Multi-Agency Hoarding Framework

Guidance for practitioners in Derby City and Derbyshire April 2021







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1.1 Introduction

This document sets out a framework for collaborative multi-agency working within Derby City and Derbyshire using a 'person centred approach' based model. The protocol offers clear guidance for professionals and agencies, working with people who hoard. This protocol has been developed in partnership with Derbyshire Fire and Rescue Service and Derbyshire Hoarding Steering Group.

2.1 Who does this framework apply to?

This framework applies to all agencies supporting the Derby City and Derbyshire multi- agency hoarding pathway and those who have agreed to support the framework.

There is an expectation that everyone in partnership with the protocol engages fully to achieve the best outcome for the individual while meeting the requirements and duties of their agency or Board.

The following agencies and boards support this framework:

- Clinical Commissioning Groups
- District and Borough Environment Health Teams
- Housing Associations, Social Landlords and Private Landlords
- Derby City and Derbyshire County Council Children's Safeguarding Board
- Derby City and Derbyshire County Council Safeguarding Adults Board
- Derbyshire County Council Community Safety
- Trading Standards Derbyshire County Council
- Derbyshire Fire and Rescue Service
- Derbyshire Community Health Services NHS Foundation Trust
- Derbyshire Healthcare NHS Foundation Trust (DHCFT)
- Mental Health Teams
- Derbyshire Police
- Public Health Derbyshire

Aims of this protocol

The aims of this framework are 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 compulsory solutions.
- Ensure a "person-centred approach" is required when planning solutions tailored to meet the needs of an individual. Some of the solutions may include;
- Professional support and monitoring
- Property repairs and the safety of the property
- Home checks
- · Permanent or temporary re-housing
- Develop creative ways of engaging individuals in the process.
- Establish best practice and improve knowledge of legislation that relates to hoarding behaviour through the Hoarding Steering Group.

3.1 Definition of hoarding

Hoarding is the excessive acquisition of and inability to discard a large number of possessions resulting in extensive clutter. Hoarding impedes the use of living spaces being used for their designed 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.

Although much remains to be done to better understand the symptoms, hoarding is now considered a standalone mental health disorder and is included in the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM) 2013. However, hoarding can also be a symptom of other medical disorders such as depression, dementia and psychotic disorder. 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.

Hoarding does not discriminate or favour a particular gender, age, ethnicity, socio- economic status, educational/occupational history or tenure type.

There are many areas in which hoarding can occur such as the property, garden or communal areas.

Individuals can hoard a range of items, some of which are:

- Clothing and bags
- Newspapers, magazine or books
- Bills, receipts or letters

- Food and/or containers
- Collectables such as toys, DVDs or CDs
- Animals

3.2 Types of hoarding

There are typically three types of hoarding:

- Inanimate objects: This is the most common. This could consist of one type of object or collection of a mixture of objects, such as old clothes, newspapers, food, containers or papers.
- ii. Animal hoarding: This is on the increase and 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 infestation by insects.
- iii. Data Hoarding: This is a relatively new phenomenon. It could present with the storage of data collection equipment such as computers, electronic storage devices or paper. A need to store copies of emails, and other information in an electronic format.

The OCD-UK 2013 (Obsessive Compulsive Disorder) identifies 3 areas of hoarding;

- Prevention of harm when an individual struggles to throw things away, as bad things may happen
- Deprivation hoarding when an individual feels as though they may need the things they hoard
- Emotional hoarding when hoarding becomes emotional, which can occur from trauma and sentimental values

These 3 areas can lead on to some of the general characteristics of hoarding, in the following section.

3.3 General characteristics of hoarding

- **Fear and anxiety**: compulsive hoarding may have started as a learnt behaviour or following a significant event such as bereavement. The person who is hoarding believes buying or saving things will relieve the anxiety and fear they feel. The hoarding effectively becomes their comfort blanket. Any attempt to discard the hoarded items can induce feelings varying from mild anxiety to a full panic attack with sweats and palpitations.
- 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 may struggle with the decision to discard items that are no longer necessary, including rubbish.

- **Unrelenting standards:** people who hoard will often find faults with others requiring others to perform to excellence while struggling to organise themselves and complete daily living tasks.
- **Socially isolated:** people who hoard will typically alienate family and friends and may be embarrassed to have visitors. They may refuse home visits from professionals in favour of office-based appointments.
- 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'.
- **Mentally competent:** people who hoard are typically able to make decisions that are not related to hoarding.
- 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.
- **Self-care:** a person who hoards may appear unkempt and unhygienic, due to lack of bathroom or washing facilities in their home. However, some people who hoard will use public facilities in order to maintain their personal hygiene and appearance.
- **Poor insight:** a person who hoards will typically see nothing wrong with their behaviours and the impact it has on them and others.

3.4 Key facts

- It is estimated that between 2 5% of the population hoard.
- This equates to at least 1.2 million households across the UK.
- It is estimated that only 5% of hoarders come to the attention of statutory agencies.
- Hoarding cases can cost anywhere from £1000 £60,000.
- 20-30% of OCD sufferers are hoarders (The Chartered Institute of Environmental Health, 2012)
- Often people who hoard can stop landlords from meeting their statutory duties
 e.g. Gas safety checks and other certification required for registered Social Landlords

4 SECTION

4.1 Legislation

The Mental Capacity Act (MCA) 2005 provides a statutory framework for people who lack the capacity to make decisions by themselves. The Act has five statutory principles; these are the legal requirements of the Act:

A person must be assumed to have capacity unless it is established that they lack capacity. A person is not to be treated as unable to make a decision unless all practicable steps have been taken without success.

A person is not to be treated as unable to make a decision merely because he/she makes an unwise decision.

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.

Before the act is done or the decision is made, regard must be given 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.

When a person's hoarding behaviour poses a serious risk to their health and safety, professional intervention will be required. With the exception of statutory requirements, the intervention or action proposed must be with the individual's consent. Article 8 of the European Convention on Human Rights (The right to respect for private and family life) - is engaged. Interference with a person's life must be lawful, necessary and pursue a legitimate aim.

In extreme cases, taking statutory principle 3 (above) into account, the very nature of the environment may lead the professional to question whether the customer has capacity to consent to the proposed action or intervention and trigger a capacity assessment. All interventions must be undertaken in accordance with the 5 statutory principles and using the 'two-stage' test of capacity (see MCA Code 4.11 - 4.25).

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.

Deprivation of Liberty Safeguards under the Mental Capacity Act (2005),

The Deprivation of Liberty Safeguards are an amendment to the Mental Capacity Act 2005. They apply in England and Wales only.

The Mental Capacity Act allows restraint and restrictions to be used – but only if they are in a person's best interests.

Extra safeguards are needed if the restrictions and restraint used will deprive a person of their liberty. These are called the Deprivation of Liberty Safeguards.

The Deprivation of Liberty Safeguards can only be considered when an individual lives in their own home or in supported living, by a court of protection. (SCIE, 2015)

The Care Act 2014 recognises self-neglect as a category of abuse and neglect. This means that people who self-neglect may now be supported by safeguarding adult approaches, including Making Safeguarding personal, as well as receiving more support from practitioners.

What is self-neglect? Lack of self-care to an extent that it threatens personal health and safety. Neglecting to care for one's personal hygiene, health or surroundings. Inability to avoid harm as a result of self-neglect. Failure to seek help to access services to meet health and social care needs.

This identified a historic lack of understanding of self-neglect, resulting in inconsistent approaches to support and care. In an effort to address this, the Care Act statutory guidance 2014 formally recognises self-neglect as a category of abuse and neglect – and within that category identifies hoarding.

This enables local authorities to provide a safeguarding response, including the duty to share information for safeguarding purposes; the duty to make enquiries (S42) and the duty to provide advocacy, where a person has no one to advocate on their behalf. The duties apply equally whether a person lacks mental capacity or not. So, while an individual's wishes and feelings are central to their care and support, agencies much share information with the local authority for initial enquires to take place. Enquiries may take place even when the person has capacity and does not wish information to be shared, to ensure abuse and neglect is not affecting others, that a crime has not been committed, or that the person is making an autonomous decision and is not being coerced or harassed into that decision.

The purpose of a safeguarding enquiry (S42) is initially for the local authority to clarify matters and then decide on the course of action to:

- Prevent abuse and neglect from occurring
- Reduce the risk of abuse and neglect
- Safeguard in a way that promotes physical and mental wellbeing
- Promote choice, autonomy and control of decision making
- Consider the individual's wishes, expectations, values and outcomes
- Consider the risk to others
- Consider any potential crime
- Consider any issues of public interest

- Provide information, support and guidance to individuals and organisations
- Ensure that people can recognise abuse and neglect and then raise a concern
- Prevent abuse / neglect from re-occurring
- Fill in the gaps in knowledge
- Coordinate approaches
- Ensure that preventative measures are in place
- Co-ordinate multi agency assessments and responses

4.2 Confidentiality and information sharing

The Data Protection Act 1998 protects individuals' confidential information.

Professionals and agencies, should consider the 8 principles below when recording information on individuals.

Confidentiality protects individuals from being identified; there are 8 principles that should be enforced;

Processed fairly and lawfully

Gathered for specific and lawful purposes

Adequate, relevant and not excessive for those purposes

Accurate and kept up to date

Not kept for longer than necessary

Processed in line with your rights as a data subject

Kept secure

Not transferred abroad unless it's to countries with adequate data protection laws.

General Medical Council (2016)

4.3 Environmental Health Powers

The Chartered Institute of Environmental Health (2012) notes the growing list of statutory powers available to address

Environmental Health has certain powers which can be used in hoarding cases. Some are mentioned below.

Public Health Act 1984

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 were 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 available. If not complied with in 24 hours, the LA can do 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;

Filthy or unwholesome so as to be prejudicial to health; or

Verminous (relating to rats, mice other pests including insects, their eggs and larvae)

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. No appeal against notice but an appeal can be made against the cost and reasonableness of the works on the notice.

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.

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 – 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) – 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

- 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.

5 SECTION

5.1 Fire safety

Hoarding increases the risk of a fire occurring and makes it more difficult for people living within the property to evacuate safely. Fire can also spread to neighbouring properties if the level of hoarding is severe or if flammable items such as gas containers are being stored. It also poses a high risk to firefighters when attending the scene.

The sharing of information is extremely important for operational firefighter crew safety. Derbyshire Fire and Rescue Service 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. The 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.

6 SECTION

Safeguarding

6.1 Safeguarding Children

Safeguarding Children 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 hoarding property can put a child at risk by affecting their development, which in some cases leads to the neglect of a child, which is a safeguarding issue.

The United Nations Convention on the Rights of the Child 1989 identifies that children should be protected from abuse, neglect, maltreatment and exploitation. (UNICEF, 2009)

Some impacts that hoarding can have on a child are;

- Social isolation: not being able to have friends over
- Reduced living space: children may have to use one space for multiple uses and purposes, such as sleeping, eating, homework, TV and playing.

- Anxiety: this may develop due to their parent's behaviour towards objects.
 They may get anxious living within a household with many objects that they are unable to touch.
- Health: asthma, allergies, headache etc. which can be due to dust, the cleanliness of the household and the things that are being hoarded.

(Children of Hoarders, 2014)

The needs of the child at risk must come first and any actions we take must reflect this. Where children live in the property, a Safeguarding Children alert should always be raised.

6.2 Safeguarding Adults

Safeguarding Adults means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working 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 personal circumstances.

This framework accepts the guidance as supplied by the Derby City and Derbyshire Multi-Agency Adult Safeguarding Procedure for raising a concern and referring in order to safeguard an 'Adult'.

An 'adult at risk' may also be living with a hoarder in a property. There may be a safeguarding concern about the adult if they are at risk of harm due to the way the hoarder is choosing to live in the property. If in doubt, discuss the issue with a manager or contact the local authority safeguarding team.

6.3 Multi-Agency Response

It is recognised that hoarding is a complex condition and that a variety of agencies will come into contact with the same person. It is also recognised that not all the individuals who hoard will receive support from statutory services such as Mental Health.

Any professional working with individuals who may have, or appear to have, a hoarding condition should ensure they complete the Practitioners Assessment using the clutter image rating tool kit to decide what steps to take. (see page 17).

Evidence of animal hoarding at any level should be reported to the RSPCA as well as other relevant agencies. See referral form and contact details in the appendices.

6.4 Vulnerable Adults Risk Management (VARM)

The VARM process which involves multi-agencies coming together to develop and support plans to help ensure the needs of vulnerable adults are met is used in the County; however, Safeguarding processes are used in Derby City, not the VARM process. These adults may be at risk of significant harm and may be refusing help from support services. (Derbyshire Safeguarding Adults Board, 2016)

Details of the Policy & toolkit can be found on:

<u>Vulnerable Adult Risk Management (VARM) - Derbyshire Safeguarding Adults Board (derbyshiresab.org.uk)</u>

Clutter Image Rating Tool Guidance

7.1 Clutter Image Rating (CIR) – BEDROOM

Please select the CIR which closely relates to the amount of clutter



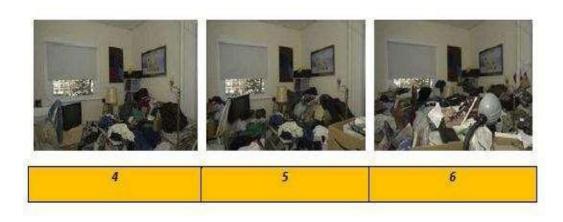




7.2 Clutter Image Rating (CIR) – LOUNGE

Please select the CIR which closely relates to the amount of clutter







7.3 Clutter Image Rating (CIR) – KITCHEN

Please select the CIR which closely relates to the amount of clutter



1 2 3





7 8 9

Assessment tool guidance

Guidance for practitioners

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 a risk of self-neglect and/or hoarding.

Most clients with a hoarding problem will be embarrassed about their surroundings so try to ascertain information whilst being as sensitive as possible.

- 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 floor is uneven or covered or there are exposed wires, damp, rot or other hazards)
- Has a fire ever started by accident? Is the property at risk from fire?
- Is there hot water, lighting and heating in the property? Do these services work properly?
- Do you have any problems keeping your home warm?
- When did you last go out in the garden? Do you feel safe to go outside?
- Are you able to use the bathroom and toilet ok? Have a wash, bath, shower etc.?
- Where do you sleep?
- Are there any obvious major repairs that need carrying out at the property?
- Are you happy for us to share your information with other professionals who may be able to help you?

8.1 Level One Actions

Level 1 Clutter image rating 1 - 3	Household environment is considered standard. No specialised assistance is needed. If the resident would like some assistance with general housework or feels they are declining towards a higher clutter scale, appropriate referrals can be made subject to age and circumstances.
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 Derbyshire Fire and Rescue Service to visit and install if criteria met. All services functional and maintained in good working order. Garden is accessible, tidy and maintained
2. Household Functions	 No excessive clutter, all rooms can be safely used for their intended purpose. All rooms are rated 1-3 on the Clutter Rating Scale. 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.
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. Residents managing personal care. No writing on the walls. Quantities of medication are within appropriate limits, in date and stored appropriately.
4.Safeguard of Children & Family members	 No concerns for household members. When children are present a Children's Safeguarding referral is mandatory
5. Animals and Pests	 Any pets at the property are well cared for. No pests or infestations at the property.
6. Personal Protective Equipment (PPE)	No PPE required.No visit in pairs required.

8.2 Level One: Multi-Agency Actions

Level 1	Actions
Referring Agency	 Discuss concerns with the individual. Raise a request to Derbyshire Fire and Rescue Service for a Safe & Well check to provide fire safety advice. Refer to Social Care for a care and support assessment. Refer to GP if appropriate.
Environmental Health	No action.
Social Landlords & Private	 Provide details on debt advice if appropriate to circumstances. Refer to GP if appropriate. Refer to Social Care for a care and support assessment if appropriate. Provide details of support streams open to the resident via charities and self-help groups. Ensure residents are maintaining all tenancy conditions. Refer for tenancy support if appropriate. Ensure that all utilities are maintained and serviceable.
Practitioners	 Make appropriate referrals for support to other agencies. Refer to social landlord if the client is their tenant or leaseholder.
Emergency Services	 Derbyshire Fire and Rescue Service- Carry out a Safe & Well Check if it fulfils Service criteria and share with statutory agencies. Derbyshire Police and East Midlands Ambulance Service Ensure information is shared with statutory agencies & feedback is provided to referring agency on completion of home visits.
Animal Welfare	No action unless advice requested.
Safeguarding of Adults and Children	 Properties with adults presenting care and support needs should be referred to the appropriate Social Care referral point. When children are present a Children's Safeguarding referral is mandatory.

8.3 Level Two Actions

Level 2 Clutter Image Rating 4 – 6 1. Property Structure,	Household environment requires professional assistance to resolve the clutter and the maintenance issues in the property.
Services & Garden Area	 Only major exit is blocked. Concern that services are not well maintained. Smoke alarms are not installed or not functioning. Garden is not accessible due to clutter or is not maintained Evidence of indoor items stored outside. Evidence of light structural damage including damp. Interior doors missing or blocked open.
2. Household Functions	 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. Room(s) score between 4-6 on the clutter scale. Inconsistent levels of housekeeping throughout the property. Some household appliances are not functioning properly and there may be additional units in unusual places. Property is not maintained within terms of lease or tenancy agreement where applicable. Evidence of outdoor items being stored inside.
3. Health and Safety	 Kitchen and bathroom are difficult to utilise and access. Offensive odour in the property. Resident is not maintaining safe cooking environment. Some concern with the quantity of medication or its storage or expiry dates. Has good fire safety awareness with little or no risk of ignition. Resident trying to manage personal care but struggling. No risk to the structure of the property.
4.Safeguard of Children & Family members	 Hoarding on clutter scale 4-6. Consider a safeguarding assessment. Properties with adults presenting care and support needs should be referred to the appropriate social care referral point. Please note all additional concerns for householders. When children are present a children's safeguarding referral is mandatory.

Equipment (PPE)

- 6. Personal Protective Latex gloves, boots or needle stick safe shoes, face mask, hand sanitizer, insect repellent.
 - Is PPE required?

8.4 Level Two: Multi-Agency Actions

Level 2	Actions
	In addition to actions listed below these cases need to be monitored regularly in the future due to
	RISK OF ESCALATION or RECURRENCE
Referring Agency	 Refer to landlord if resident is a tenant. Refer to Environmental Health if resident is a freeholder or occupier. Raise a request to the Fire and Rescue Service to provide a Safe & Well Check with a consideration for monitored smoke alarms/ assistive technology. Provide details of garden services. Refer to Social Care for a care and support assessment. Referral to GP. Referral to debt advice if appropriate. Refer to animal welfare if there are animals at the property. Ensure information sharing with all necessary statutory agencies.
Environmental Health	 Carry out an inspection of the property. At the time of inspection, Environmental Health Officer decides on appropriate course of action – Housing Standards Team may intervene at this stage but Environmental Protection would not as no real concerns have been highlighted at this stage. Consider serving notices under Housing Act 2004 – HOUSING STANDARDS TO REVIEW
Social Landlord & Private	 Visit resident to inspect the property & assess support needs. Refer internally to assist in the restoration of services to the property where appropriate. Ensure residents are maintaining all tenancy conditions. Enforce tenancy conditions relating to residents responsibilities. Ensure information sharing with all necessary statutory agencies.
Practitioners	 Carry out an assessment of the property. Ensure information sharing with all agencies involved to ensure a collaborative approach and a sustainable resolution.
Emergency Services	 Derbyshire Fire and Rescue Service Carry out a Safe & Well Check, share risk information with Statutory agencies and consider assistive technology.

	 Derbyshire Police and East Midlands Ambulance Service Ensure information is shared with statutory agencies & feedback is provided to referring agency.
Animal Welfare	 Visit property to undertake a wellbeing check on animals at the property. Educate client regarding animal welfare if appropriate. Provide advice/assistance with re-homing animals.
Safeguarding Adults and Children	 Properties with adults presenting care and support needs should be referred to the appropriate Social Care referral point. When children are present a Children's Safeguarding referral is mandatory.

8.5 Level Three Actions

Level 3 Clutter Household environment will require intervention with a collaborative **Image Rating** multi-agency approach with the involvement from a wide range of 7 - 9 professionals. This level of hoarding constitutes a Safeguarding alert due to the significant risk to health of the householders, surrounding properties and residents. Residents are often unaware of the implication of their hoarding actions and oblivious to the risk it poses. 1. Property Limited access to the property due to extreme clutter. Structure, Services & • Extreme clutter may be seen at windows. Garden Area • Extreme clutter may be seen 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 • Clutter is obstructing the living spaces and is preventing the use of the **Functions** rooms for their intended purpose. • Room(s) scores 7 - 9 on the clutter image scale. Rooms are 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. Toilets, sinks not functioning or not in use. Resident at risk due to living environment. Household appliances are not functioning or inaccessible. • Resident has no safe cooking environment. Resident 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. 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 Human urine and 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 was 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. 4. Safeguard of • Properties with adults presenting care and support needs should be Children & Family referred to the appropriate Social Care referral point. members • Please note all additional concerns for householders. • When children are present a Children's Safeguarding referral is mandatory. 5. Animals and Pests • Animals at the property at risk due to the level of clutter in the property. • Resident may not be able to control the animals in the property. Animals' living area is not maintained and smells. • Animals appeared to be malnourished or overfed. • Hoarding of animals in the property. • Heavy insect infestation (bed bugs, lice, fleas, cockroaches, ants, silverfish, etc.). • Visible rodent infestation – evidence of droppings, urine tracks, chewing and nesting. 6. Personal • Latex gloves, boots or needle stick safe shoes, face mask, hand Protective sanitizer, insect repellent. Equipment (PPE) • Visit in pairs required.

8.6 Level Three: Multi-Agency Actions

Actions	Level 3
Referring Agency	 Raise Safeguarding Alert within 24 hours if there are care and support needs. If the individual does not meet the Safeguarding thresholds for a referral, consider contacting Social Care regarding possible care and support needs assessment. Raise a request to Derbyshire Fire and Rescue Service within 24 hours to provide a Safe & Well check. Refer to Environmental Health.
Environmental Health	 Carry out an inspection. At time of inspection, EHO decides on appropriate course of action. Consider serving notices under Environmental Protection Act 1990, Public Health Act 1936, Anti-Social Behaviour, Crime and Policing Act 2014, The Prevention of Damage by Pests Act 1949 and the Housing Act 2004
Social Landlord & Private	 Visit resident to inspect the property & assess support needs. Attend VARM meetings as required. Enforce tenancy conditions relating to residents responsibilities.
Practitioners	 Refer to "Hoarding guidance questions for Practitioners". Ensure information sharing with all agencies involved to ensure a collaborative approach and a sustainable resolution.
	 Derbyshire Fire and Rescue Service- Carry out a Home Safety Check and share risk information with statutory agencies and consider assistive technology. Derbyshire Police and East Midlands Ambulance Service- Ensure information is shared with statutory agencies & feedback is provided to referring agency. Attend VARM/Safeguarding meetings as required. 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.

Animal Welfare

- Visit property to undertake a wellbeing check on animals at the property.
- Remove animals to a safe environment.
- Educate client regarding animal welfare if appropriate.
- Take legal action for animal cruelty if appropriate.
- Provide advice/assistance with re-homing animals.

9. APPENDICES

9.1 Appendix 1: Multi Agency Hoarding Assessment Referral Form and Clutter Rating

Derby Safeguarding Adults Board and Derbyshire Safeguarding Adults Board Referral Form can be

Derby Safeguarding Adults Board and Derbyshire Safeguarding Adults Board Referral Form can be accessed via the following link:

https://www.derbyshiresab.org.uk/professionals/safeguarding-adult-referrals.aspx



Derby Safeguarding Adults Board and Derbyshire Safeguarding Adults Board Referral Form



When completing the referral form please consult the Derby and Derbyshire Safeguarding Adults Procedures.

FOR ALL SAFEGUARDING REFERRALS PLEASE TELEPHONE the relevant local authority to make the referral before submitting this form.

For Derby City, please call 01332 642855 or 01332 786968 outside of office hours. You can also fax this form to Adult Social Care on 01332 643299.

For Derbyshire County, please contact Call Derbyshire on 01629 533190 or 01629 532600 outside of office hours.

Please note that these email inboxes are not monitored out of hours.

Area	Email		
Derby City	AdultsMASH@derby.gov.uk		
Amber Valley Area (Ripley, Alfreton, Belper)	AC.BSAmbervalley@derbyshire.gov.uk		
Bolsover Area (Clowne, Whitwell)	AC.BSBolsover@derbyshire.gov.uk		
Chesterfield Area	AC.BSChesterfield@derbyshire.gov.uk		
Erewash (Long Eaton, Ilkeston)	AC.BSErewash@derbyshire.gov.uk		
High Peak Area (Glossop, Buxton, Matlock)	AC.BSHighpeak@derbyshire.gov.uk		
North East Area (Clay Cross, Dronfield, Eckington)	AC.BSNorthEast@derbyshire.gov.uk		
South Dales Area (Ashbourne, Swadlincote, Shardlow, Willington, Hilton, Etwall)	AC.BSSouthDales@derbyshire.gov.uk		

Please note: sending person identifiable information using the above email addresses may amount to a breach of Data Protection legislation if you do not send from a secure email address to a secure email address.

ALL QUESTIONS MUST BE COMPLETED IN FULL

Any incomplete forms will be reported to agency safeguarding leads for quality assurance.

DETAILS OF THE PERSON					
Name(s)		Da	te of		
Birth:					
If the referral is for a child please na	ame the person				
with parental responsibility and rela	tionship				
Gender:	Ethnic Origin:				
Address:	Present location	ı if			
	different to				
	address:				
Tel No.					T
Has the referral been discussed wit	th the adult or the	res	ponsib	le	Yes/No
person for the child?					
If no why not					
What does the adult want to happe	n with the referra	l (Ma	aking		
safeguarding personal)?					
Has the adult or responsible person for the child consented to the					Yes / No
referral?					
If no why not?					
Is the Person able to independently represent their views and wishes? Yes / No					
			Yes / No		
Who would the Person like to support or represent them?					
Does the Person need referral to formal advocacy support or services Yes/No			Yes/No		
STATUTORY SAFEGUARDING CRITERIA					
Does the Person have care and support needs? If Yes detail what the Yes / No			Yes / No		
needs are.					

Does the adult have any medical conditions such or disability such as learning disability, dementia, physical disability or mental ill health? Please describe how these conditions impact the adult's day to day life? Please also explain whether the adult has experienced any trauma, are they leaving any care establishment, previous experience of abuse, experiencing coercion or control? Please also state if the adult is a carer?	If yes please detail:	
Thinking about the needs of the adult described above explain how these conditions impact on them being able to keep themselves safe.		

CATEGORY OF ALLEGED ABUSE/RISK OF ABUSE

List the category of alleged abuse / risk of abuse from the list below:

Physical Discriminatory Neglect / Acts of Omission

Sexual Domestic Abuse Modern Slavery
Psychological / Emotional Sexual Exploitation Organisational

Financial / Material Self-Neglect

Is the abuse/neglect motivated by any of the following fact

Religious intolerance Racism
Gender Discrimination Disability
Sexual orientation or homophobia Hate Crime

Anti-social behaviour Forced Marriage Honor Based Violence Modern Slavery

Female Genital Mutilation Ageism

Mate Crime Cuckooing

Criminal Exploitation Prevent

Cross Border Issues Domestic Violence

DETAILS OF ALLEGED ABUSE/RISK OF ABUSE

Date and Time of suspected abuse:

Where has the alleged abuse occurred or is likely to occur (if this is a regulated setting, please provide full address and postcode)

Has the abuse or neglect been directly Yes / No

observed? If yes by whom?

Date of Death (if applicable)

Provide further information about what the concerns are, what has happened and what risk of future abuse/harm has been identified (Who is involved, What has happened, Where has it happened, When did it happen, How has it happened). Provide as much information as possible.

What immediate action has been	
taken?	
Have the Police or any other	Yes / No / Don't Know
agency already been informed? If	Agencies informed
yes, which agency / what is the	Incident Number if known
incident number?	
Does making this referral place	Yes / No
anyone at risk of harm including	If yes please detail
other adults or children? (Think	
Family) – Please make a referral to	
Childrens Services if you have	
concerns for the welfare or the	
safety of a child)	

DETAILS OF THE PERSON WHO HAS ALLEGEDLY CAUSED HARM					
Name of person alleged to			Date of		
have caused harm			Birth		
Gender	Ethnic Ori		Origin		
Address					
Details of relationship to the PAR:					
State whether they are a carer, family member,					
partner, professional, stranger, unknow/other					
Is the person who has allegedly caused harm/abuse		Yes / No			
aware of the referral?					

DETAILS OF THE PERSON MAKING THIS REFERRAL				
Name of referrer				
Work Location				
Contact Details				
Telephone / email				
Signature of				
referrer(by typing				
your name you are				
signing this				
electronic form)				
Date / Time				
Safeguarding				
Officer/Duty Officer				
informed				
Date form				
completed				

How is your information used?

The information we collect will be used so that we can assess the risk to your wellbeing in line with our Safeguarding Adults duties, to provide you with information, advice, and safety planning services to help you to maximise your independence and stay safe.

Who will your information be shared with?

If you are referred under safeguarding adults criteria, the information you provide may be shared with other professionals who may or may not be involved with you for similar purposes. We may also ask government departments and agencies to give us information they have about you.

If you live in Derby (excluding Derbyshire) and would like further information about how your personal information will be used, please visit www.derby.gov.uk where you can see a full copy of our Privacy Notice. Alternatively you can request a hard copy from the Contact Support Team, Business Support, Derby City Council, Council House, Derby DE1 2FS. Email: contact.support@derby.gov.uk Tel: 01332 640825.

If you live in the Derbyshire area (excluding Derby) and would like further information about how your information will be used, please visit www.derbyshire.gov.uk where you can see a full copy of the privacy notice. Alternatively you can request a hard copy by emailing adultcare.info@derbyshire.gov.uk or writing to the Adult Care Information Team, County Hall, Matlock, DE4 3AG.

Clutter Rating

Please tick one of the Red, Amber or Green boxes to indicate the current level of risk.

Low Risk All doors, stairways and windows accessible No evidence of pests Clutter obstructs SOME functions of key living area – Looks untidy Safe maintained sanitation conditions **Medium Risk** Blocking of doors, some windows, possibly major exit Light infestation of pests (e.g. bed bugs, lice, fleas, rats) Clutter obstructing functions of key living space, stairs, entrances, hallways etc. Evidence of non-maintained sanitation conditions (e.g. food preparation surfaces heavily soiled, lots of dirty dishes, obvious odours which irritate etc.) Evidence of burns to the carpet, clothing etc. **High Risk** Whole rooms accessible, exits blocked, windows not able to be opened Utilities cut off (e.g. no heating, gas capped) Heavy infestation of pests (rats seen, heard, reported by neighbours, cockroaches, fleas etc.) Key living spaces not available for use, person living in one room Evidence of urine/excrement in room, rotting food, very insanitary conditions Evidence of previous fire or burns in the carpet, clothing etc.

9.2 Appendix 2: Useful telephone numbers

Derbyshire Fire and Rescue Service HQ	01773 305305
Chesterfield Royal Hospital switchboard	01246 277271
Derbyshire Community Health Services NHS Foundation switchboard	01246 515151
Derbyshire Healthcare NHS Foundation Trust switchboard	01332 623700
Royal Derby Hospital switchboard	01332 340131
Environmental Health Teams:	
Derby City Council Environmental Protection Team	01332 642020
Derby City Council Housing Standards Team	01332 640764
RSPCA Contact Helpline	0300 123 4999
Multi-Agency Safeguarding Hub (County) – MASH	0300 500 8090
Adult Contact Team (City)	01332 640777
Children and Families (City)	01332 641172
Derbyshire County Council Children's & Adults referrals - Call	01629 533190
Derbyshire	
Adult Care Safeguarding North	01629 537935
Adult Care Safeguarding South	01629 537420
Derbyshire Police Non-Emergency	101
Housing Associations	
Futures Homescape LTD	01773 573100
Peak District Housing Association	0300 123 4009
Dales Housing	0162 959 3200
Northern Counties Housing Association	0845 608 8000

Futures Housing Group	0300 456 2531
Enable Housing Association LTD	01246 599999
South Yorkshire Housing Association	0114 290 0200
EMH Homes	0300 123 6000
Home Group	0115 932 8191
NHS Mental Health Teams	
Amber Valley Child and Adolescent Mental Health Service (CAMHS)	01332 623700
Amber Valley Neighbourhood	01332 623700
Bolsover & Clay Cross Neighbourhood	01246 562080
Chesterfield Central Neighbourhood	0300 123 3372
Derby City Child and Adolescent Mental Health Service (CAMHS)	0300 790 0264
Derby City Neighbourhood	0300 123 4011
Erewash Child and Adolescent Mental Health Service (CAMHS)	0115 946 4568
Erewash Neighbourhood	0300 123 3375
High Peak Neighbourhood	0300 123 3374
Killamarsh & Chesterfield North Neighbourhood	0300 123 3370
North Dales Neighbourhood	0300 123 3373
South Derbyshire & Derbyshire Dales South Neighbourhood	0300 123 3376
South Derbyshire Child and Adolescent Mental Health Service (CAMHS)	01283 227077
Talking Mental Health Derbyshire (IAPT)	0300 123 0542
North Derbyshire Community Mental Health Team	0162 976 1600
Child and Adolescent Mental Health	0133 262 3700
Mental Health at Chesterfield Royal Hospital	0124 615 2563
Royal Derby Hospital Mental Health	0133 262 3700
Derbyshire Healthcare St Marys Gate, Chesterfield	0124 621 6510
Walton Hospital	0124 651 5505
Charity Mental Health Teams	
Tackling Mental Health Derbyshire	0300 123 0542
Derbyshire Federation for Mental Health	0162 973 3915
	<u> </u>

Light House Healthcare	0133 226 8455
Mental health support and advice services	
Call Derbyshire	01629 533190
Derby City Careline	01332 786968
Derbyshire Federation for Mental Health	01629 733915
Derbyshire Focus line	0800 027 2127
Rethink Mental Illness	0300 5000 927
Samaritans	116 123
South Derbyshire Mental Health Association	01283 222881
ReThink	0133 221 0228
South Derbyshire Mental Health Association	0128 322 2881
Derbyshire Safeguarding Adults Board	0133 264 0777
Derbyshire Safeguarding Children Board	0162 953 5716
Derbyshire County Council Public Health	0162 953 3190

9.3 Appendix 3: Reference List – For Further Reading

- https://hoardinguk.org/ Promoting Choice and Control Since 2008
- https://www.cieh.org/media/1248/hoarding-and-how-to-approach-it-guidance-forenvironmental-health-officers-and-others.pdf Charted Institute of Environmental Health, Professional Practice notes.
- https://www.anxiety.org/hoarding-effects-in-children-families
- www.psychiatrictimes.com/view/hidden-lives-children-hoarders
- https://www.derby.gov.uk/health-and-social-care/safeguarding-children/safeguarding-children/safeguarding-children-board/
- https://www.ddscp.org.uk/
- <a href="https://www.saferderbyshire.gov.uk/what-we-do/safeguarding-children/safeguarding-childre
- https://www.derbyshiresab.org.uk/professionals/vulnerable-adult-risk-management.aspx
 VARM Date accessed 08-4-2021
- https://www.derbyshiresab.org.uk/home.aspx
- https://www.mind.org.uk/information-support/types-of-mental-health-problems/hoarding/for-friends-and-family/
- https://www.helpguide.org/articles/anxiety/hoarding-disorder-help-for-hoarders.htm
- https://www.nhs.uk/mental-health/conditions/hoarding-disorder/