

Hoarding Procedure

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1. Introduction

Hoarded properties are created by an overwhelming desire by a person to collect items and an inability to discard things that may seem useless, to such a point that the collections cause stress and start impacting a person's health, wellbeing, and relationships and creates a health and fire risk within the property. As well as impact on the individual hoarding can also impact on internal resources, Bury Councils asset and have a negative impact within our communities.

This procedure provides guidance to Bury Council staff when working with a tenant and their hoarded property to ensure we are keeping the tenant engaged at all stages to facilitate positive, sustainable outcomes and a safe home.

The procedure works in line with Housing Services Tenancy Support Strategy taking on a trauma and informed approach when dealing with tenants with hoarding tendencies.

Bury Council's Housing Services have adopted an Eyes Wide Open approach in managing our communities. All staff and contractors are responsible for identifying properties where hoarding may

be occurring. Reports are to be made to housingenquiries@bury.gov.uk . See Eyes Wide Open policy for further information.

2. Aims of the procedure

The aims of the procedure are to:

- Proactively identify and take action to address hoarded properties within our communities
- Deal with incidents of hoarding in a structured, trauma informed, evidence-based way
- Maximise the use of existing services and resources by working with partners and internal colleagues
- Ensure that any formal solutions are tailored to meet the needs of the individual tenant.

3. What is hoarding

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

- The amount of clutter interferes with everyday living. For example, the person is unable to use their kitchen or bathroom and cannot access rooms
- The clutter is causing significant distress or negatively affecting the quality of life of the person or their family. For example, they become upset if someone tries to clear the clutter and their relationship suffers

Hoarding disorders are challenging to treat because many people who hoard frequently do not see it as a problem or have little awareness of how it's affecting their life or the lives of others.

Some may realise they have a problem but are reluctant to seek help because they feel extremely ashamed, humiliated, or guilty about it. It's important to encourage a person who is hoarding to seek help, as their difficulties discarding objects can not only cause loneliness and mental health problems but also pose a health and safety risk. If the tenant is not supported and the correct measures are not put in place, then the problem will probably never go away.

The reasons why someone begins hoarding are not fully understood.

It can be a symptom of another condition. For example, someone with mobility problems may be physically unable to clear the huge amounts of clutter they have acquired, and people with learning disabilities or people developing dementia may be unable to categorise and dispose of items.

Mental health problems associated with hoarding include:

- severe depression
- psychotic disorders, such as schizophrenia
- obsessive compulsive disorder (OCD)

In some cases, hoarding is a recognised mental health diagnosis and often associated with self-neglect. These people are more likely to:

- Live alone
- Be unmarried
- Have had a deprived childhood, with either a lack of material objects or a poor relationship with other members of their family
- Have a family history of hoarding
- Have grown up in a cluttered home and never learned to prioritise and sort items

Many people who hoard have strongly held beliefs related to acquiring and discarding things, such as: "I may need this someday" or "If I buy this, it will make me happy". Others may be struggling to cope with a stressful life event, such as the death of a loved one.

Attempts to discard things often bring up very strong emotions that can feel overwhelming, so the person hoarding often tends to put off or avoid making decisions about what can be thrown out. Often, many of the things kept are of little or no monetary value and may be what most people would consider rubbish.

The person may keep the items for reasons that are not obvious to other people, such as for sentimental reasons, or feeling the objects appear beautiful or useful. Most people with a hoarding disorder have a very strong emotional attachment to the objects.

4. Initial Referral

In all referrals an assessment of the property and a support plan is complete with the tenant by a Independent Living or Housing Officer known in this document as Officer. See [Appendix 1 Assessment guidelines](#) On completion the Officer should use the guidance below and their professional judgement to identify the level of risk at the property and take photographs to support their decision.

It is key we build rapport with the tenant. As many hoarders feel shame due to their property condition, we need to acknowledge taking photographs may cause distress to the tenant so might not always be possible during the first visit.

5. Identifying the level of hoarding

It's important to categorise the level of hoarding and therefore identifying the level of risk within a property. This will enable us to manage the risk by putting relevant actions in place to reduce the risk and improve the quality of life for the tenant.

This procedure will provide guidance to staff on how to manage a case at each level. However, we need to acknowledge all tenants are different and not all cases will fit into the following scenarios. Other options may need to be considered and justifications made if we have not followed the recommended actions.

Low Risk – Deteriorating hygiene and clutter

The property may be disorganised, slightly unsanitary but safe.

The tenant may begin avoiding visitors due to embarrassment, stress, or anxiety regarding the condition of their property. At this stage, the tenant will have an inconsistent housekeeping routine, but likely an awareness that their home is deteriorating in hygiene.

There may be few indicators that this level of hoarding is occurring because the condition may be hidden due to a lack of visible clutter, although most appropriate storage areas in the house could be full of items. For example, cabinets, closets, storage sheds and bookshelves are full. The tenant may find throwing items away difficult and does an unreasonable amount of shopping for items that are not needed. Clutter may be present in small amounts, but it's temporary and recognised by the tenant.

The space may have the following conditions:

- Light clutter but all stairways, doors, and windows are accessible
- An appropriate number of pets live in the property but may have concerns over large amounts of uncleared faeces.
- Fire and carbon monoxide detectors are installed
- One major appliance is out of order
- Little ventilation due to clutter and unpleasant odours
- Clutter has accumulated in one or more rooms
- Dirty dishes, laundry, and mould growing in different spaces



Medium Risk – Excessive clutter, unsanitary conditions, and unusable rooms

This is the threshold between a messy, cluttered environment, and one that may be disorganised, unhygienic and overwhelming.

The tenants behaviour may be changing. They may have become more secluded, become defensive of their living situation, rationalise their situation as they cannot see any potential dangers within their home or struggle to throw items away that clearly have little or no value. Tenants usually are suffering from a mental health crisis and cannot see that their situation is dangerous or unsanitary. They may go weeks without bathing, and they will likely show anxiety about needing items in the future or become distressed when others touch and suggest removing their belongings.

Physical signs in the house include:

- Clutter and household items accumulating outside of the home
- Clutter preventing entrance to stairs, rooms, and exits
- Two or more household appliances are in disrepair
- There is an excessive number of pets
- Living spaces have been neglected and cannot be tidied up
- Multiple rooms have become unusable
- Accumulation of excessive dust and dirty clothing

- Extremely soiled flooring
- Noticeable odours exist in the home
- Noticeable mould and mildew throughout the home
- Outstanding repairs and damage to the home
- At least three areas with excessive and aging animal waste
- Spoiled and rotting food in kitchen areas
- Fleas, lice, bed bugs and other major pest infestations



High Risk – Fire hazards, no utilities and/or running water

The highest stage on the scale indicates a severe hoarding condition and the tenant may struggle to live in their own home due to the extreme indoor clutter making the main living spaces unusable.

The tenant will be attached to their belongings and disposing of items will be very distressing. The property will be a risk for tenants due to unhygienic conditions, may be a risk to neighbouring properties as it's a potential fire risk due to the high volume of items within the home and especially if the tenant uses candles or an electric heater.

Physical signs in the house includes.

- Most spaces in the home are inaccessible and the tenant may live in one room
- Clutter on every surface, hallway and floorspace
- No access to bathroom to bathe or in some cases to use the toilet
- Unable to use the kitchen due to clutter and unhygienic living conditions
- Several appliances are broken and has been for some time
- No ventilation and noticeable odour
- Property is in major disrepair and is impacting on the tenants quality of life

- Disconnected water and/or electrical and gas services due to neglect
- Excessive mould and mildew
- Concerns over animal welfare and tenants health due to harmful bacteria



6. Actions to be undertaken

In all cases it's important to work towards improving the property, reducing any risk, and improving the quality of life for our tenant.

It is the role of the Officer to ensure the property does not deteriorate and the condition improves over time. We have identified actions to be taken under each risk level. The Officer will lead on ensuring these actions are carried out in a timely manner.

Before each visit the Officer must review their own safety ensuring lone working practices are adhered to and PPE is used if needed.

If concerns are raised following verbal or physical abuse, then the Zero Tolerance Procedure must be followed, and relevant actions taken to protect staff and contractors.

Bury Council Housing Services acknowledge discussing poor property conditions with a tenant can be difficult especially if the tenant suffers with their mental health and is in denial about the condition. [Appendix 2 Guidance questions](#) are a set of questions you may want to consider when addressing the concerns with a tenant.

Low Risk – Deteriorating hygiene and clutter

This list is not exhausted as other actions will be dependent on the tenant, their current support network and health needs. Additional actions will be identified on completion of the Support Plan. This Support Plan is carried out by the Officer.

Actions to be carried out by the Officer .

- Weekly visits are carried out when a property has been identified
- A Personal Emergency Egress Plan (PEEP) is carried out. See [appendix 3 PEEP](#). Tenant is advised of the potential fire risks within the home. PEEP to be reviewed every month or if tenant situation changes.

- Referral to Fire Service if concerns over potential fire hazard following the completion of the PEEP.
- Assessment of the property carried out during each visit. This will allow us to monitor the condition of the property and ensure improvements are made over time. See [Appendix 1 Assessment Guidelines](#). This document gives guidance on what we should be checking during each visit.
- Support plan carried out and actions related to any identified risks or care needs undertaken and relevant referrals made. This includes any safeguarding concerns for anyone residing at the property.
- Ensure all smoke alarms and carbon monoxide detectors are in working order
- Provide details of support streams open to the tenant. This may be in their communities, via charities and self-help groups.
- Report any repairs and arrange and technical inspection if needed.
- Arrange treatment of any pest infestation

Medium Risk – Excessive clutter, unsanitary conditions, and unusable rooms

The Officer is to complete all actions under Low Risk and also consider.

- Removal of some of the waste as quickly as possible to reduce the risk of attracting vermin and harmful bacteria.
- Work with the tenant on ensuring they have cooking and bathing facilities. At this point we may want to consider a one off clean to assist the tenant with moving forward. This will also reduce the risk of attracting harmful bacteria. See point [12. Property clearance](#) for further guidance.
- Involve GP and adult social care if concerns for welfare
- Arrange a technical property inspection with repairs to identify all outstanding repairs
- Notify Environmental Health

High Risk – Fire hazards, no utilities and/or running water

The Officer is to complete all actions under Low and Medium Risk. In addition to this we need to consider.

- A CAF referral should be made if the tenant does not have support in place from any of the appropriate services.
- Multi agency conference to be held and mental capacity assessment to be considered if not already complete
- Reconnection of facilities to ensure heat and water can be accessed at the property
- Removal of any fire hazard including purchasing items to reduce the risk of fire. For example, replacing an electric fire with an oiled filled heater.
- Ensure the tenant has a safe exit out of the property in the case of a fire.
- Liaising with RSPCA or other animal welfare organisations if concern over neglect.

7. Support plans

Support plans will form the action plan required to ensure the property improves and any risk to the tenant is reduced. They should be realistic, proportionate and tailored to the individual tenant, considering the following factors:

- The tenant's mental or physical condition and their ability to carry out work
- The severity of the condition of the tenant's property
- The risk of serious harm or accident as a result of the condition of the property
- Resources of support agencies involved with the tenant

Support plans should be agreed with the tenant where possible at every stage and photographs taken.

Photographic evidence is very important in all hoarding cases and should be taken at each visit. The tenant should be made aware of the requirement to take photographs and their consent should be obtained and documented. Photographs should be dated and timed and stored with all the other case details.

8. Monitoring

Monitoring and regular visits should take place to review the progress of the support plan. Progress should be recorded on QL and any enforcement action such as a tenancy warning should be sent in writing to the tenant.

The case must be monitored until we feel the tenant no longer requires support and any risk has been removed. Following this the case must be kept under review until we feel the risk of hoarding has been eliminated. This may include, visiting the property more infrequently for example every three months to ensure the condition is maintained to an acceptable level and no there are no fire or health risks at the property.

9. Non- Engagement

Where the Officer is unable to gain access, each attempt must be recorded on QL. If the tenant does not answer the door a calling card should be left at the property.

The Officer must use all means of communication including text, letter and email making the tenant aware they have attempted to visit, and access is needed. The communication with the tenant should include a new appointment time for a repeat visit. The Officer should try to be flexible in working around the commitments of the tenant, but they should remain aware that the tenant may attempt to rearrange visits as a stalling tactic to delay inspections.

Where the tenant has delayed access for 2 weeks the Officer should insist on an appointment giving at least 7 days' notice. This should be sent by all open communication channels stipulating the time and date of the appointment. In this case the Officer should put a note on QL making staff aware that if the tenant contacts they should be put through to the relevant Officer.

In circumstances where we are unable to gain access then it may be necessary to consider enforcement action to gain access. Where there is a high-risk issue, enforcement may be considered at an earlier stage. The case should be discussed with the Housing and Neighbourhood Manager and legal advice should be taken where necessary.

10. Enforcement action

Enforcement action should be proportionate and a 'last resort', or a response to a high-risk case. Cases should be discussed with the Enforcement Officer to determine the most appropriate course of action and legal advice should be sought where appropriate.

Where there is a high risk of fire or personal injury, enforcement action may be taken earlier to protect the tenant and neighbouring properties, but we will continue to try and work with the tenant during this time.

Enforcement action may include:

- Applying for an injunction
- Possession proceedings

11. Property clearance

Where the tenant is willing to engage it may be possible to help them plan and manage their own clearance.

It is important to set small goals to be accomplished stage by stage. These should be prioritised. For example, any instructions following an assessment by GMFR should be followed immediately, other priorities may be re-establishing washing and cooking facilities.

Where the tenant is engaging with the clearance, the Officer should assign timeframe tasks, this should include agreeing items that are to be kept and deciding where they will be appropriately stored, identifying items for disposal and items to be donated to a local charity shop.

It should be recognised that due to the complex nature of hoarding, removal of items without support in place for the tenant will not necessarily resolve the situation in the longer term and they may begin hoarding again. Large scale clean ups may cause extreme anxiety.

Each case will be dealt with on an individual basis. Where there is a serious risk, we may take action in relation to clearance but where there is a high risk an injunction may be required.

Recharges to the tenant must be considered for the costs of the work. The Officer to discuss this with the Housing and Neighbourhood Manager before any works are carried out.

12. Monitoring and record keeping

It is essential that the Officer keep records which are saved on QL of all actions taken, this includes, but is not limited to:

- Attempts to contact the tenant (calls, texts, visits, e-mail etc)
- Details of the condition of the property (including dates, photos, assessments)
- Referrals to internal staff
- Referrals to external agencies
- Support plans developed with the tenant
- Copies of any letters sent
- Evidence that the tenant has adhered to or breached the support plan
- Costs of any works requested, for example, clearance

It is important that all relevant documentation is recorded so that a full and accurate history of actions is available of legal action is taken.

13. Mental capacity

The Mental Capacity Act 2005 provides a statutory framework for people who lack capacity to make decisions for themselves. The act has 5 statutory principles, and these are the values which underpin the legal requirements of the act.

They are:

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

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, any intervention or action proposed must be with the tenant's consent.

In extreme cases of hoarding behaviour, the very nature of the environment should lead professionals to question whether the tenant has capacity to consent to the proposed action or intervention and trigger a capacity assessment. This is confirmed by The MCA code of practice which states that one of the reasons why people may question a person's capacity to make a specific decision is "the person's behaviour or circumstances cause doubt as to whether they have capacity to make a decision" (4.35 MCA Code of Practice, P. 52). Arguably, extreme hoarding behaviour meets this criterion.

Advice must be sought by Mental Health professionals if concerns are raised over a tenant's capacity.

14. Information sharing

Under the Data Protection Act 2018, we all have the responsibility to ensure that personal information is processed lawfully and fairly. All tenants have a right to view any information held about them. Staff should consider this when they are recording information about that person.

All agencies need to ensure that where we do decide it is appropriate to share information about hoarded properties with local fire brigades, we are doing this on a need-to-know basis. All information should be transferred in a secure format.

For the purposes of this procedure information will be shared within and between organisations in line with the principles set out below:

- Adults have a right to independence, choice, and self-determination. Even in situations where there is no legal requirement to obtain written consent before sharing information, it is good practice to do so.
- The person's wishes should always be considered, however, protecting adults at risk establishes a general principle that an incident of suspected or actual abuse can be reported more widely and that in so doing, some information may need to be shared among those involved.

- An organisation should obtain the adult at risk's written consent to share information and should routinely explain what information may be shared with other people or organisations.

The decisions about what information is shared and with who will be taken on a case by-case basis. Whether information is shared and with or without the adult at risk's consent, the information shared should be:

- necessary for the purpose for which it is being shared.
- shared only with those who have a need for it.
- be accurate and up to date.
- be shared in a timely fashion.
- be shared accurately.
- be shared securely

15. Reporting

A report will be taken every 6 months to Senior Leadership team on hoarding cases managed by Housing Services. This report will highlight any concerns and actions being taken out to reduce the risk.

Appendix 1,2,3 Below

Appendix 1 - Assessment Guidelines

Subject	Yes/ No	Checklist
1. Property structure, services & garden area		<ul style="list-style-type: none"> • Assess the access to all entrances and exits for the property. (Note impact on any communal entrances & exits). Include access to roof space. • Does the property have a smoke alarm? • Visual Assessment (non-professional) of the condition of the services (NPVAS) within the property e.g., plumbing, electrics, gas, air conditioning, heating, this will help inform your next course of action. • Are the services connected? • Assess the garden. size, access, and condition.
2. Household Functions		<ul style="list-style-type: none"> • Assess the current functionality of the rooms and the safety for their proposed use. E.g., can the kitchen be safely used for cooking or does the level of clutter within the room prevent it. • Select the appropriate rating on the clutter scale. • Please estimate the % of floor space covered by clutter • Please estimate the height of the clutter in each room
3. Health and Safety		<ul style="list-style-type: none"> • Assess the level of sanitation in the property. • Are the floors clean? • Are the work surfaces clean? • Are you aware of any odours in the property? • Is there rotting food? • Does the resident use candles? • Did you witness a higher-than-expected number of flies? • Are household members struggling with personal care? • Is there random or chaotic writing on the walls on the property? • Are there unreasonable amounts of medication collected? Prescribed or over the counter? • Is the resident aware of any fire risk associated to the clutter in the property?
4. Safeguard of Children & Family members		<ul style="list-style-type: none"> • Does the household contain young people or children?
5. Animals and Pests		<p>Are there any pets at the property?</p> <ul style="list-style-type: none"> • Are the pets well cared for; are you concerned about their health? • Is there evidence of any infestation? E.g., bed bugs, rats, mice, etc.

		<ul style="list-style-type: none"> • Are animals being hoarded at the property? • Are outside areas seen by the resident as a wildlife area? • Does the resident leave food out in the garden to feed foxes etc.
6. Personal Protective Equipment (PPE) and Lone Working		<ul style="list-style-type: none"> • Following your assessment do you recommend the use of Personal Protective Equipment (PPE) at future visits? Please detail • Following your assessment do you recommend the resident is visited in pairs? Please detail

Appendix 2 - Guidance Questions

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

The information gained from these questions will inform a Hoarding Assessment and provide the information needed to alert other agencies.

Most tenants with a hoarding problem will be embarrassed about their surroundings so adapt the question to suit your tenants.

- 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 have you made your home safer to prevent this (above) from happening again?
- How do move safely around your home
- Has a fire ever started by accident?
- How do you get hot water, lighting, heating in here? Do these services work properly? Have they ever been tested?
- Do you ever use candles or an open flame to heat and light here or cook with camping gas?
- How do you manage to keep yourself warm? Especially in winter?
- When did you last go out in your garden? Do you feel safe to go out there?
- Are you worried about other people getting in to your garden to try and break-in? Has this ever happened?
- Are you worried about mice, rats or foxes, or other pests? Do you leave food out for them?
- Have you ever seen mice or rats in your home? Have they eaten any of your food? Or got upstairs and be nesting anywhere?
- Can you prepare food, cook and wash up in your kitchen?
- Do you use your fridge? Can I have look in it? How do you keep things cold in the hot weather?
- How do you keep yourself clean? Can I see your bathroom? Are you able to use your bathroom and use the toilet ok? Have a wash, bath? Shower?
- Can you show me where you sleep and let me see your upstairs rooms? Are the stairs safe to walk up? (if there are any)
- What do you do with your dirty washing?
- Where do you sleep? Are you able to change your bed linen regularly? When did you last change them?
- How do you keep yourself warm at night? Have you got extra coverings to put on your bed if you are cold?
- Are there any broken windows in your home? Any repairs that need to be done?
- Because of the number of possessions you have, do you find it difficult to use some of your rooms? If so which ones?

- Do you struggle with discarding things or to what extent do you have difficulty discarding (or recycling, selling, giving away) ordinary things that other people would get rid of?

Appendix 3 - PEEP

Address		Number of Bedrooms	
Tenant Name			
Emergency Contact Name		Emergency Contact Details	

Impact of property condition in the event of a fire/ emergency

Please state concerns of escaping property in the event of a fire or any areas increasing risk of fire

- Tenant or person in household smokes ☐
- High number of flammable objects ☐
- No clear path out of property ☐
- Excessive amount of clutter near exits ☐
- Use of electric fire ☐
- Substance misuse ☐
- Other, please state any other concerns

Equipment/ Aids in the event of a fire/ emergency

I currently use and require the support of the following equipment/ aids to mobilise:

- Wheelchair ☐ Delta Walker ☐ Walking Stick ☐
- Zimmer Frame ☐ Tripod ☐ Other (*please state*) ☐

Impact on your Evacuation

Does the tenant have any of the following that may impact their evacuation in the event of a fire?

- Hearing Impairment ☐ Visual Impairment ☐ Dementia/ Alzheimer's ☐
- Medication for sleep ☐ Other (*please state*) ☐

Support Required
<p>If you have a medical condition that impacts on your evacuation, please can you tell us a bit more about your condition and what support may be required. <i>(For example, vibrating alarm, assessment by the fire service needed)</i></p>

Please tick one of the below to identify the level of risk	
High	
Medium	
Low	
<u>Reason why/ Other information</u>	

Peep completed by		Date	
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Review of PEEP		
Date of Review	Reviewed by	Outcomes/ Actions

16. Associated documents:

- Tenancy Support Strategy
- Tenancy agreement

- Lone Working Policy
- Health and Safety Policy
- Zero Tolerance Procedure
- ASB Policy
- Eyes Wide Open policy
- Bury Council Safeguarding Neglect and Hoarding Procedure