Multi-agency Hoarding Guidance
2019
Contents

1. Introduction - The aims of this framework 3
2. Information Sharing Protocol 5
3. Definition of hoarding 6
4. Types of hoarding and general characteristics of hoarding 7
5. Legislation relevant to hoarding behaviours 9
6. Fire safety 13
7. Safeguarding 14
8. Multi-agency response 16
9. The hoarding journey – what to consider 17
10. Funding and cost implications 18
11. Appendix 19

This guidance was created with key contributions from Radian Housing, Hampshire and Isle of Wight Fire and Rescue, Hampshire MASH, Capsticks solicitors and the Strategic Partnership Team.

Multi-Agency Hoarding Guidance 2019
**Introduction**

This document sets out a framework for collaborative multi-agency working across Hampshire and the Isle of Wight using a ‘person centred solution’ based model to support those demonstrating hoarding behaviours.

In August 2018 The World Health Organisation categorised for the first time, Hoarding as a stand-alone medical disorder. It is hoped that this will raise awareness and support professionals to address the issues this behaviour may present.

Recognising risk of abuse and neglect is an essential component of safeguarding duties, but so too is ensuring an effective response that manages that risk in a manner that respects an adult’s personal dignity, physical, mental and emotional wellbeing and the control they wish to exert over their own lives. Failure to do so can alienate the adult at risk and unwittingly increase the risk of harm if the adult then withdraws from necessary support.

When an adult with needs for care and support appears to be self-neglecting and displaying hoarding behaviours, refusing care and support despite persistent welfare concerns or whose self-neglecting behaviours pose a risk to others, it can be difficult for practitioners or concerned carers, friends/family members to understand how various legal powers and duties should be applied to find an appropriate solution.

The purpose of this guidance is to support providers, practitioners, and other professionals to identify when to raise concerns regarding poor self-care or lack of care for living conditions, identify agencies who can provide support and set out what they may expect by way of a response and encourage and support defensible decision making in accordance with our duty of care. This guidance should be read in conjunction with the Hampshire and Isle of Wight 4LSAB Multi-Agency Safeguarding Policy.
1. The aims of the framework are to:

Create a safer and healthier environment for the individual and others affected by the hoarding behaviour, e.g. the person, neighbours, family etc.

Deal with incidents of hoarding in a consistent evidence-based approach, with a structured multi-agency pathway which will maximise the use of existing services and resources and which may reduce the need for enforcement action.

Ensure that when interventions are required, that there is a clear process tailored to the individual, using a holistic approach. The intervention should include a combination of therapeutic and enforcement tools to reach the required outcome. This needs to include monitoring after resolution to prevent re-occurrence.

Ensure the individual with hoarding behaviour is fully engaged in the process and include family and peer support to achieve this where possible.

Establish best practice and share case studies that relate to hoarding behaviour through the hoarding forum to improve knowledge of hoarding, successful interventions and changes in legislation.

The networking of staff to work in partnership in order to support where possible a successful outcome for all involved.

To have the expressed commitment for those signed up to the guidance to support and work with other agencies on specific cases where requests are made.

The prevention of consequential outcomes for the person, the landlord, health, housing and social care services are potentially:

- Improved fire safety for person, neighbours and fire services
- Prevention of tenancy enforcement action
- Prevention of financial and material consequences
- Prevention of homelessness
- Improved health, reduction in hospital admissions and prevention of loss of life
- Improved mental health and sense of wellbeing
- Improved social interaction with friends and family, reduction of isolation
- Increased capacity to provide a suitable home for children
- Prevention of vermin infestations and associated health problems
- Prevention of targeting of the person with ASB or other criminal offences.
- Improved property conditions and maintaining standards of stock property
- Improved safety for professionals
- Improved service due to multi-agency information sharing
2. Information Sharing Guidance

The 4LSAB Multi-agency Hoarding Guidance is underpinned by;

- Data Protection Act 1998 (Appendix A)
- The General Data Protection Regulation (GDPR) (Appendix B)
3. Definition of hoarding

‘Hoarding is the excessive collection and retention of any material to the point that living space is not able to be used for its intended purpose.’

The World Health Organisation say hoarding is characterised by an ‘accumulation of possessions due to excessive acquisition of – or difficulty discarding – possessions, regardless of their actual value.

Hoarding disorder is a persistent difficulty in discarding or parting with possessions. A person with a hoarding disorder may experience distress at the thought of getting rid of the items or simply be unable, either physically or through other health related factors, to get rid of items despite an acknowledgment that changes need to be made. They will have an excessive accumulation of items, regardless of actual financial value.

Hoarding is 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; it is not a lifestyle choice. In any event, hoarding must always be treated as a sign of vulnerability and considered in this light.

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

Anything can be hoarded, including animals, in many different areas including the property, garden or communal areas. In certain circumstances additional storage may have been acquired such as rented garages, storage units, friends’ sheds etc.
4. Types of hoarding

There are typically three types of hoarding:

**Compulsive / Generalist hoarding:**
Clinical compulsive hoarding - 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, human waste or papers. This will often manifest from an emotional attachment to inanimate items creating conflict in disposal.

**Bibliomania:** Books and written information – such as newspapers, magazines and articles, and to include DVDs and videos, and Data Hoarding. 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.

**Animal hoarding:** 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 pests.

In addition the following maybe useful in considering the type of hoarding taking place:

**Instrumental saving pattern** – ‘What if I or someone else needs it’

**Sentimental saving** – ‘It means so much’

**Aesthetic saving** – ‘I love it’

**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 can experience comfort in buying or saving things which may relieve the anxiety and fear they feel. Any attempt to discard the hoarded items can induce feelings varying from mild anxiety to a panic attack with sweats and palpitations.

Long-term behaviour pattern: possibly developed over many years where comfort is attained by buying, and a value attributed to the item through the process of purchasing, then experiencing anxiety at the idea of merely throwing away such item.

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. This can cause a distraction from the real issue by deflecting and raising other concerns eg pest control.

Unrelenting standards: people who hoard will often find faults with others, require 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 and not engage well with any agency due to feelings of shame.
Large number of pets: people who hoard may have a large number of animals that can be a source of complaints by neighbours due to insanitary conditions that the large number of animals creates.

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 dishevelled, 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.

A person who hoards may see nothing wrong with their behaviour and have little insight on the impact it has on them and others.

Please refer to the clutter image rating which is widely used around the world Appendix E. This was initially developed by The International OCD Foundation and were originally a study by Frost RO. Steketee G, Tolin DF, Renaud S. Development and validation of the Clutter Image Rating. Journal of Psychopathology and Behavioural Assessment 2008; 32: 401-417
5. Legislation relevant to hoarding behaviours

- Human Rights Act 1998
- Care Act 2014
- National Health Service Act 2006
- Mental Capacity Act 2005
- Inherent Jurisdiction of the High Court
- Mental Health Act 1983
- Public Health Act 1936, Environmental Protection Act 1990
- Police and Criminal Evidence Act 1984
- Rights of Entry (Gas and Electricity Boards) Act 1986
- Animal Welfare Act 2006
- Prevention of Damage by Pests Act 1949
- Housing Act 2004
- Refuse Disposal (Amenity) Act 1978
- Coroners and Justice Act 2009
- Common Law – Gross negligence manslaughter
- Wilful Neglect (Mental Capacity Act 2005, s44)
- Building Act 1984
- Public Health (Control of Disease) Act 1984
- Crime and Disorder Act 1998

The Care Act 2014

The Care Act 2014 builds on recent reviews and reforms, replacing numerous previous laws, to provide a coherent approach to adult social care in England. 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 local people.

The Care Act introduced three new indicators of abuse and neglect to Adult Safeguarding. The most relevant to this framework is self-neglect. The guidance states; this covers a wide range of behaviour neglecting to care for one’s personal hygiene, health or surroundings and includes behaviour such as hoarding. In practice, this means that when an adult at risk has care and support needs, their case may require a safeguarding enquiry.

The following six key principles underpin all adult safeguarding work:

1. **Empowerment**: people being supported and encouraged to make their own decisions and give informed consent
2. **Prevention**: it is better to take action before harm occurs
3. **Proportionality**: the least intrusive response appropriate to the risk presented
4. **Protection**: support and representation for those in greatest need
5. **Partnership**: local solutions through services working with their communities – communities have a part to play in preventing, detecting and reporting neglect and abuse

Codes of Practice

- Mental Capacity Act 200523
- Mental Health Act 1983 (revised 2007)24
- Office of the Public Guardian (Mental Capacity Act)25
- Department of Health (Mental Capacity Act Deprivation of Liberty Safeguards)26
- Policy Documents
- Multi-agency Policy, Procedures and Guidance (Southampton, Hampshire, Isle of Wight and Portsmouth)
6. **Accountability**: accountability and transparency in safeguarding practice

Partner agencies therefore have a vital role in the early recognition and prevention of self-neglect and hoarding. They have a responsibility to recognise and act upon the risk factors associated with self-neglect. Early intervention is the most effective means to manage cases where self-neglect/hoarding is suspected or there are concerns regarding a vulnerable person’s disengagement despite persistent welfare concerns. Experience has demonstrated that delaying intervention regarding a person’s circumstances has become severe, is more costly, both in terms of the person’s wellbeing and public resources.

The initial intervention from Adult Social Care would be to offer an individual an assessment of their care and support needs; this may avoid the need to enter formal Safeguarding procedures. An initial response should take into account the underlying MSP principles, but it should be understood that it is not necessary to obtain consent to share information or conduct enquiries where there is a significant risk of harm or where the behaviours pose a risk of harm to others.

It should be noted that self-neglect/hoarding may not prompt a section 42 enquiry. A judgement should be made on a case by case basis. A decision on whether to respond is required under safeguarding and will depend on the adult’s ability to protect themselves by controlling their own behaviour. There may come a point when they are unable to do this without external support. The multi-agency Risk Management Framework included at Appendix C to this guidance (and available at the following link) provides an effective tool for responding to cases of self-neglect and persistent welfare concerns where a section 42 enquiry is not being undertaken.


**Mental Capacity 2005**

When working with people with hoarding behaviour it is important to remember that capacity is assumed unless it has been formally assessed otherwise by a person qualified to make that decision. 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 and these are legal requirements of the Act:

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 the person’s 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.
The core principles of the MCA 2005 clearly identify that professionals should always start from an assumption of capacity. Doubts about a person’s capacity may arise because of: their behaviour, circumstances or concerns raised by a third party.

When a person’s hoarding behaviour poses a serious risk to their health and safety, professional intervention may be required. With the exception of statutory requirements, the intervention or action proposed must be a proportional response.

Although the person maybe considered to have poor mental health this does not mean that they have issues with capacity.

Capacity can fluctuate and when someone’s capacity is being assessed, there is a test which in brief is as follows:

- Does the person have an impairment of the mind or brain or is there some sort of disturbance affecting the way their mind or brain works (whether the impairment or disturbance is temporary or permanent)?
- If so, does the impairment or disturbance mean that the person is unable to make the decision in question at the time it needs to be made?

Consequently, a person can have mental capacity to carry out certain acts or make certain decisions but lack capacity for others.

Section 67 of the Care Act imposes a duty on the local authority to arrange an independent advocate to facilitate an individual’s involvement in their assessment, care planning, review and any safeguarding enquiry or SAR where they have ‘substantial difficulty’ participating.

‘Substantial difficulty’ is explained by reference to the 4 stage test of decision making under s.3 MCA [see s67(4) CA and pg. 6.33 guidance]. The duty to appoint an independent advocate falls away if the local authority is satisfied that an appropriate person, who is not professionally engaged in the care or treatment for that individual, is available and willing to support the adult. In addition, the person consents to the appropriate person acting or, where they lack capacity, it is considered in their best interests for that person to act. If the person is believed to lack capacity to agree to support or execute agreed actions because of impairment to the mind or brain, then there is a duty to appoint an independent advocate under s35 MCA.

The advocate or appropriate person must take an active role, assisting the adult to understand their rights and challenge decisions they believe are inconsistent with local authority’s duties to promote wellbeing. Where the person lacks capacity on the specific decision then the advocate or appropriate person advises the local authority to identify the person’s ‘best interest’ under s4 Mental Capacity Act 2005.

Public Health Act 1936 and Environmental Protection Act 1990

12.2 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.

Town and Country Planning Act 1990
Section 215: Power to require proper maintenance of land

(1) If it appears to the local planning authority that the amenity of a part of their area, or of an adjoining area, is adversely affected by the condition of land in their area, they may serve on the owner and occupier of the land a notice under this section.

(2) The notice shall require such steps for remedying the condition of the land as may be specified in the notice to be taken within such period as may be so specified.

(3) Subject to the following provisions of this Chapter, the notice shall take effect at the end of such period as may be specified in the notice.

(4) That period shall not be less than 28 days after the service of the notice.

12.3 For further guidance and information please refer to the Chartered Institute of Environmental Health Officers Professional Practice Note: Hoarding and How to Approach it:

[link](https://www.cieh.org/media/1248/hoarding-and-how-to-approach-it-guidance-for-environmental-health-officers-and-others.pdf)
6. Fire safety

Hoarding can be a fire hazard and many occupants are at greater risk of death or serious injury from fires in these homes. Often, blocked exits prevent escape from the home. In addition, many people who are hoarding are injured when they trip over things or when materials fall on them. Responding firefighters can be put at risk due to obstructed exits, falling objects, and excessive fire loading that can lead to structural collapse. Hoarding makes fighting fires and searching for occupants far more difficult.

Also, those living adjacent to a hoarder can be quickly affected when a fire occurs, due to increased smoke and fire conditions.

A multi-agency approach to sharing Information about Hoarding enables Hampshire Fire and Rescue Service as well as Isle of Wight Fire and Rescue Service to enforce relevant legislation and to be compliant with the provisions within the Fire and Rescue Services Act 2004. This information sharing also strengthens the operational risk assessment when dealing with Incidents and fires where hoarding is present. HFRS and IWFRS will facilitate special measures when a hoarding case is discovered to mitigate the risks described above.

Hampshire Fire and Rescue Service and Isle of Wight Fire and Rescue Service are committed to reducing the risk of death or serious injury to anyone living, working or visiting our communities. As a Service they undertake Safe and Well visits, carried out by their Community Safety Officers and operational crews. This visit is intended to provide advice and equipment to enable the occupier to be alerted to any fire, then quickly and safely evacuate. Any agency can send a referral to Hampshire Fire and Rescue Service or Isle of Wight Fire and Rescue Service for a Safe and Well visit to be carried out for a vulnerable person, to make them safer from fire. A referral can be made by following the below links: https://www.hantsfire.gov.uk/keeping-safe/loveyourhome/safeandwell/safe-and-well-assessment/

fire.communitysafety@iow.gov.uk

In the event where an individual has not consented for HFRS or IWFRS to complete a Safe and Well visit and conditions within a property are identified to be at level 6 or above (in accordance to Appendix E - Clutter Rating Index), practitioners are encouraged to continue with making a referral to HFRS or IWFRS. This will enable HFRS or IWFRS to apply a ‘flag’ against the address of which will better prepare responding crews to any risks they are likely to encounter at the property. The ‘flag’ will be a temporary arrangement and subject to regular review until such time the presented risks have been reduced and are being appropriately managed.

Hampshire Fire and Rescue Service as well as Isle of Wight Fire and Rescue Service are 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.
7. Safeguarding children and adults

**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 and, in some cases, leading to the neglect of a child, which is a safeguarding issue.

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 concern must always be raised.

There is the potential that offences of child neglect may be ongoing and referrals through should be considered for these to be assessed:

**IN AN EMERGENCY CONTACT THE POLICE BY DIALING 999**

**Southampton:**
Telephone (office hours): 023 8083 3336
Out of hours: 023 8023 3344

**Hampshire:**
Phone 0300 555 1384 during office hours 8.30am to 5pm Monday to Thursday, 8.30am to 4.30pm on Friday
Phone 0300 555 1373 at all other times to contact the Out of Hours service

**IOW:**
Isle of Wight Children’s Services: 0300 300 0117 (24 hours).

**Portsmouth:**
Phone 023 9268 8793 (office hours)
At all other times, phone the out-of-hours service on 0300 555 1373

**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.

When concerns are highlighted refer to your own Safeguarding Policy and consider using the Hampshire, Southampton, Portsmouth and IOW Safeguarding Adults Board (4LSAB) Multi-agency risk management framework Appendix C.

Safeguarding is ‘everybody business’ as in line with the Care Act 2014. It is therefore key that any agency involved provide guidance and support to the individual that they are working with, as they are seen at that time as the most appropriate agency involved. This would ensure the person has relevant information to keep themselves safe and make
informed choices. All agencies have that responsibility and the Care Act promotes Multi-agency working. Contacts to raise a concern about an adult who is believed to have care and support needs and is at risk of or experiencing abuse or neglect (including self-neglect):

**IN AN EMERGENCY CONTACT THE POLICE BY DIALING 999**

**Southampton:**
Health and Social Care - 023 8083 3003

**Hampshire:**
Adult Health and Care - 0300 555 1386
Agencies can also contact the Hampshire Safeguarding Advice line on 01962 847214 this is managed by the Hampshire MASH team who can provide further advice and guidance. This line is for advice only and referrals are not accepted via this number.

**IOW:**
Adult Social Care Safeguarding - 01983 814980

**Portsmouth:**
Adult Safeguarding - 023 9268 0810.

The person can be referred in for either further signposting or assessment of needs or if person is a subject of abuse, a Safeguarding concern can be raised.

If it is deemed that the safeguarding concern meets threshold for section 42 duties according to The Care Act 2014, this will be sent to the appropriate community team for further coordination and establishing individual’s views and wishes, according to legal obligation of Making Safeguarding Personal.

An ‘adult at risk’ may also be living with a person who is hoarding in a property. There may be a safeguarding concern about the adult if they are at risk of harm due to the way the person who is hoarding is choosing to live in the property. If in doubt, discuss the issue with a manager or contact the local authorities' safeguarding team.
8. 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 individuals that have recognised hoarding behaviours will receive support from agencies in line with their qualifying criteria.

Any professional working with individuals who may have, or appear to have, hoarding behaviours should ensure they complete an assessment of the situation and use the Clutter Image Rating in the Hoarding Tool Kit to decide what steps to take.

Often the response can be to advise the relevant agencies involved to co-ordinate the Multi-agency risk management framework. This guidance is designed to support cases relating to adults where there is a high level of risk but the circumstances may sit outside of the statutory adult safeguarding framework but for which a multi-agency approach would be beneficial. This should be read in conjunction with the Hampshire and Isle of Wight 4LSAB Multi-agency safeguarding policy and guidance https://www.iowsab.org.uk/information-for-professionals/

Evidence of animal hoarding at any level should be reported to the RSPCA as well as other relevant agencies.
9. The hoarding journey – what to consider

Recognising someone with a hoarding disorder means you need to determine if a person has good, fair or poor insight. Consider also if they have absent (delusional) insight or detached insight with assigned blame (i.e. it’s someone else’s fault).

Further things to consider:

- Initial concern of hoarding
- Hoarding assessment
- Fire risk and environmental impact
- Personal risks and care needs assessment
- Self-neglect safeguarding
- Multi-agency response
- Action plan
- Care and support
- Funding and resources
- Mental capacity
- Enforcement
- Monitoring

What to do:

- Gather as much information as is reasonable to support your understanding of the case.
- Don’t judge the person focus on the situation.
- Rational arguments may not help such as challenging the person to find a specific object.
- Use Motivational Interview tools such as ‘rolling with resistance’ allowing the person to express how they feel.
- Try to empathise and see the situation through the person’s eyes.
- Be congruent, honest about your position and part to play in what may now happen and the goals you need to achieve, time scales and consequences.
- Find out if there are people to help, such as friends/family.
- Know what help is available – go with the knowledge of who can support the situation.
10. Funding and cost implications

Managing a hoarding case can be very costly in staff time, specialist support, court costs and ultimately clearing the property. Consider funding strategies for Managing cost implications.
11. Appendix

Appendix A. Data Protection Act 1998

Appendix B. The General Data Protection Regulation (GDPR)

Appendix C. Multi-agency risk management framework

Appendix D. Glossary of legal powers

Appendix E. Clutter image rating
### Appendix D. Glossary of legal powers

<table>
<thead>
<tr>
<th>AGENCY/SERVICES</th>
<th>LEGAL POWER AND ACTION</th>
<th>CIRCUMSTANCES REQUIRING INTERVENTION</th>
</tr>
</thead>
</table>
| Environmental Health     | Section 83 Public Health Act 1936 Filthy /Unwholesome premises which are prejudicial to health or verminous.  
Service of Notice requiring clearance/cleansing/pest control treatment. No appeal.  
Council has powers to enter premises by warrant if reasonable access not given after giving notice. This will be to assess the conditions or carry out works in default. Possible prosecution and Council can recover expenses for works in default. |
|                          | Where hoarded materials result in filthy, unwholesome or vermin infested premises. This is often where there is a lack of engagement or co-operation of occupier.  
There must be likelihood of adverse health effect to occupant or rodents or insects present. There may also be complaints from neighbours which must be investigated by the Council.                                                                                                               |                                                                                                                                                                                                                                                                                                                                               |
| Environmental Health     | Section 79/80 Environmental Protection Act 1990 Statutory Nuisances Service of Abatement Notice requiring action to remove nuisance and/or prevent a recurrence.  
Appeal against notice possible.  
Warrant powers similar to above.  
Possible prosecution and Council can recover expenses for works in default.  
Injunctive proceedings may be taken.                                                                                              | Council has a legal duty to investigate complaints of statutory nuisance and must take action if nuisance proven.  
The premises must be in such a state that they are prejudicial to healthy or a nuisance to neighbours. This may be from condition of the premises, accumulations, deposits or even animals kept in unsanitary conditions.  
Intervention often prompted by complaints from neighbours.  
For exceptional situations where widespread nuisance to neighbours continues after intervention and usually after service of notice.                                                                                                                      |
<table>
<thead>
<tr>
<th>AGENCY/SERVICES</th>
<th>LEGAL POWER AND ACTION</th>
<th>CIRCUMSTANCES REQUIRING INTERVENTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environmental Health</td>
<td>Housing Act 2004 Housing hazards such as Domestic Hygiene, Pests and Vermin, Excess Cold, Fire. Service of Improvement or Awareness Notice usually on owner of premises requiring removal of hazards. Council can charge for costs incurred serving notices. Appeal provisions. Possible prosecution and Council can recover expenses for works in default</td>
<td>Relates to possible health and safety affects on occupier. Hoarding can lead to fire hazards from accumulated materials. Due to hoarding, there may be a lack of repair/maintenance of property leading to other health effects on occupier such as lack of heating (excess cold) or washing/sanitary facilities.</td>
</tr>
<tr>
<td>Environmental Health</td>
<td>Prevention of Damage by Pests Act 1949 (section 4) Service of Notice to keep land free from rats or mice No warrant powers Possible prosecution and Council can recover expenses for works in default</td>
<td>Powers usually used for accumulations of rubbish or items attracting/ harbouring rodents on private land. This is usually used for external parts of property e.g. gardens.</td>
</tr>
<tr>
<td>Police</td>
<td>Power of Entry (S17 of Police and Criminal Evidence Act) Person inside the property is not responding to outside contact and there is evidence of danger.</td>
<td>Information that someone was inside the premises was ill or injured and the Police would need to gain entry to save life and limb.</td>
</tr>
<tr>
<td>AGENCY/SERVICES</td>
<td>LEGAL POWER AND ACTION</td>
<td>CIRCUMSTANCES REQUIRING INTERVENTION</td>
</tr>
<tr>
<td>----------------</td>
<td>-------------------------</td>
<td>-------------------------------------</td>
</tr>
</tbody>
</table>
| **Fire and Rescue** | Enforcement of the Regulatory Reform (Fire Safety)Order 2005  
The Fire Service can attend and carry out a Safe and Well visit, working with the occupier to reduce the risk in their home and establish means for raising the alarm in case of fire, and establishing safe escape routes for the occupier(s).  
Under exceptional circumstances and only where the hoarding causes a risk to other occupiers will the Fire and Rescue Service consider a prohibition or restriction under Article 31 of the Fire Safety Order. An example would be a ground floor dwelling within a block of flats. | Any hoarder in need of fire safety advice for their dwelling or place of residence would be entitled to a Safe and Well visit.  
Only when all other, directly applicable legislation has been exhausted, would the Fire and Rescue Service consider an Article 31 Notice. |
| **Animal Welfare agencies such as RSPCA/Local authority e.g. Environmental Health/DEFRA** | Animal Welfare Act 2006 Offences (Improvement notice)  
Education for owner a preferred initial step, Improvement notice issued and monitored, If not complied can lead to a fine or imprisonment | Cases of Animal mistreatment/ neglect.  
The Act makes it not only against the law to be cruel to an animal, but that a person must ensure that the welfare needs of the animals are met.  
| **Local Authority/ Adult Social Care** | S.46 of the Care Act 2014 Abolition of local authority’s power to remove persons in need of care  
Section 47 of the National Assistance Act 1948 (which gives a local authority power to remove a person in need of care from home) ceases to apply to persons in England. | The Local Authority no longer have the power to remove a person from their home /place they are staying.  
<table>
<thead>
<tr>
<th>AGENCY/SERVICES</th>
<th>LEGAL POWER AND ACTION</th>
<th>CIRCUMSTANCES REQUIRING INTERVENTION</th>
</tr>
</thead>
</table>
| Mental Health Services | Mental Health Act 1983 Section 135(1) | Evidence must be laid before a magistrate by an AMHP that there is reasonable cause to believe that a person:  
- Is suffering from mental disorder, and is being  
- Ill-treated, or  
- Neglected, or  
- Being kept other than under proper control, or  
- If living alone is unable to care for self  
And that the action is a proportionate response to the risks involved. |
| | Provides for a police officer to enter a private premises, if need be by force, to search for and, if though fit, remove a person to a place of safety if certain grounds are met. The police officer must be accompanied by an Approved Mental Health Professional (AMHP) and a doctor.  
In general practice an AMHP would apply for the 135(1) warrant at the appropriate Magistrates Court.  
Section 135(1) permits removal to a place of safety for up to 72 hours with a view to the making of an application under the provisions of the Mental Health Act or other arrangements for the persons care or treatment.  
NB. Place of Safety is usually the mental health unit, but can be the Emergency Department of a general hospital, or anywhere willing to act as such. | |
<table>
<thead>
<tr>
<th>AGENCY/SERVICES</th>
<th>LEGAL POWER AND ACTION</th>
<th>CIRCUMSTANCES REQUIRING INTERVENTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health Services</td>
<td>Section 4 of the Mental Health Act 1983. Admission for assessment in cases of emergency. In any case of ‘urgent necessity’. The criteria for detention mirror Section 2 (below) but Section 4 may be used in cases of emergency where it has not been possible to secure an assessment by a second doctor. This section expires after 72 hours unless a second medical recommendation is received within this time period.</td>
<td>In any case of ‘urgent necessity’ an application may be made by an AMHP or Nearest Relative and founded on one medical recommendation made by, if practicable, a doctor with previous knowledge of the person or a Section 12 approved doctor.</td>
</tr>
<tr>
<td>Mental health Services</td>
<td>Section 2 of the Mental Health Act 1983. Admission to hospital for assessment. Application can be made by an AMHP or Nearest Relative based on 2 medical recommendations in the prescribed form by 2 independent doctors. The person may be detained for a period of up to 28 days.</td>
<td>The following grounds must be met: The person is suffering from a mental disorder of a nature or degree which warrants the detention of that person in hospital for assessment (or assessment followed by treatment). That the person ought to be detained in the interests of his/her own health or safety or with the view to the protection of others.</td>
</tr>
</tbody>
</table>

Multi-Agency Hoarding Guidance 2019
<table>
<thead>
<tr>
<th>AGENCY/SERVICES</th>
<th>LEGAL POWER AND ACTION</th>
<th>CIRCUMSTANCES REQUIRING INTERVENTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health Services</td>
<td>Section 3 of the Mental Health Act 1983</td>
<td>The following grounds must be met:</td>
</tr>
<tr>
<td></td>
<td>Admission to hospital for treatment. Application can be made by an AMHP or Nearest Relative and is based on 2 medical recommendations in the prescribed form by 2 independent doctors.</td>
<td>That the person is suffering from a mental disorder of a nature or degree which makes it appropriate for him/her to receive medical treatment in a hospital.</td>
</tr>
<tr>
<td></td>
<td>The person may be detained initially for a period of up to 6 months for the purposes of treatment.</td>
<td>That it is necessary for the health or safety of the person or for the protection of others that he/she should receive this treatment and it cannot be provided unless the person is detained under this section.</td>
</tr>
<tr>
<td></td>
<td>Section 17a of the amended Mental Health Act</td>
<td>That appropriate treatment is available for him/her.</td>
</tr>
<tr>
<td>Community Treatment Order</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

|   | | |

Multi-Agency Hoarding Guidance 2019
### Grounds for seeking possession, which may relate to Hoarding Conditions | The Housing Act 1988 (amended by the Housing Act 1996)
--- | ---
**Ground 12**  
Breach of Tenancy | Any obligation of the tenancy (other than one related to the payment of rent) has been broken or not performed.

It is, of course for the Court to decide in each case whether possession should be granted (and, if so, whether the possession order should be suspended) but it is much likelier to grant possession if the breach is still in progress.

**Ground 13**  
Deterioration of premises | The condition of the dwelling-house or any of the common parts has deteriorated owing to acts of waste by, or the neglect or default of, the tenant or any person residing in the dwelling-house and, in the case of an act of waste by, or the neglect or default of, a person lodging with the tenant or a sub-tenant of his, the tenant has not taken such steps as he ought reasonably to have taken for the removal of the lodger or sub-tenant.

**Ground 14**  
Nuisance | The tenant or a person residing in or visiting the dwelling-house:
(a) Has been guilty of conduct causing or likely to cause a nuisance or annoyance to a person residing, visiting or otherwise engaging in a lawful activity in the locality, or
(b) Has been convicted, or
   (i) Using the dwelling-house or allowing it to be used for immoral or illegal purposes, or
   (ii) An arrestable offence committed in, or in the locality of, the dwelling-house.
<p>| <strong>Landlord Related Housing Support for Hoarding</strong> | Social landlords must also be mindful of any potential Human Rights Act defence under Article 8 (right to private and family life, home and correspondence). Again this hangs on proportionality and the court will only have to consider whether the making of a possession order is proportionate if the defence is raised by the occupier and it crosses the high threshold of being seriously arguable. This will be more relevant with possession claims based on mandatory grounds – such as Section 21 notices. With discretionary grounds, the court will assess the proportionality of the eviction as part of its judicial function looking at what is reasonable in all the circumstances. |
| <strong>Landlord</strong> | <strong>Acceptable Behaviour Contracts</strong> | Will need the agreement and co-operation of the tenant and it may also be possible to enlist the assistance of family and friends to ensure that the purpose of the ABC is understood and complied with. A term of the ABC may be to allow officers or support of a third person giving routine access to the property; |
| <strong>Landlord</strong> | <strong>Injunctions</strong> | An injunction can be an effective remedy as it should either force the tenant to deal with the problem or may allow the landlord to enter the property and resolve the issues. However, if there is a real possibility that the tenant will lack the capacity to understand or comply with an injunction then it will not be granted. There must be solid evidence to support an application for an injunction; also please note if an injunction order is breached, the court will view it as contempt of court and the punishment for this is either a fine or imprisonment. It is unlikely to result in any order permitting the landlord to force entry to the property and resolve the hoard. It is however good evidence to show a court that you have tried a lesser remedy than seeking a possession order to resolve the situation. |</p>
<table>
<thead>
<tr>
<th>Landlord</th>
<th>Possession proceedings</th>
<th>Such proceedings can be complicated by defence arguments relating to capacity and The Equality Act 2010 so these matters must have been dealt with prior to issue. The case will be decided on the question of reasonableness and it is essential that a landlord’s policies and procedures have been complied with so as to demonstrate that a possession order is necessary and a proportionate response to the hoarding behaviours displayed and is a measure of the last resort/no lesser remedy is likely to resolve the issue. ** The threshold will be crossed in only a small number of cases and the question is whether the making of a possession order is a proportionate means of achieving a legitimate aim. As such, to show this, evidence of the risk to the residents/neighbours health, safety and wellbeing will be paramount.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environmental Health (Local Authority Power Only)</td>
<td>Local Authority statutory powers</td>
<td>Enforcement using the Local Authority’s statutory powers under the Public Health Act 1936 and Environment Protection Act 1990 which are concerned with health and amenity. Potentially the court can grant a power to force access to the property.</td>
</tr>
<tr>
<td>Mental Health Services</td>
<td>Court of Protection for tenants who lack mental capacity</td>
<td>In cases where the tenant is found to lack capacity, the Court of Protection could (not always – sometimes this would take too long to process) be used instead of possession proceedings. The Court of Protection has extensive decision-making powers on behalf of vulnerable individuals which includes personal welfare matters. There is case law to demonstrate that this can be a very effective with the potential for an order to be effective for a unlimited amount of time i.e. a tenant is decanted every 6 months to allow the landlord to remove hoarded goods and clean a property so as to deal with fire hazards, smells, pests etc. The test that the Court of Protection applies is whether a proposed decision or course of action is in the person’s ‘best interests’ in all the circumstances. The Court of Protection will expect evidence from most parties involved in the care and wellbeing of the resident to support the application and give evidence of the same.</td>
</tr>
</tbody>
</table>
| Social Care (Local Authority Power Only) | Safeguarding and Self Neglect | Safeguarding Enquiry  
Care Needs Assessment  
Multi-Agency Proportionate Response |
Appendix E. Clutter image rating


The Clutter image rating tool can support practitioners to assess an individual’s case.

**Level 1 (numbers 1 – 3)** household environment is considered standard and no specialised assistance is needed. If the resident would like assistance at this stage or feels they are declining towards a higher clutter scale, appropriate referrals may be considered.

**Level 2 (numbers 4 – 6)** household environment requires professional assistance to resolve the clutter and any maintenance issues that may have occurred. This support may need to continue with follow-up appointments to ensure escalation hasn’t taken place. Referrals to agencies or services may be required at this stage depending on the nature of the hoarding behaviour.

**Level 3 (numbers 7 – 9)** household environment will require intervention with a collaborative multi-agency approach with the involvement from a wide range of 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 behaviour and the risks it possesses.
Clutter Image Rating Scale - Bedroom

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

1 2 3

4 5 6

7 8 9
Clutter Image Rating Scale - Lounge

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

1  2  3

4  5  6

7  8  9
Clutter Image Rating Scale – Kitchen

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

1 2 3

4 5 6

7 8 9