

Oxfordshire Multi-Agency Hoarding Protocol



In partnership with:



| INDEX | CONTENTS | Page |
|-------------------|---|-------------|
| 1. | Introduction | 3 |
| 2. | Who Does The Protocol Apply To? | 3 |
| 3. | Aims Of Protocol | 3 |
| 4. | Definition Of Hoarding | 3 |
| 5. | What Is Hoarding Disorder? | 4 |
| 6. | Types Of Hoarding | 4 |
| 7. | General Characteristics Of Hoarding | 5 |
| 8. | Detection and Associated Issues | 6 |
| 9. | Mental Capacity | 7 |
| 10. | Information Sharing | 8 |
| 11. | Fire Safety | 9 |
| 12. | Environmental Health Powers | 9 |
| 13. | Safeguarding Children (MASH) | 11 |
| 14. | Safeguarding Adults | 11 |
| 15. | Raising an Adult Safeguarding Concern | 11 |
| 16. | Engaging the Adult who hoards | 12 |
| 17. | Multi-Agency Response | 12 |
| 18. | Multi-Agency Case Conference | 13 |
| 19. | When to Refer to the Safeguarding Team | 13 |
| 20. | The Referral Process | 13 |
| 21. | Process for Clutter Image Rating Tool | 16 |
| 22. | Guidance Questions For Practitioners | 27 |
| 23. | Guidance For Practitioners – Hoarding Insight Characteristics | 28 |
| 24. | Practitioners Hoarding Assessment | 29 |
| APPENDICES | | |
| 1. | Multi-Agency Conference Meeting Agenda Template | 31 |
| 2. | Complex Risk Assessment Form Template | 32 |
| 3. | Useful Contacts | 36 |

1. Introduction

This protocol sets out a framework for agencies to work in partnership using an outcome focused, solution based model. The protocol offers clear guidance to staff working with hoarders.

Compulsive hoarding is highly complex and requires a collaborative and integrated approach. This protocol aims to ensure there is meaningful, coordinated multi agency partnership working with people who hoard in order to reduce duplication for both the agencies and customers. The protocol aims to facilitate positive and sustainable outcomes for customers, by involving them in the process at all stages.

The protocol includes reference to pieces of legislation that may be relevant to working with people who hoard. See Environmental Health powers (Pages 9-11).

2. Who Does The Protocol Apply To?

This protocol applies to all staff who come into contact with individuals who are at risk of hoarding.

There is an expectation that everyone engages fully in partnership working to achieve the best outcome for individuals who hoard while meeting the requirements and duties of individual agencies.

3. Aims of Protocol

The aims of this protocol are to:

- Investigate and share information on the problems related to hoarding from different professional and community perspectives. Dealing with incidents in an evidence based, structured, systematic, coordinated and consistent way.
- Develop “informal” multi-agency solutions which maximise the use of existing services and resources and which may reduce the need for compulsory solutions.
- Ensure that when formal solutions are required, there is a process for planning solutions tailored to meet the needs of the customer. Possible solutions include professional support and monitoring, property repairs and permanent and temporary re-housing.
- To establish best practice and improve knowledge of legislation that relates to hoarding behaviour.

4. Definition of Hoarding

Hoarding is the excessive collection and retention of any material to the point that it impedes day to day functioning (Frost & Gross, 1993). Pathological or compulsive hoarding is a specific type of behaviour characterised by:

- Acquiring and failing to throw out a large number of items that would appear to hold little or no value and would be considered rubbish by other people.
- Severe “cluttering” of the person's home so that it is no longer able to function as a viable living space.
- Significant distress or impairment of work or social life (Kelly 2010).

5. What Is Hoarding Disorder?

Hoarding Disorder used to be considered a form of obsessive compulsive disorder (OCD). However, hoarding is now considered a standalone mental disorder and is included in the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders 2013. However, hoarding can also be a symptom of other mental disorders. Hoarding Disorder is distinct from the act of collecting, and is also different from people whose property is generally cluttered or messy. It is not simply a lifestyle choice. The main difference between a hoarder and a collector is that hoarders have strong emotional attachments to their objects which are well in excess of their real value.

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

Anything can be hoarded, in various areas including the resident's property, garden or communal areas. However, commonly hoarded items include but are not limited to:

- Clothes.
- Newspapers, magazines or books.
- Bills, receipts or letters.
- Food and food containers.
- Animals.
- Medical equipment.
- Collectibles such as toys, videos, DVDs, or CDs.

6. Types of Hoarding

There are three types of hoarding:

- **Inanimate objects**

This is the most common. This could consist of one type of object or a collection of a mixture of objects such as old clothes, newspapers, food, containers or papers.

- **Animal Hoarding**

Animal hoarding is on the increase. This is the obsessive collecting of

animals, often with an inability to provide minimal standards of care. The hoarder is unable to recognise that the animals are or may be at risk because they feel they are saving them. In addition to an inability to care for the animals in the home, people who hoard animals are often unable to take care of themselves. As well, the homes of animal hoarders are often eventually destroyed by the accumulation of animal faeces and infestation by insects.

- **Data Hoarding**

This is a new phenomenon of hoarding. There is little research on this matter and it may not seem as significant and inanimate and animal hoarding, however people that do hoard data could still present with same issues that are symptomatic of hoarding. Data hoarding 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.

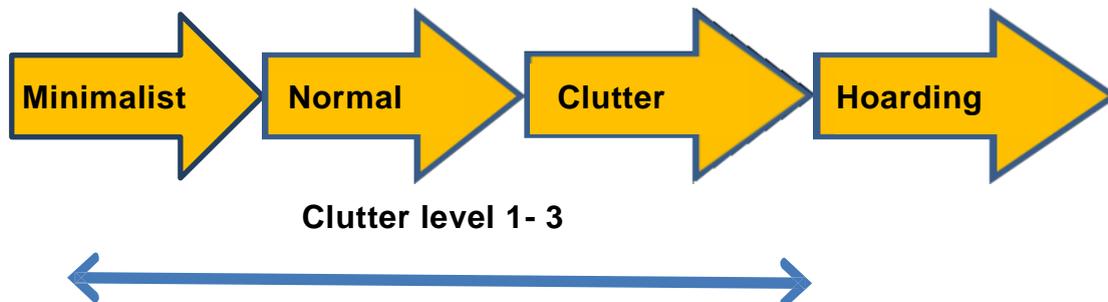
7. General Characteristics of Hoarding

- **Fear and anxiety:** compulsive hoarding may have started as a learnt behaviour or following a significant event such as bereavement. The person 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 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 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, 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, 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 the hoarding.

- **Extreme clutter:** hoarding behaviour may prevent several or all the rooms of a person's property from being used for its intended purpose.
- **Churning:** hoarding behaviour can involve moving items from one part of a person's property to another, without ever discarding anything.
- **Self-Care:** a person who hoards may appear unkempt and disheveled, due to lack of toileting 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 behaviour and the impact it has on them and others.

Continuum of Hoarding Behaviour



8. Detection and Associated Issues

Some issues that can be identified (this list is not exhaustive):

Access issues

- Gaining access – as this is generally not welcomed.
- Don't always request repairs or have debt issues that may trigger reactive visits.
- Gas checks and necessary repairs, e.g. leaks into neighbouring properties.
- Decent Homes – action if holding up certain necessary works, e.g. electrics, though not all work as people can choose not to have a new kitchen.

Neighbours, friends and family

- Smell or obvious pest problem – usually when it becomes noticeable in neighbouring properties.

- Concerned neighbours or complaints.
- Items creeping into communal areas or outdoor space, overgrown gardens.
- Concerned friends and family may make a report to partners.

Un/scheduled Visits

- Welcome visits/tenancy check (indicates early on if potential problem).
- Periodic occupancy checks (home visit not by phone).
- GP, fire or ambulance service – tends to be at crisis point such as hospitalisation.
- Meals on wheels or other domestic/carer/safety/occupational therapist visits.
- Social workers/housing support worker.
- Downsizing/under occupiers.
- Responsive visits e.g. repairs.

General

- Information from a previous landlord.
- Case notes/handover between teams and sometimes between landlords.

9. Mental Capacity

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

1. Every adult has the right to make his or her own decisions and must be assumed to have capacity to make them unless it is proved otherwise.
2. A person must be given all practicable help before anyone treats them as not being able to make their own decisions.
3. Just because an individual makes what might be seen as an unwise decision, they should not be treated as lacking capacity to make that decision.
4. Anything done or any decision made on behalf of a person who lacks capacity must be done in their best interests.
5. Anything done for or on behalf of a person who lacks capacity should be the least restrictive of their basic rights and freedoms.

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 persons consent. In extreme cases of hoarding behaviour, the very nature of the environment should lead professionals to question whether the person 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.

Any capacity assessment carried out in relation to hoarding behaviour must be time specific, and relate to a specific intervention or action. The professional responsible for undertaking the capacity assessment will be the person who is proposing the specific intervention or action, and is referred to as the "decision-maker". Although the decision-maker may need to seek support from other professionals in the multidisciplinary team, they are responsible for making the final decision about a person's capacity.

If the person lacks capacity to consent to the specific action or intervention, then the decision-maker must demonstrate that they have met the requirements of the best interest checklist. Due to the complexity of such cases, there must be a best interests meeting, chaired by a team manager to oversee the process.

In particularly challenging and complex cases, it may be necessary for the local authority to refer to the Court of Protection to make the best interests decision. Any referral to the Court of Protection should be discussed with legal services and the relevant service manager.

10. Information Sharing

Under the Data Protection Act 1998, we all have the responsibility to ensure that personal information is processed lawfully and fairly. People we work with have a right to view any information held about them. Practitioners should consider this when they are recording information about that person.

For the purpose of this protocol we will refer to the Oxfordshire Safeguarding Adults Board Information sharing protocol. 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. This right extends to them being able to have control over information about themselves and to determine what information is shared. 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.

- Information given to an individual member of staff belongs to the organisation and not to the individual employee. An individual employee cannot give a personal assurance of confidentiality to an adult at risk.
- 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.
- Difficulties in working within the principles of maintaining the confidentiality of an adult should not lead to a failure to take action to protect the adult from abuse or harm.
- Confidentiality must not be confused with secrecy, that is, the need to protect the management interests of an organisation should not override the need to protect the adult.
- Staff reporting concerns at work ("whistleblowing") is entitled to protection under the Public Interest Disclosure Act 1998.

The decisions about what information is shared and with whom will be taken on a case by case basis. Whether information is shared 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.

11. Fire Safety

Hoarding poses a significant risk to both the people living in the hoarded property and those living nearby. Where a hoarded property is identified regardless of the risk rating, those individuals need to be advised of the increased risk and identify a safe exit route. Appropriate professional fire safety advice must be sought. Sharing information with appropriate emergency services by alerting them to hoarded properties will allow them to respond appropriately. Once properties are cleared the information must be updated. A Safe and Wellbeing visit undertaken by the Fire & Rescue Service may be appropriate.

12. Environmental Health Powers

Public Health Act 1936

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

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

Section 83: Cleansing of filthy or verminous premises

Where any premises, tent, van, shed, ship or boat is either;

- a) filthy or unwholesome so as to be prejudicial to health; or
- b) 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 24 hours or more. If not complied with, Environmental Health (EH) 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 article 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.

Prevention of Damage by Pests Act 1949

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

Notice may be served on owner or occupier of land/premises where rats and/or mice are or may be present due to the conditions at the time. The notice 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. The LA may carry out works in default and charge for these.

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.

Hoarding of Animals

Evidence of animal hoarding at any level should be reported to the RSPCA.

Further information can be found at:

<http://www.osab.co.uk/professionals/multi-agency-procedures/>

13.Safeguarding Children (MASH)

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 hoarded 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 reflect this. Therefore, where children live in the property, a Safeguarding Children referral to the MASH should always be raised.

Please refer to the following links for guidance:

<http://www.oscb.org.uk/reporting-concerns/>

<https://www.oxfordshire.gov.uk/cms/content/safeguarding-hub>

14.Safeguarding Adults

This protocol accepts the guidance as supplied in the Oxfordshire Safeguarding Board Multi-Agency procedures.

An "adult at risk" may also be living with the hoarder in the property. There may be a safeguarding concern about that adult if they are at risk of harm due to the living circumstances. If in doubt, discuss the issue your line manager, the Safeguarding Team or raise a Safeguarding Adult alert.

15.Raising an Adult Safeguarding Concern

The professional online portal allows you to use the County Council online web safeguarding form to raise a safeguarding concern from a professional.

<https://www.oxfordshire.gov.uk/cms/content/raising-safeguarding-concern-professional>

16. Engaging the Adult who hoards

Regardless of what process, organisations or pathway is used to work with an adult who is hoarding, the starting point will always be engaging with the individual. Positive outcomes can be achieved through operational approaches informed by an understanding of the unique experience of each individual balanced with strategic and management input.

In engaging with the adult consider:

- Whether they have the necessary information in a format they can understand.
- Whether they understand options and consequences of their choices.
- Listening to their reasons for mistrust, disengagement, refusal and their choices.
- Whether there is the time to have conversations over a period and building up of a relationship.
- Who can support you to engage with the adult (whether family, advocate, other professional).
- Always involving attorneys, receivers, or representatives if the adult has one.
- Determining a plan for agreed actions/outcome for the person who has fluctuating capacity is in place during a time when they had capacity for that decision.
- The adult to attend meetings where possible.

The family member or carer of the individual should be engaged where the adult has provided consent. This will include being part of planning, decision-making and whether they are willing and able to provide support. There are duties under the Care Act for carers and in relation to carers assessments.

17. Multi-Agency Response

While an adult who hoards may not currently be in receipt of services, those that are hoarding are likely to meet the eligibility criteria now that Hoarding Disorder is a recognised condition. The eligibility criteria states that:

“An adult’s needs meet the eligibility criteria if—

(a) the adult’s needs arise from or are related to a physical or mental impairment or illness; [*hoarding disorder*]

(b) as a result of the adult’s needs the adult is unable to achieve two or more of the outcomes; [*being able to make use of the adult’s home safely - and - maintaining a habitable home environment*] and

(c) as a consequence there is, or is likely to be, a significant impact on the adult’s well-being.”¹

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 people will receive support from statutory services such as Mental Health or Adult Social Care.

Any professional working with people who may have or appear to have a hoarding condition should ensure they complete the Practitioners Assessment and use the clutter image rating tool kit to decide what steps to take.

18. Multi-Agency Case Conference

Multi-Agency Case Conferences are a process to discuss, identify and document current risks for hoarding cases of concern (not subject to MARAC or MAPPA processes). They provide a framework for professionals to formulate an action plan identifying appropriate agency responsibility for actions, review and re-evaluation of the action plan.

A Multi-Agency Case Conference should take place in the following circumstances:

- The adult has full capacity to make unwise decisions and choices about their life but professionals have concern about the level of risk of hoarding and the risk it poses to them and others.
- The adult is not engaging with services to reduce the risk and has been signposted to partner agencies (based on need) to ensure partner agencies have the opportunity to intervene and provide support in a timely manner but the adult continues to make an unwise decision of their own free will not to engage with the support offered.

The Multi-Agency Case Conference should not be used as a common risk management tool to replace existing risk management processes. The process may be applied when there are high level concerns from partner agencies and all interventions have failed to achieve a positive, safe outcome.

19. When to Refer to the Safeguarding Team

¹ Further information can be found here: <http://www.legislation.gov.uk/ukdsi/2014/9780111124185>

When Information is evidenced and shared at the multi-agency case conference which leads professionals to consider raising a safeguarding alert under Section 42 of the Care Act then a safeguarding alert can be raised. Professionals may find it useful to refer to the Oxfordshire Safeguarding Board needs matrix in order to support their professional decision making.

<http://www.osab.co.uk/professionals/multi-agency-procedures/>

Reasons to raise an alert:

- Support is needed from the safeguarding team to promote effective multiagency working and use their expertise.
- The risks to the individual or others are deemed to be too high for the current support team to manage (death or serious harm to the person and/or others)

20. The Referral Process (see flowchart)

It is recognised that hoarding is a complex condition and that a variety of agencies will come into contact with the adult and/or child(ren). It is also recognised that not all adults will receive support from statutory services. Any professional working with adults who may have or appear to have a hoarding condition should ensure they complete the Practitioners Hoarding Assessment and use the clutter image rating toolkit to decide what steps to take.

a) Safeguarding children

Safeguarding children is everybody's business and refers to protecting children from maltreatment, preventing the impairment of their health or development and ensuring that they are growing up in circumstances consistent with the provision of safe and effective care. Growing up in a hoarded property can put a child at risk by affecting their development and in some cases, leading to the neglect of a child, which is a safeguarding issue. Where a child is residing in a property with a parent/carer who hoards, the interests of the child are paramount and where there are concerns that the child is at risk of significant harm the child must be referred to Children's Social Care. Where it is identified that there are support needs a referral may be made to early help. GPs, Health Visitors and teachers are a few examples of professionals who are most likely to come into contact with a child growing up in a hoarded house. The needs of the child at risk must come first and any actions we take reflect this.

b) Safeguarding adults

Please refer to the Oxfordshire Safeguarding Adults Board Multi-Agency procedures <http://www.osab.co.uk/professionals/multi-agency-procedures/>

If in doubt contact the safeguarding team for a further discussion about whether the information meets the threshold for a section 42 investigation. There is an expectation that professionals will have worked together with the individual to address their hoarding.

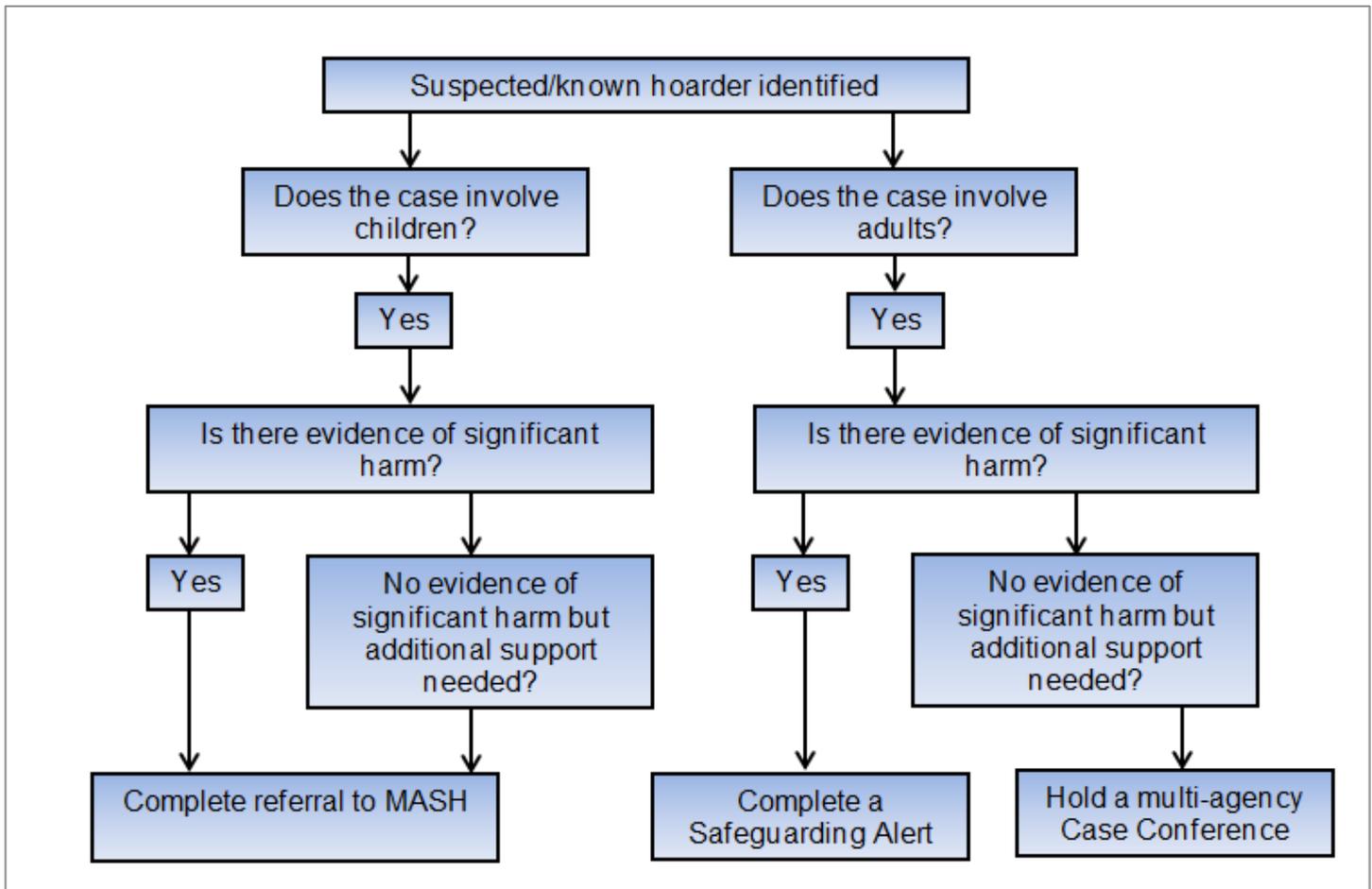
If the alert reaches the threshold for a section 42 enquiry Adult Social Care will then coordinate the safeguarding process. The mental capacity of the individual should also be considered.

c) Animals

Evidence of animal hoarding at any level should be reported to the RSPCA.

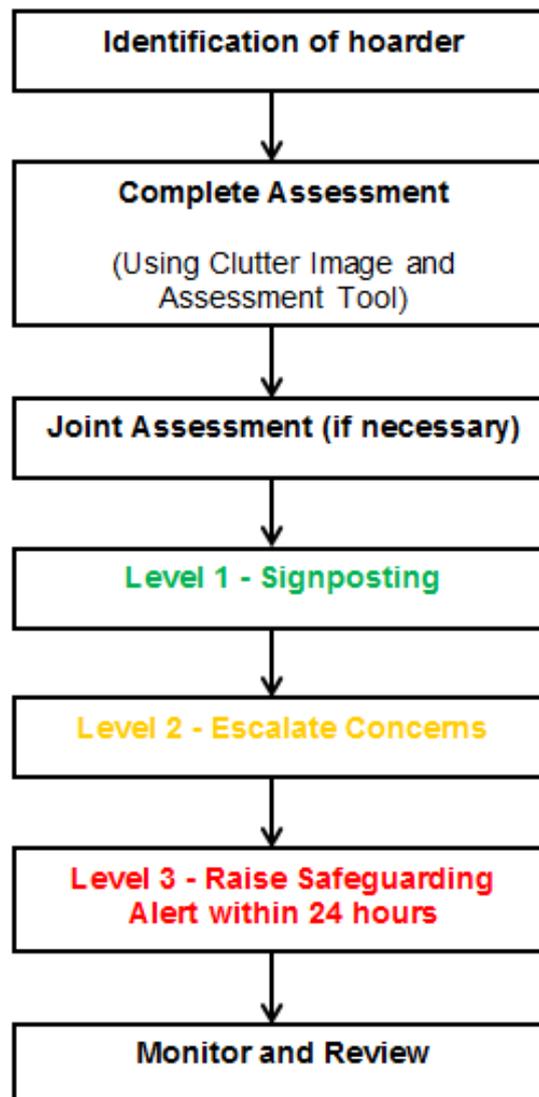
<http://www.rspca.org.uk/local/oxfordshire-branch>

REFERRAL PROCESS FOR CHILDREN/ADULTS



21. Process for Clutter Image Rating Tool

The flow chart below sets out the process clearly. If in doubt, please ask your supervisor/manager for assistance.



Please use the clutter image rating to assess what level the customer's hoarding problem is at:

Images 1-3 indicate level 1

Images 4-6 indicate level 2

Images 7-9 indicate level 3

Then refer to clutter assessment tool to guide which details the appropriate action you should take. Record all actions undertaken in agency's recording system, detailing conversations with other professionals, actions taken and action yet to be

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taken.

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

21. Assessment Tool Guidelines

| | |
|---|---|
| <p>1. Property structure, services & garden area</p> | <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. |
| <p>2. Household Functions</p> | <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 |
| <p>3. Health and Safety</p> | <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? |
| <p>4. Safeguard of Children & Family members</p> | <ul style="list-style-type: none"> • Do any rooms rate 7 or above on the clutter rating scale? • Does the household contain young people or children? |
| <p>5. Animals and Pests</p> | <ul style="list-style-type: none"> • Are there any pets at the property? • 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. • 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. |
| <p>6. Personal Protective Equipment (PPE)</p> | <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. |

| <p>Level 1</p> <p><i>Clutter image rating 1 - 3</i></p> | <p>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.</p> |
|---|---|
| <p>1. Property structure, services & garden area</p> | <ul style="list-style-type: none"> • All entrances and exits, stairways, roof space and windows accessible. • Smoke alarms fitted and functional or referrals made to fire brigade to visit and install. • All services functional and maintained in good working order. • Garden is accessible, tidy and maintained |
| <p>2. Household Functions</p> | <ul style="list-style-type: none"> • No excessive clutter, all rooms can be safely used for their intended purpose. • All rooms are rated 0-3 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. |
| <p>3. Health and Safety</p> | <ul style="list-style-type: none"> • 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. |
| <p>4. Safeguard of Children & Family members</p> | <ul style="list-style-type: none"> • No Concerns for household members |
| <p>5. Animals and Pests</p> | <ul style="list-style-type: none"> • Any pets at the property are well cared for • No pests or infestations at the property |
| <p>6. Personal Protective Equipment (PPE)</p> | <ul style="list-style-type: none"> • No PPE required • No visit in pairs required. |

| Level 1 | Actions |
|-----------------------------|--|
| Referring Agency | <ul style="list-style-type: none"> • Discuss concerns with resident • Raise a request to the Fire Brigade to provide fire safety advice • Refer for support assessment if appropriate. • Refer to GP if appropriate |
| Environmental Health | <ul style="list-style-type: none"> • No Action |
| Social Landlords | <ul style="list-style-type: none"> • Provide details on debt advice if appropriate to circumstances • Refer to GP if appropriate • Refer for support assessment if appropriate. • Provide details of support streams open to the resident via charities and self-help groups. • Provide details on debt advice if appropriate to circumstances • Ensure residents are maintaining all tenancy conditions |
| Practitioners | <ul style="list-style-type: none"> • Complete Hoarding Assessment • Make appropriate referrals for support • Refer to social landlord if the customer is their tenant or leaseholder |
| Emergency Services | <ul style="list-style-type: none"> • Ensure information is shared with statutory agencies & feedback is provided to referring agency on completion of home visits. |
| Animal Welfare | <ul style="list-style-type: none"> • No action unless advice requested |
| Safeguarding Adults | <ul style="list-style-type: none"> • No action unless other concerns of abuse are noted. |
| MASH | <ul style="list-style-type: none"> • No action unless other concerns of abuse are noted. |

| Level 2 <i>Clutter Image Rating 4 – 6</i> | Household environment requires professional assistance to resolve the clutter and the maintenance issues in the property. |
|--|--|
| 1. Property structure, services & garden area | <ul style="list-style-type: none"> • Only major exit is blocked • Only one of the services is not fully functional • Concern that services are not well maintained • Smoke alarms are not installed or not functioning • Garden is not accessible due to clutter, 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 | <ul style="list-style-type: none"> • 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 4-5 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 | <ul style="list-style-type: none"> • Kitchen and bathroom are not kept clean • 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. • No rotting food • No concerning use of candles • Resident trying to manage personal care but struggling • No writing on the walls |
| 4. Safeguard of Children & Family members | <ul style="list-style-type: none"> • Hoarding on clutter scale 4 -7 doesn't automatically constitute a Safeguarding Alert. • Please note all additional concerns for householders • Properties with children or vulnerable residents with additional support needs may trigger a Safeguarding referral under a different risk. |
| 5. Animals and Pests | <ul style="list-style-type: none"> • Pets at the property are not well cared for • Resident is not unable to control the animals • Animal's living area is not maintained and smells • Animals appear to be under nourished or over fed • Sound of mice heard at the property. • Spider webs in house • Light insect infestation (bed bugs, lice, fleas, cockroaches, ants, etc.) |
| 6. Personal Protective Equipment (PPE) | <ul style="list-style-type: none"> • Latex Gloves, boots or needle stick safe shoes, face mask, hand sanitizer, insect repellent. • PPE required. |

| <p>Level 2</p> | <p>Actions</p> <p>In addition to actions listed below these cases need to be monitored regularly in the future due to RISK OF ESCALATION or REOCCURRENCE</p> |
|------------------------------------|--|
| <p>Referring Agency</p> | <ul style="list-style-type: none"> • Refer to landlord if resident is a tenant • Refer to Environmental Health if resident is a freeholder • Raise a request to the Fire Brigade to provide fire prevention advice • Provide details of garden services • Refer for 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 agencies involved to ensure a collaborative approach and a sustainable resolution. |
| <p>Environmental Health</p> | <ul style="list-style-type: none"> • Refer to Environmental Health on 020 8545 3025 with details of customer, landlord (if relevant) referrer's details and overview of problems • At time of inspection, Environmental Health Officer decides on appropriate course of action • Consider serving notices under Environmental Protection Act 1990, Prevention of Damage By Pests Act 1949 or Housing Act 2004 Consider Works in Default if notices not complied by occupier |
| <p>Social Landlord</p> | <ul style="list-style-type: none"> • Visit resident to inspect the property & assess support needs • Referral to Merton Generic Floating Support 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 agencies involved to ensure a collaborative approach and a sustainable resolution. |
| <p>Practitioners</p> | <ul style="list-style-type: none"> • Refer to "Guidance for Hoarding Guidance Questions to Ask" • Complete Practitioners Assessment Tool • Ensure information sharing with all agencies involved to ensure a collaborative approach and a sustainable resolution. |
| <p>Emergency Services</p> | <ul style="list-style-type: none"> • 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. |
| <p>Animal Welfare</p> | <ul style="list-style-type: none"> • Visit property to undertake a wellbeing check on animals at the property. • Educate customer regarding animal welfare if appropriate • Provide advice / assistance with re-homing animals |
| <p>Safeguarding Adults</p> | <ul style="list-style-type: none"> • No action unless other concerns of abuse are noted. • If other concerns of abuse are of concern or have been reported, progression to safeguarding alert and investigation may be necessary. |
| <p>MASH</p> | <ul style="list-style-type: none"> • No action unless other concerns of abuse are noted. |

| <p>Level 3</p> <p><i>Clutter Image Rating 7 - 9</i></p> | <p>Household environment will require intervention with a collaborative multi agency approach with the involvement from a wide range of professionals. This level of hoarding constitute 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.</p> |
|---|---|
| <p>1. Property structure, services & garden area</p> | <ul style="list-style-type: none"> • Limited access to the property due to extreme clutter • Evidence may be seen of extreme clutter seen at windows • Evidence may be seen of extreme clutter outside the property • Garden not accessible and extensively overgrown • Services not connected or not functioning properly • Smoke alarms not fitted or not functioning • Property lacks ventilation due to clutter • Evidence of structural damage or outstanding repairs including damp • Interior doors missing or blocked open • Evidence of indoor items stored outside |
| <p>2. Household Functions</p> | <ul style="list-style-type: none"> • Clutter is obstructing the living spaces and is preventing the use of the rooms for their intended purpose. • Room(s) scores 7 - 9 on the clutter image scale • Rooms not used for intended purposes or very limited • Beds inaccessible or unusable due to clutter or infestation • Entrances, hallways and stairs blocked or difficult to pass • 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 • Concern for declining mental health • Property is not maintained within terms of lease or tenancy agreement where applicable • Property is at risk of notice being served by Environmental Health |
| <p>3. Health and Safety</p> | <ul style="list-style-type: none"> • Human urine and or excrement may be present • Excessive odour in the property, may also be evident from the outside • Rotting food may be present • Evidence may be seen of unclean, unused and or buried plates & dishes. • Broken household items not discarded e.g. broken glass or plates • Inappropriate quantities or storage of medication. • Pungent odour can be smelt inside the property and possibly from outside. • Concern with the integrity of the electrics • Inappropriate use of electrical extension cords or evidence of unqualified work to the electrics. • Concern for declining mental health. |
| <p>4. Safeguard of Children & Family members</p> | <ul style="list-style-type: none"> • Hoarding on clutter scale 7-9 constitutes a Safeguarding referral. • Please note all additional concerns for householders. |

| | |
|---|---|
| 5. Animals and Pests | <ul style="list-style-type: none"> • Animals at the property at risk due the level of clutter in the property • Resident may not able to control the animals at the property • Animal's living area is not maintained and smells • Animals appear to be under nourished or over fed • Hoarding of animals at the property • Heavy insect infestation (bed bugs, lice, fleas, cockroaches, ants, silverfish, etc.) • Visible rodent infestation |
| 6. Personal Protective Equipment (PPE) | <ul style="list-style-type: none"> • Latex Gloves, boots or needle stick safe shoes, face mask, hand sanitizer, insect repellent. • Visit in pairs required |

| Level 3 | Actions |
|-----------------------------|--|
| Referring Agency | <ul style="list-style-type: none"> • Raise Safeguarding alert within 24 hours • Raise a request to the Fire Brigade within 24 hours to provide fire prevention advice. |
| Environmental Health | <ul style="list-style-type: none"> • Refer to Environmental Health on 020 8545 3025 with details of customer, landlord (if relevant) referrer's details and overview of problems • At time of inspection, EHO decides on appropriate course of action • Consider serving notices under Environmental Protection Act 1990, Prevention of Damage By Pests Act 1949 or Housing Act 2004 • Consider Works in Default if notices not complied by occupier |
| Landlord | <ul style="list-style-type: none"> • Visit resident to inspect the property & assess support needs • Attend multi agency Safeguarding meeting • Enforce tenancy conditions relating to residents responsibilities • If resident refuses to engage serve Notice of Seeking Possession under Ground 13 to Schedule 2 of the Housing Act 1988 |
| Practitioners | <ul style="list-style-type: none"> • Refer to "Hoarding Guidance Questions for practitioners" • Complete Practitioners Assessment Tool • Ensure information sharing with all agencies involved to ensure a collaborative approach and a sustainable resolution. |
| Emergency Services | <ul style="list-style-type: none"> • Attend Safeguarding multi-agency meetings on request • Ensure information sharing with all agencies involved to ensure a collaborative approach and a sustainable resolution. • Provide feedback to referring agency on completion of home visits. |
| Animal Welfare | <ul style="list-style-type: none"> • Visit property to undertake a wellbeing check on animals at the property. • Remove animals to a safe environment • Educate customer regarding animal welfare if appropriate • Take legal action for animal cruelty if appropriate • Provide advice / assistance with re-homing animals |
| Safeguarding Adults | <ul style="list-style-type: none"> • Safeguarding alert should progress to referral for multi-agency approach and further investigation of any concerns of abuse. |
| MASH | <ul style="list-style-type: none"> • Refer to Children Mash if children or young people present within 24 hours |

22. Guidance Questions for Practitioners

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 hoarding.

The information gained from these questions will inform a Hoarding Assessment, and provide the information needed to alert other agencies. Most customers with a hoarding problem will be embarrassed about their surroundings so adapt the question to suit your customers.

- 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 you move safely around your home (where the floor is uneven or covered, or there are exposed wires, damp, rot, or other hazards)?
- Has a fire ever started by accident?
- 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?

23. Guidance for Practitioners

Hoarding Insight characteristics

Use this guide as a baseline to describe the customer's attitude towards their hoarding. Provide additional information in your referrals and reports to enable a tailored approach that is relevant to your customer.

Good or fair insight:

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

Poor insight

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

Absent (delusional) insight

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

Detached with assigned blame

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

24. Practitioners Hoarding Assessment

This assessment should be completed using the information you have gained using the Practitioners Guidance Questions. Complete this review away from the customers property and in conjunction with the Multi-Agency Hoarding Protocol Assessment Tool. Text boxes will expand to allow further text.

| | | | | |
|--|-----|-------------------------------------|--------------|-----|
| Date of Home Assessment | | | | |
| Customer Name | | | | |
| Customer Date of Birth | | | | |
| Address | | | | |
| Customer contact details | | | | |
| Type of dwelling | | | | |
| Freeholder | Yes | Tenant – Name & address of landlord | | |
| Household Members | | Name | Relationship | DOB |
| | | | | |
| | | | | |
| | | | | |
| Pets – indicate what pets and any concerns | | | | |
| Agencies currently involved – with contact details | | | | |
| Non-agency support currently in place | | | | |
| Customers attitude towards hoarding | | | | |

| Please indicate if present at the property | | | | | | | |
|---|--|--|--|---|---------------|----------------------|--|
| Structural damage to property | | Insect or rodent infestation | | Large number of animals | | Clutter outside | |
| Rotten food | | Animal waste in house | | Concerns over the cleanliness of the property | | Visible human faeces | |
| Concern of self-neglect | | Concerned for children at the property | | Concerned for other adults at the property | | | |
| Using the Clutter Image scale please score the each of the rooms below | | | | | | | |
| Bedroom 1 | | Bedroom 4 | | Separate toilet | | | |
| Bedroom 2 | | Kitchen | | Lounge | | | |
| Bedroom 3 | | Bathroom | | Dining Room | | | |
| Please refer to the Multi Agency Hoarding Protocol. Provide a Description of the Hoarding Problem: (presence of human or animal waste, rodents or insects, rotting food, are utilities operational, structural damage, problems with blocked exits, are there combustibles, is there a fire risk? etc.) | | | | | | | |
| Please refer to the Multi Agency Hoarding Protocol Tool, based on the information provided above, what level is your case graded? | | | | | | | |
| Level 1- Green | | Level 2 - Orange | | | Level 3 - RED | | |
| Name of the practitioner undertaking assessment | | | | | | | |
| Name of Organisation | | | | | | | |
| Contact details | | | | | | | |
| Next action to be taken | | | | | | | |
| List agencies referred to with dates & contact names | | | | | | | |

London Borough of Merton Safeguarding Team would like to thank the representatives of the Safeguarding Adults Board for their commitment to partnership working in finding sustainable solutions for customers whose lives are affected by hoarding. Additionally the group would like to recognise the contribution made by Professor Mataix-Cols, who has supported the group and provided information that helped with the creation of the Practitioners Assessment Toolkit.

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APPENDIX 1

FOR USE FOR LEVEL 3

| |
|--|
| <p>HOARDING</p> <p>Multi-Agency Conference Meeting</p> |
|--|

| |
|---|
| <p>Name:</p> <p>Held at:</p> |
|---|

- 1. Welcome, introductions and apologies**

- 2. The Purpose Of The Meeting**

- 3. Background Information Including Issues / Concerns**

- 4. General Discussion; What Has Been Done Already And By Who**
- Clutter Image and scale tool to be used and discussed

- 5. Action Plan**

- 6. AOB**

- 7. Date Of Next Meeting If Required**

APPENDIX 2

COMPLEX RISK ASSESSMENT CONFIDENTIAL

| | |
|-------------------|--|
| Name of Customer | |
| Agency identifier | |

To be attached to full assessments and care plans sent to providers in situations where significant risk has been identified (in accordance with guidance on sharing of information and confidentiality). Because this form is likely to contain sensitive information or information from third parties it must not be shared with the user without prior agreement of those third parties and manager unless it has been completed with the user. For Mental Health customers, use the CPA/Risk Assessment documentation provided by the NHS Trust.

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

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

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

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

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

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

Risk Management

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

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

| | | |
|----------------------|--|-------|
| Assessors Signature: | | Date: |
| Agreed by Manager: | | Date: |
| Review Date: | | |

Risk History - CONFIDENTIAL

Record of incidents of risk behaviours including violence or aggression or episodes of self-harm or known criminal activity. State whether actual or threatened, in date order. New episodes must be recorded. Because this form is likely to contain sensitive information or information from third parties it must not be shared with the user without prior agreement of those third parties and the team manager.

| Date of Incident | Record of Incident - Give as full an account as is possible, including source of information, Whether this has been verified and outcome of incident. | Assessors Signature + date | Managers Signature + date |
|------------------|---|----------------------------|---------------------------|
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APPENDIX 3 Useful Contacts

| | |
|--|--|
| <p>Social and Health Care Team PO Box 780 OXFORD OX1 9GX</p> <p>Telephone: 0845 050 7666 Out of hours emergency: 0800 833408 Fax: 01865 783111 Email: socialandhealthcare@oxfordshire.gov.uk</p> | <p>Oxfordshire Safeguarding Adults Board Abbey House Abbey Close Abingdon OX14 3JD</p> <p>Telephone: 01865 328993</p> <p>Email: Oxfordshire.SafeguardingAdultsBoard@Oxfordshire.gov.uk</p> |
| <p>Oxford City and North East Oxfordshire Adult Mental Health Team (AMHT) Neill Unit Warneford Hospital Headington Oxford OX3 7JX</p> <p>Telephone: 01865 902200 Email: cityneoxon.amht@oxfordhealth.nhs.uk</p> | <p>Oxfordshire Trading Standards Service Graham Hill House Electric Avenue Ferry Hinksey Road Oxford OX2 0BY</p> <p>Telephone: 0845 051 0845 Email: trading.standards@oxfordshire.gov.uk</p> |
| <p>Family Information Service Oxfordshire County Council County Hall New Road Oxford OX1 1ND</p> <p>Telephone: 08452 262636 Email: fis.enquiries@oxfordshire.gov.uk</p> | <p>Social & Community Services MASH (Multi-Agency Safeguarding Hub) Team</p> <p>Telephone: 0845 050 7666 Out of hours emergency: 0800 833408 Email: mash-childrens@oxfordshire.gcsx.gov.uk Online Enquiry Form: www.oxfordshire.gov.uk/cms/content/online-mash-enquiry-form</p> |
| <p>Compulsive Hoarding</p> <p><i>Website based service which provides a resource of up-to-date information about compulsive hoarding, its diagnosis, research, treatment and the available support.</i></p> <p>www.compulsive-hoarding.org/index.html</p> | <p>Help for Hoarders</p> <p><i>Provides information, support and advice for hoarders and their families, including online support forums.</i></p> <p>www.helpforhoarders.co.uk</p> |
| <p>OCD-UK</p> <p><i>Provides information and support about Obsessive Compulsive Disorder, which includes hoarding.</i></p> <p>http://www.ocduk.org/hoarding</p> | <p>Hoarding UK</p> <p><i>Provides information, support for hoarders and agencies, including local support groups.</i></p> <p>www.hoardinguk.org</p> |
| <p>The Association of Professional De-clutterers & Organisers (UK)</p> <p><i>Professional network of those in the de-cluttering and organising industry.</i></p> <p>http://www.apdo-k.co.uk/about.php</p> | <p>Cloud's End CIC</p> <p><i>Resources to help hoarders and housing associations deal with hoarding.</i></p> <p>http://www.cloudsend.org.uk/</p> |