carry out reasonable works to treat for rats and/or mice, remove materials that may feed or harbour them and carry out structural works.

## **Community Protection Notice (Anti-Social Behaviour, Crime and Policing Act 2014) – (external outdoors only)**

An authorised person may issue a community protection notice to an individual aged 16 or over, or a body, if satisfied on reasonable grounds that:

- (i) The conduct of the individual or body is having a detrimental effect, of a persistent or continuing nature, on the quality of life of those in the locality; and
- (ii) The conduct is unreasonable.

A community protection notice may be issued by a constable, the relevant local authority, or a person designated by the relevant local authority for the purposes of this section. A community protection notice imposes any of the following requirements on the individual or body issued with it:

- a) A requirement to stop doing specified things
- b) A requirement to do specified things
- c) A requirement to take reasonable steps to achieve specified results

They can only be issued if the offender has been given a written warning that the notice will be issued if their conduct doesn't change and that they have been given enough time to have reasonably made those changes, and yet have chosen not to do so. A person issued with a community protection notice who fails to comply with it commits an offence.

## **6 Hoarding Implications - Housing**

### **Housing**

There are serious reputational risks and legal consequences for all housing providers who fail to respond effectively when hoarding issues are identified. For example, the tragic death in 2012 of a resident hoarding in a social housing property resulted in widespread media coverage. The fire crew who attended the scene emphasised the difficulty and danger of conducting a rescue in a property with hoarded items, and the coroner involved wrote to social housing providers about the need to reduce the risks hoarding poses to individuals and statutory services.

Examples of these risks from the housing perspective include gaining access and not being able to carry out gas safety checks and other statutory repairs; disrepair to the property; impacts on the wider community and neighbour complaints; risk of eviction.

There may be times when the individual needs rehousing, for example the property has become uninhabitable or there are serious safeguarding concerns, the housing provider or local housing authority should be able to support this if needed.

### **Private sector housing**

If there is disrepair in a privately rented property, officers from the local housing authority can inspect the property and ensure that the landlord carries out all repairs. This may be difficult; however, if the tenant has filled the property with possessions and the landlord cannot gain proper access to do the work. There is a risk of eviction and potential use of closure orders if officers are concerned about the safety of the home and dwelling.

## **7 Risk of Harm and Abuse - Safeguarding Concerns**

The long term and persistent nature of hoarding means that risks steadily increase leading to concerns about self-neglect and safeguarding. It is essential that frontline professionals working with people who hoard or those who are living in cluttered homes give consideration to the guidance, policies and procedures of the NSAB and the Northamptonshire Safeguarding Children's Partnership in order to ensure that appropriate action is taken.

## 7.1 Safeguarding Children living in Hoarded Homes

Safeguarding Children refers to protecting children under the age of 18, 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.

There is increased risk for any occupiers in cluttered/hoarded properties but in particular children whose health and development can be seriously impacted by the action or inaction of adult occupiers.

Some physical hazards may be obvious but hoarding can have other serious impacts on a child that may worsen over time:

- Social isolation: not being permitted to have friends over or feeling ashamed to invite friends, never having or losing contact with other family members who no longer visit
- Reduced living space: children may have to use one space for multiple uses and purposes, such as sleeping, eating, homework, TV and playing
- Mental health: Anxiety can develop in response to a caregiver's behaviour towards objects and there can be conflict as children become more aware of how different their home may be to those of other children
- Poor Hygiene: as a result of lack of bathroom facilities and caregiver focus on personal routines and housekeeping
- Poor Nourishment: as a result of lack of space for food preparation
- Physical health - asthma, allergies, infections, headache etc. which can be attributed to things such as dust, the age and condition of things that are being hoarded and poor general housekeeping
- Future hoarding behaviours: as a result of learned behaviour

The needs of the child at risk must come first and actions of frontline professionals must reflect this. Where children live in a cluttered or hoarded property the 'Neglect Toolkit' can be used to assist frontline practitioners in identifying and assessing Neglect and taking appropriate action. In many hoarding cases this will result in a referral to the Multi-Agency Safeguarding Hub (MASH) – 0300 1000 126 Option 1. Where possible the "Voice of the Child" should be captured.

Where risks such as fire risks and environmental hazards are observed this should result in immediate contact with the MASH to check if the child is deemed to be at risk of imminent harm. Refer to the [Northamptonshire Safeguarding Children Partnership \(NSCP\) Neglect Toolkit](#)

## 7.2 Safeguarding Adults

Safeguarding adults means protecting an adult's right to live in safety, free from abuse and neglect. An adult at risk is any person who is aged 18 years or over and at risk of abuse or neglect because of their needs for care and support.

The challenge for frontline professionals is to work together to prevent, and stop, both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action.

This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their own personal circumstances.

Living with someone who hoards can pose increased risk of harm to adults at risk. The extent of that risk will depend on levels of hoarding and clutter and whether or not that other person is also the caregiver. Where an adult at risk is reliant on that other person for care and support they may suffer longer term neglect in a similar way to a child. This neglect may be unintended but can still result in harm and therefore a safeguarding concern.

### 7.3 Self-neglect and Hoarding in the Care Act 2014

Hoarding leads to deterioration and concerns about self-neglect. The Care Act, 2014 provides a coherent approach to adult social care in England and sets out how local authorities (and their partners in health, housing, welfare and employment services) must now take steps to prevent, reduce or delay the need for care and support for all adults. The guidance states that self-neglect covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. Factors indicating self-neglect are:

- Lack of self-care – lack of care over personal hygiene, health, nutrition, hydration leading to potentially severe harm or death
- Lack of care of environment – leading to squalor or hoarding
- Refusal of services which would mitigate harm

In practice this means that when an adult at risk has care and support needs, their case may require a safeguarding enquiry. However self-neglect is complex and concerns about self-neglect should not automatically be dealt with under safeguarding procedures.

In many cases, referral to Adult Services for a needs assessment should be considered first ahead of making an adult safeguarding referral. This does rely on the occupier engaging with the assessment process and being accepting of the care and support that may be offered.

Many occupiers who live in hoarded properties and are neglecting themselves do not want to initially engage with the assessment or offer of care and support but nevertheless the risk does remain. It is important to therefore properly assess the level of risk and also whether the occupier has capacity to safely make that decision (see later sections).

Self-neglect is complex and a unique experience therefore it is important that decisions are made on a case by case basis and using a consistent approach. NSAB have provided multi-agency guidance and a self-neglect pathway to enable this within Northamptonshire. This will help to ensure that safeguarding referrals are made appropriately, that self-neglect is consistently assessed and that a multi-agency approach is taken to managing risks.

### 7.4 NSAB self-neglect practice guidance and Adult Risk Management (ARM)

NSAB have developed [self-neglect practice guidance](#) which includes hoarding behaviour. Where concerns exist, front line professionals should follow this guidance and the pathway it provides.

Drawing on best practice NSAB believes that the challenges that self-neglect presents are best addressed through following 3 key principles:

- Key Principle 1 - Robust partnership working from the earliest practical stage
- Key Principle 2 - Interventions should draw upon knowledge of the kinds of approaches that tend to work best (these are detailed in the guidance document)
- Key Principle 3 - Agencies should place the adult at the centre of plans to support them

Signposted within this guidance is the ARM toolkit. This can be used by professionals from all agencies as a framework to facilitate effective multi-agency working with individuals aged 16 and above who are deemed to have capacity for a specific decision that may result in serious harm, or death, through severe self-neglect, risk taking behaviour or not being accepting of services offered.

#### ARM criteria

In order to consider an individual for an ARM all criteria below should apply:

- An individual must have the capacity to make decisions regarding the specific decision(s) that is causing concern
- The practitioner has no reason to doubt the individual has capacity and should state the reasons and provide proof, where applicable

- There is a risk of serious harm or death through severe self-neglect; fire; deteriorating health condition; declining to work with services; targeting by the local community; Hate Crime or Anti-Social Behaviour; sexual violence; or decline to engage with a single agency or other investigations for safeguarding
- There is a public safety interest or there are high level of concerns from partner agencies

In order to thoroughly assess risk, all relevant information pertaining to the adult should be gathered and considered at this stage including: the adults own views; the views of family and friends (informal family carers); assessments for mental capacity and mental health etc., consideration of relevant legal measures and referral for S9 Needs Assessment or S42 Safeguarding Enquiry.

Agencies who have been invited to the initial multi-agency ARM meeting will complete their individual agency self-neglect risk assessment which will be discussed at the first meeting, so that a holistic picture can be shared.

Refer to the ARM guidance and toolkit for further information on the ARM process.

## **8 The Mental Capacity Act and Hoarding**

### **8.1 Mental Capacity and Hoarding**

When deciding on the most appropriate pathway and toolkits to use in hoarding cases it is important to understand the principles of the Mental Capacity Act (MCA) 2005. This provides a statutory framework for people aged 16 and over, who lack the capacity to make decisions by themselves. The Act has five statutory principles and these are also legal requirements:

- 1) A person must be assumed to have capacity unless it is established that they lack capacity
- 2) A person is not to be treated as unable to make a decision unless all practicable steps have been taken without success
- 3) A person is not to be treated as unable to make a decision merely because he/she makes an unwise decision
- 4) An act done, or decision made, under this act for, or on behalf of, a person who lacks capacity must be done, or made in his or her best interests
- 5) Before the act is done, or the decision is made, regard must be had to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person's rights and freedom of action

### **8.2 Does an adult living in a hoarded property have capacity?**

The principles of the presumption of capacity and respecting a person's entitlement to make unwise decisions with capacity (principles 1 and 3 of the MCA) are the starting point for any capacity assessment. So in other words, practitioners coming across hoarding concerns need to assume that someone who is hoarding has the capacity to make this decision unless they can find evidence to the contrary.

The MCA Code of Practice states that one of the reasons why people may question a person's capacity to make a specific decision is that "the person's behaviour or circumstances cause doubt as to whether they have capacity to make a decision" (MCA Code of Practice, 4.35). Extreme hoarding behaviour may therefore in the specific circumstances of the case, prompt an assessment of capacity.

It is up to practitioners to find ways of communicating to determine whether someone is having genuine difficulty making particular decisions for particular reasons.

### **8.3 How do you assess capacity?**

There is a two part 'test' of capacity staff will need to apply in any decision regarding capacity. Please remember you are testing about the specific decision that needs to be made.

## **Stage 1**

The first part of a test for capacity is to identify the presence of an 'impairment or disturbance in the functioning of the mind or brain' which impacts on the decision making process at the time the decision needs to be made. This is a judgement based upon genuine concern and you do not need a doctor to do this. In more formal assessments of capacity, a medical opinion may need to be sought.

## **Stage 2**

The second stage of the test is to apply the following:

- Can the adult understand the decision that needs to be made and why it needs to be made?
- Can the adult retain the information sufficiently to show a consistency in their choice?
- Can the adult weigh up and balance the pros and cons of the decision, e.g. the likely consequences of making the decision or not making a decision?
- Can the adult communicate their decision (with or without support depending on their communication needs)?

If the person is thought to have an impairment of the mind (stage 1) and is unable to do any of the above (stage 2) they are deemed to lack the capacity to make that particular decision and should be safeguarded.

### **Considering and assessing capacity of occupiers who hoard**

The MCA Code of Practice states the person who assesses an individual's capacity to make a decision will usually be the person who is directly concerned with the decision at the time the decision needs to be made. Decision-making covers a very wide range of circumstances and can be 'simple' to complex in nature. In the area of self-neglect, a wide range of staff may be in a position to consider the capacity of an adult to make decisions about issues affecting their lives. Examples of the range of staff who may need to consider capacity in a self-neglect context are housing officers, fire fighters, police officers, substance misuse workers, support workers, health care workers (including doctors/nurses) and social care workers (including social workers). This list is not exhaustive.

Where an adult is thought to lack capacity to make a particularly significant decision (a complex decision such as where to live, what choice of treatment to accept/refuse or where a substantial risk is present) then a professional with more expertise in that specialist area should be sought. This will usually include a health and/or a social worker.

### **Guidance on assessing mental capacity in connection to hoarding**

Capacity is decision and time specific so practitioners wanting to preliminarily assess capacity in a hoarding case need to consider "What is the specific decision that needs to be made at this point?" When working with people living in hoarded or severely cluttered homes a useful question to ask could be "Do you understand that your hoarding has become dangerous and is now a real risk to your life?"

Practitioners need to think about the best way to put someone at ease in order to gain the information needed without distressing or isolating them further. Other practical considerations will help to get the best outcomes such as thinking about specific types of communication or language, times of the day, etc.

When assessing capacity, it is important to remember this is an assessment of whether the adult has capacity to make decisions and access help for their hoarding:

- Does the adult understand they have a problem with hoarding and that it is negatively affecting their life?
- Is the adult 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 adult 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 adult communicate and execute their decision? (It is also important to note that someone who has difficulty with their executive capacity may have difficulty carrying out specific tasks even when they appear to understand the need for them)

It is essential that any informal capacity assessment is clearly documented on case records and that information is included in any information sharing or referral forms.

## **9 Multi-Agency Working and Clutter Image Ratings (CIRs)**

Hoarding is complex, can escalate and lead to multiple risks, it is highly likely that a variety of agencies may come into contact or deal with concerns or complaints about the same person who is living in a hoarded or cluttered home. It is therefore really useful to have a common assessment tool to ensure a consistent way of describing hoarding risks.

As a starting point the CIRs are a useful way of consistently describing levels of hoarding or clutter. They can also be used as a consistent way of monitoring reductions or increases in levels of clutter.

Agencies will ensure that frontline staff are familiar with the CIRs that follow. These are also contained within the NSAB self-neglect guidance.

Using the clutter images is a visual tool, there will be other factors that professionals need to consider before deciding on the level of risk. Any professional working with individuals who may have, or appear to have, a hoarding condition should ensure they complete the Practitioners Assessment in [section 10](#), using the clutter image rating tool below as an initial guide.

Note - evidence of animal hoarding is not referenced within these CIRs.

Regardless of the amount of clutter animal hoarding should be reported to the Royal Society for the Prevention of Cruelty to Animals (RSPCA) as well as other relevant agencies.

## Clutter Image Rating Tool Guidance

### 9.1 Clutter Image Rating: Bedroom

# Clutter Image Rating: Bedroom

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



1



2



3



4



5



6



7



8



9

## Clutter Image Rating: Living Room

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



1



2



3



4



5



6



7



8



9

## Clutter Image Rating Scale: Kitchen

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



1



2



3



4



5



6



7



8



9

## 10 Assessment Tool Guidance

Listed below are examples of questions you may wish to ask when you are concerned about someone's safety in their own home where you suspect that hoarding is having an impact.

Using relevant questions can lead to wider conversations and enable information to be gathered to inform a hoarding risk assessment. Most clients with a hoarding problem will be embarrassed about their surroundings so try to ascertain information whilst being as sensitive as possible.

- (a) How do you get in and out of your property, do you feel safe living here?
- (b) Have you ever had an accident, slipped, tripped up or fallen? How did it happen?
- (c) How have you made your home safer to prevent this (above) from happening again?
- (d) How do you move safely around your home as the floor space is limited?
- (e) Has a fire ever started by accident, how easily could you escape if there was a fire?
- (f) How do you get hot water, lighting, heating in here? Do these services work ok, have they been tested?
- (g) 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?
- (h) When did you last go out in your garden? Do you feel safe to go out there?
- (i) Are you worried about other people getting in to your garden or home? Has this happened?
- (j) Are you worried about mice, rats, or other pests? Do you leave food out for them? Have they eaten any of your food? Or got upstairs and be nesting anywhere?
- (k) Can you prepare food, cook and wash up in your kitchen?
- (l) Do you use your fridge? How do you keep things cold in the hot weather?
- (m) 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?
- (n) Can you show me where you sleep, can we see your upstairs rooms? Are the stairs safe to walk up? (if there are any)
- (o) What do you do with your dirty washing?
- (p) Where do you sleep? Are you able to change your bed linen regularly? When did you last change them?
- (q) How do you keep yourself warm at night? Have you got extra coverings to put on your bed if you are cold?
- (r) Are there any broken windows? Any repairs that are needed or that worry you?
- (s) Because of the number of possessions you have, do you find it difficult to use some of your rooms? If so which ones?
- (t) To what extent do you have difficulty discarding (or recycling, selling, giving away) ordinary things that other people would get rid of?
- (u) Are you happy for us to share your information with other professionals who may be able to help you?

### Hoarding Insight characteristics

Use this guide as a baseline to describe the occupier's attitude towards their hoarding. This will be useful information to help you understand whilst working with an occupier, but also to use in onward referrals which will better support a tailored approach to the individual's needs.

#### Good or fair insight

The client recognises that hoarding-related beliefs and behaviours (relating to difficulty discarding items, clutter or excessive acquisition) are problematic. The client recognises these behaviours in themselves.

#### Poor insight

The client is mostly convinced that hoarding-related beliefs and behaviours (relating to difficulty discarding items, clutter or excessive acquisition) are not problematic despite evidence to the contrary. The client might recognise a storage problem but has little self-recognition or acceptance of their own hoarding behaviour.

### **Absent (delusional) insight**

The client is convinced that hoarding-related beliefs and behaviours (relating to difficulty discarding items, clutter or excessive acquisition) are not problematic despite evidence to the contrary. The client is completely accepting of their living environment despite it being hoarded and possibly a risk to health.

### **Detached with assigned blame**

The client has been away from their property for an extended period. The client has formed a detachment from the hoarded property and is now convinced a 3<sup>rd</sup> party is to blame for its condition. For example, a burglary has taken place, squatters or other household members.

### **Next steps**

Use the clutter level, your observations and the information gained from the occupier to complete the relevant assessment form in Appendix A for Level 1, 2 or 3.

**Images 1-3 indicate level 1**

**Images 4-6 indicate level 2**

**Images 7-9 indicate level 3**

This will help you to decide on the next steps to take and how other agencies may be able to support, and which ones should be alerted to the risks identified.

Keep the assessment form as part of your case notes following your own agency processes for record keeping, share your assessment form with other agencies you are referring to or transfer the information onto relevant referral templates and toolkits.

## **11 Working with someone who hoards**

What not to do

The biggest fear for someone with hoarding behaviours is that someone will come and clear away all of their possessions. This can trigger extreme emotions and anxiety and be a very traumatic experience.

Without addressing the root causes of the hoarding behaviour this kind of loss and trauma is likely to lead to more hoarding.

Though there may be extreme cases where clearance is necessary to reduce immediate risk it's generally not a good idea to go straight to the option of getting extra storage space or calling in the council or environmental health to clear the rubbish away to achieve a long term change.

Approaches that help:

- Building Trust, being open and honest
- Coaching and supporting
- Small Steps and goals
- Focus on benefits and positives
- Talking about reorganising, putting things where they should be, instead of “throwing away”
- Non – judgemental

## Tips for communicating with people who hoard

Things to consider	What you might say
<p><b>Explain the purpose of the conversation very clearly and honestly</b></p> <p><b>Show concern for the person</b></p> <p><b>Focus your conversation on safety and wellbeing and organisation of possessions</b> rather than talking about discarding items, this is likely to cause distress</p> <p><b>Identify some hazards and focus on options to reduce the risk</b> rather than insisting on an immediate and overwhelming clean up.</p>	<p><i>"I am here to carry out a home visit today. This usually involves a room by room check where possible and the purpose of the visit is to help prevent a fire from occurring, to give you some fire safety advice and to come up with an escape plan for you to use in the event of a fire occurring"</i></p> <p><i>"I'm concerned about the risk of a fall happening, and that paramedics would struggle to get down the hallway to be able to help you"</i></p> <p><i>"Can you see how having those boxes so close to the cooker could catch fire, is there somewhere safer to keep them?"</i></p> <p><i>"I'm really worried that if you did drop a cigarette in this room it would catch fire really easily"</i></p> <p><i>"I'm concerned that your gas boiler has not been checked for a long time, if we could move or rearrange some items we could clear a pathway to it and we can get it checked. You will know that it is safe to use"</i></p>
<p><b>Match the person's language</b></p> <p>Listen to how the person describes their things and use the same words (e.g. 'my things', 'my collections, my babies')</p> <p>Avoid terms such as rubbish</p> <p>Avoid judgmental nonverbal expressions</p>	<p><i>"I can see that your things are very important to you"</i></p> <p><i>"It's clear that you are very attached to your treasure"</i></p> <p><i>"Tell me more about your collection"</i></p>
<p><b>Go at the person's pace and let them take control</b></p> <p>People who hoard often feel extreme shame and anxiety about visitors coming in to their home</p> <p>Ask permission before opening doors</p> <p>Avoid moving or touching things</p>	<p><i>"Do you have a preference where we begin"?</i></p> <p><i>"Would you like to show me the way"?</i></p> <p><i>"Is it ok if we go in here"?</i></p> <p><i>"Tell me about your things"</i></p>
<p><b>Use encouraging language and explain why it is important to make some space</b></p>	<p><i>"I see that you have a pathway from your front door to your living room, that's great".</i></p> <p><i>The thing is that somebody else might need to come into your home, like a fire fighter or an emergency responder, would have difficulty getting to you through this space. They are usually carrying bulky equipment and wearing additional protective clothing. It's important to have a pathway that is wide enough so that they could get through to help you".</i></p>
<p>If you need help having a conversation you could ask whether there is anything that the person finds difficult to do in their home. This may help the person to recognise the extent to which their hoarding is a problem for them.</p>	<p><i>"How difficult is it for you to use the rooms in your house"?</i></p> <p><i>"How do you feel about not being able to use your bathroom/bedroom/kitchen/lounge"?</i> <i>"I can see that you can easily access your bathroom, which is great. It would be even better if you could clear some space so that you could get to your bedroom, how do you feel about being able to sleep in your bed again".</i></p>

Things to consider	What you might say
<b>Acknowledge small changes and set small, realistic goals</b>	<i>"There is a lot for you to think about, making very small changes will all add up and help you to get to where you want to be" "moving some things out of that bathroom sink will mean that you would be able to use it today"</i>
<b>Let the person know that there is support available to them and that they have options</b>	<i>"There are many people and organisations who are there to help people to live more comfortably in their homes. " There is a group of local people who have lots of possessions like you, they get together sometimes to talk about what that is like and try to help each other" "Some people go to see their GP as a starting point and they will be able to advise you on what to do next" "You might want to have a look at some of these websites designed to help people who have lots of possessions" (match the person's language).</i>
<b>Dealing with conflict and resistance.</b> Imagine yourself in the person's shoes and think about how you would like to be treated. <b>Acknowledge the person's feelings.</b> <b>Reiterate your role and why you are there.</b>	<i>"I can see this visit is very difficult for you and that what I'm saying is upsetting you" "I'm sorry this is so upsetting for you, my job is to help you to stay safe at home and to make sure that I would be safe too if I needed to come in here in an emergency"  "I know it's hard but it might help if you spoke to someone about this"</i>

## 12 Support for Hoarders and Practitioners

- **Hoarding Peer Support Group – [Kettering Mind](#)**  
This facilitated peer support group provides a safe and non-judgmental environment for people to come together and meet others who understand their experience. Supports positive changes through practical advice and empowering people to improve their mental wellbeing and make informed decisions.
- **[Ice Breaker Form](#) - to help those who feel ready to try and talk about their hoarding**  
This site also signposts to other help and resources provided by partners of the National Fire Chief Council's Hoarding Working Group.
- **[Cloud's End CIC](#)**  
Resources to help hoarders and housing associations dealing with hoarding.
- **[Help For Hoarders](#)**  
Information, support and advice for hoarders and their families, including an online support forum.
- **[OCD UK](#)**  
Information and support about Obsessive Compulsive Disorder, which includes hoarding.
- **[Hoarding UK](#)**  
Information and support for hoarders and agencies, including local support groups.
- **[The Association of Professional De-Clutterers and Organisers \(UK\)](#)**  
Provides support, networking and promotion for members of the Professional Organising and Decluttering industry, and information and services for their clients.

### Hoarding Assessment of Risk – Level 1-3 Clutter Image Rating

Household Environment is considered typical. Level of possessions is not causing heightened risk. Occupier may want/need some assistance with taking care of self or home to prevent escalation to a higher clutter rating in the future.

<b>Occupier Name/s</b>			
<b>Address</b>			
<b>Contact Details</b>			
<b>Property Tenure</b>			
<b>CONSIDERATIONS</b>	<b>COMMON OBSERVATIONS AT LEVEL 1-3 (a X would indicate a concern)</b>	<b>v</b>	<b>x</b>
<b>Engagement</b>	Occupier willing to engage in discussion		
<b>Property, Structure, Services and Outside areas</b>	Entrances and exits accessible		
	Outside areas accessible and maintained		
	External doors can be properly secured		
	Utility services are functional		
<b>Household Function</b>	Rooms can be safely used for their intended purpose		
	Household appliances are in expected locations and in use		
	Property is being reasonably maintained within terms of tenancy/lease agreements		
<b>Health and Safety impacts</b>	Smoke alarm on each floor and working		
	Property is clean with no persistent odours		
	Food preparation areas are reasonably clean – no evidence of rotting food		
	Household waste is being managed		
	No presence of flies		
	Occupier managing personal care		
<b>Safeguarding of children and family members</b>	Fire escape routes are clear		
	No obvious concerns regarding neglect, self-neglect, or for children or adults at risk		
<b>Animals</b>	No pets/animals seem well cared for		
	No presence of animal faeces and urine (except in contained litter)		
	No concerns regarding pests or infestations		
<b>Risk to others Visiting including need for PPE</b>	No hazards present requiring PPE as a control measure		
	No additional staff risk assessment required		
<b>Observation Notes</b>			
<b>Clutter Rating</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Visited By Name</b>			<b>Organisation</b>
<b>Observation Date</b>			
<b>Agency Referrals to be made as a result of assessment</b>			
<b>LIKELY ACTIONS AT LEVEL 1-3</b>			
<b>For those assessing</b>	Follow own agency protocols and refer or signpost to other agencies if specific needs/risks identified		
<b>For Agencies</b>			
<b>Child and Adult Safeguarding:</b> Unlikely to be safeguarding concerns in relation to hoarding and self-neglect but may need to respond to request for care and support or other concerns regarding to risk to a child		<b>Social/ Private Landlord:</b> Tenancy conditions unlikely to be affected Scheduled servicing is up to date Small repairs can be arranged if needed and within normal timescales	
<b>NFRS:</b> no action unless advice requested by occupier or specific fire safety risk identified e.g. no working smoke		<b>Police:</b> No action unless specific concerns regarding home security for a vulnerable person or family or criminal activity	
<b>Environmental Health:</b> action likely to be needed		<b>Trading Standards:</b> Can assist if high levels of scam mail being received	
<b>Animal Welfare:</b> No action unless requested/concerns regarding multiple animals			

### Hoarding Assessment of Risk – Level 4-6 Clutter Image Rating

Household Environment unlikely to improve without support and/or professional assistance to resolve the clutter and any resulting maintenance issues. Self-neglect or neglect of other occupiers is more likely as the household function is reduced.

<b>Occupier Name/s</b>			
<b>Address</b>			
<b>Contact Details</b>			
<b>Property Tenure</b>			
<b>CONSIDERATIONS</b>	<b>COMMON OBSERVATIONS AT LEVEL 4-6</b>	<b>v</b>	<b>x</b>
<b>Engagement</b>	Occupier reluctant to talk		
	Occupier reluctant to discuss clutter level		
<b>Insight</b>	Occupier generally has poor insight		
	Occupier doesn't see impact of clutter level		
	Occupier feeling impacted by clutter		
<b>Property, Structure, Services and Garden area</b>	Main entrance/exit difficult to use		
	Outside areas not maintained		
	External doors not well secured		
	Utility services functioning but un-serviced		
	Some outside areas have been taken over		
	Indoor items are being stored outside		
	Broken items/waste are visible in garden		
	External evidence of repairs needed to roof		
	Repairs need to windows/doors		
<b>Household Function</b>	Overgrown plants affecting structure		
	Clutter is affecting living spaces and impacting on use of rooms for their Intended purpose		
	Clutter is causing congestion between the rooms and entrances		
	Housekeeping is inconsistent		
	Some household appliances are not functioning		
	Additional appliances are in unusual places		
	Property is not likely being maintained within tenancy conditions		
<b>Health and Safety Impacts</b>	Kitchen and bathroom areas in particular are being impacted by levels of		
	Smoke alarms not present or not working		
	Fire escape routes are affected by clutter		
	Persistent odour present (not identifiable)		
	Cooking area surrounded by clutter		
	Food preparation areas are limited in space		
	Food preparation areas are unclean, unsafe		
	Household waste is not being managed		
<b>Safeguarding of Children and Family members</b>	Flies present or dead flies not cleared		
	Occupier struggling with personal care		
	An adult may have care and support needs		
<b>Animals</b>	Levels of clutter and property condition are affecting the care given to child occupiers		
	Pets/animals not well cared for/controlled		
	Animal faeces/urine not contained/cleared		
	Sounds of mice or droppings seen		
<b>Risk to others Visiting including Need for PPE</b>	Possible light infestation not being treated		
	Some hazards present requiring PPE as a control measure- gloves, safety Shoes, sanitiser		
	No staff risk assessment required		
<b>Observation Notes</b>			
<b>Clutter Rating</b>	<b>4</b>	<b>5</b>	<b>6</b>
<b>Visited By Name</b>	<b>Organisation</b>		
<b>Observation Date</b>			
<b>Agency Referrals to be made as a result of assessment</b>			

**LIKELY ACTIONS AT LEVEL 4-6**

<b>For those assessing</b>	<b>Follow own protocols, refer to other agencies as it is likely that health, safety, wellbeing is impacted by clutter. The NEGLECT (child) and SELF NEGLECT (adults) toolkits will be useful in assessing risk of harm to a child, adult at risk or hoarding adult. Share risk information with relevant agencies</b>	
<b>For Agencies</b>		
<p><b>Child and Adult Safeguarding:</b> Clutter is impacting on daily living. MASH will respond to referrals and concerns raised about child safety. Adult Social Care will respond to request for care and support, neglect of adult at risk by caregiver.</p>	<p><b>Social/ Private Landlord:</b> (Social)– will need to visit as Tenancy conditions likely to be affected and enhanced support may be needed. Scheduled servicing and repairs are likely to be needed and prioritised. (All) – may need to enforce tenancy conditions – tenant responsibilities</p>	
<p><b>NFRS:</b> Will carry out a HFSV with occupier consent, install smoke alarms if there is no landlord, share risk information with other agencies</p>	<p><b>Police:</b> Can provide a visit by local policing team/Crime Prevention if occupier vulnerability increases and they are becoming a target for others</p>	
<p><b>Environmental Health:</b> May need to carry out an inspection of the property to assess risks if this is an owner occupier or freeholder and there is evidence of concerns and impact on health and safety of others. Unlikely to consider enforcement proceedings unless specific</p>	<p><b>Trading Standards:</b> Can assist if high levels of scam mail being received</p>	
<p><b>Animal Welfare:</b> Can respond to concerns visit property for a wellbeing check on animals/pets, provide education on animal welfare</p>		

### Hoarding Assessment of Risk – Level 7-9 Clutter Image Rating

Household Environment requires intervention with a collaborative multi-agency approach to managing risk and professionals are needed to support the occupier. This level of hoarding constitutes a safeguarding alert due to significant risks to occupiers, emergency responders and other residents in the community. Children and adults at will be being neglected (intentionally or unintentionally) as the household function is reduced and environmental risks increase.

<b>Occupier Name/s</b>			
<b>Address</b>			
<b>Contact Details</b>			
<b>Property Tenure</b>			
<b>CONSIDERATIONS</b>	<b>COMMON OBSERVATIONS AT LEVEL 7-9</b>	<b>√</b>	<b>x</b>
<b>Engagement</b>	Occupier overwhelmed, angry or upset		
	Occupier refusal to discuss clutter level		
<b>Insight</b>	Occupier poor/delusional insight		
	Occupier doesn't see impact of clutter level		
	Occupier feeling impacted by clutter		
<b>Property, Structure, Services and Garden area</b>	Access severely reduced due to clutter		
	Possessions are covering windows		
	External doors disrepair/not functioning		
	Utility services not in use		
	Outside areas un-accessible, overgrown		
	Extreme clutter in outside areas		
	Extreme levels of broken items/waste		
	Extensive repairs needed to property		
	Structure visibly affected (inside or outside)		
<b>Household Function</b>	Evidence of rodents/animal pathways through garden		
	Some rooms inhabitable due to clutter level, other rooms significantly impacted, not used for their intended purpose (bedroom)		
	Clutter has blocked internal doorways, hallways and stairs difficult to use.		
	Housekeeping not possible		
	Household appliances not in use/accessible		
	Additional appliances are in unusual places		
	Tenancy conditions not met		
<b>Health and Safety Impacts</b>	No safe cooking/food preparation area		
	No working toilet/toilet not accessible		
	Occupier poor/deteriorating physical appearance, health and/or mental health		
	Smoke alarms cannot be found/tested		
	Fire escape routes blocked		
	Offensive odour present		
	Rotting food is present		
	Cooking method is unsafe/no hot food		
	No safe food preparation area		
	Human urine or excrement is present		
<b>Safeguarding of Children and Family members</b>	No area for personal hygiene,		
	Concern regarding integrity of electrics		
	Fire risk from smoking, candles, heating		
<b>Animals</b>	All occupiers at risk. Risk to Responders and neighbours (fire, infestation, Structure)		
	Child safeguarding referral must be made. Adults at risk safeguarding referral needed		
<b>Risk to others Visiting including Need for PPE</b>	Pets/animals are at risk		
	Animal faeces/urine not contained/cleared		
	Animal Hoarding		
	Visible infestation, rodents, lice, fleas, cockroaches, ants, silverfish. Evidence of droppings, tracks, urine, chewing and nesting		
<b>Risk to others Visiting including Need for PPE</b>	Hazards present, PPE is required - gloves, safety shoes, sanitiser, insect Repellent, face mask, coveralls		
	Full risk assessment required. Staff may need to work in pairs,		

<b>Observation Notes</b>			
<b>Clutter Rating</b>	<b>7</b>	<b>8</b>	<b>9</b>
<b>Visited By Name</b>		<b>Organisation</b>	
<b>Observation Date</b>			
<b>Agency Referrals to be made as a result of assessment</b>			
<b>LIKELY ACTIONS AT LEVEL 7-9</b>			
<b>For those assessing</b>	<p><b>Follow own protocols, encourage occupier to consent to working with others. Irrespective of consent, raise safeguarding referral to protect children and adults at risk. Use the SELF NEGLECT toolkit and guidance to help progress multi-agency working. Share risk information with NFRS.</b></p>		
<b>For Agencies</b>			
<p><b>Child and Adult Safeguarding:</b> Clutter level is a significant risk. MASH will respond to referrals and concerns raised about child safety. Adult Social Care will carry out assessments and enquiries regarding care and support needs, neglect of adult at risk by caregiver, safeguarding..</p>	<p><b>Social/ Private Landlord:</b> (Social)– visit to inspect property, help to establish support needs. (All) Enforce tenancy conditions to enable prioritisation of repairs/servicing. Private Sector Housing contact landlord if property is unsafe</p>		
<p><b>NFRS:</b> Attempt phone/doorstep contact, HFSV or external visual survey, Record on mobilising system, Raise safeguarding referral or contribute to ARM process</p>	<p><b>Police:</b> Visit by local policing team/Crime Prevention if occupier becoming a target for others, or repeated complaints/calls. Share information and contribute to ARM processes where relevant</p>		
<p><b>Environmental Health:</b> Carry out an inspection to assess risk. EHO to consider serving notices using legislative powers if evidence of impact on health and safety of occupiers/others. Consider works in default if notices not complied with by occupier. Raise additional safeguarding referrals if required or contribute to ARM process.</p>	<p><b>Trading Standards:</b> Can assist if high levels of scam mail being received</p>		
<p><b>Animal Welfare:</b> Respond to concerns, visit property for a wellbeing check on animals/pets, provide education on animal welfare. Can remove or rehome animals/pets</p>			