

HOARDING POLICY

DOCUMENT:	HOARDING POLICY
DOCUMENT TYPE:	OPERATIONAL POLICY
VERSION:	FINAL
AUTHOR:	EK
AUTHORISATION FINAL VERSION:	CEO
ISSUE DATE:	12 Aug 2019
REVIEW DATE:	Aug 2020

1. **PURPOSE**

Due to the many risks associated with cases of hoarding and/or squalor and the increasing prevalence it is necessary that SPCHG respond carefully and effectively to such cases. This policy outlines the guidelines for staff in working to maintain the safety and wellbeing of the individual and others affected by their hoarding behaviour and/or squalid living conditions.

2. **SCOPE**

This policy applies to all units managed by SPCHG.

3. **PRINCIPLES**

- 1) The following are the principles on which this procedure is based.
 - a. A proactive approach to managing the risks of hoarding and/or squalor as quickly and effectively as possible;
 - b. A balanced approach that incorporates support, prevention and enforcement as required;
 - c. An approach that is consensual and relationship-based;
 - d. Treating people with hoarding behaviours with respect and sensitivity;
 - e. Combining support and clear expectations to improve the effectiveness of interventions with cases of hoarding and/or squalor;
 - f. Given the subjective nature of standards of living/life-styles and the value of possessions, we will use an objective rating scale (Clutter Image Rating Scale, CRIS) to assist with communication and understanding of the level and impact of hoarding and/or squalor;
 - g. An approach that is least restrictive and rights-based unless there is evidence that a clear risk of significant harm exists which may require a non-consensual intervention;
 - h. In a situation where the individual lacks capacity to make decisions leading to hoarding and/or squalor a best interest decision should be taken by the appropriate decision maker;
 - i. The framework used to manage situations involving hoarding behaviours will be of 'harm minimisation'. It is widely accepted that this is a more realistic goal particularly for those that are resistant to treatment and/or lack insight/capacity. This involves discarding only what is necessary to make the living area and surrounding environment safe from associated risks of hoarding and/or squalor.

HOARDING POLICY

- j. According to current research into best practice we will be guided by a recommendation for a combination of clinical care and practical support
- k. To work in partnership with other agencies to ensure that services are coordinated to manage hoarding cases.

4. **BACKGROUND**

- This policy should be referred to when a resident is deemed at risk as a result of hoarding and/or squalor. It is designed to be preventative and so should be referred to as soon as SPCHG becomes aware of these behaviours and before they reach the point where they are considered extreme. It is estimated that between 2-5% of the population experience varying degrees of hoarding and self-neglect.
- SPCHG recognises hoarding as a growing problem, with serious implications from tenancy management perspective. On an operational level these include: risk management challenges, health and safety concerns, high associated costs.
- SPCHG acknowledges hoarding as a distinct mental health disorder according to the International Diagnostics Statistical Manual 5 (Hoarding and DSM-5, 2012) .
- This policy applies equally to the following three situations: people who hoard, live in squalor or both.

5. **DEFINITIONS**

5.1. **DEFINITION OF HOARDING**

Compulsive hoarding (often described as 'hoarding disorder') is a pattern of behaviour characterised by the excessive acquisition of and inability or unwillingness to discard large quantities of objects that are seemingly useless/ of limited value and/or animals. Hoarding is constituted by living spaces that are cluttered so as to preclude activities for which those spaces were designed.

5.2. **DEFINITION OF SQUALOR**

Squalor describes an unsanitary living environment that has arisen from extreme and/or prolonged neglect, and poses substantial health and safety risks to people residing in the affected premises, as well as others in the surrounding community. Hoarding and squalor are different situations although they can co-exist. Prolonged or extreme hoarding may lead to squalor but does not necessarily

6. **POLICY AND PROCEDURES**

6.1. **EARLY INTERVENTION**

1. In taking a preventative approach to managing these cases we aim to identify the problem as early as possible and to set out a clear message of what is expected in order to mitigate the associated risks. We will commence assessment at the very beginning of someone's tenancy, informing tenants of this policy and the way we manage such behaviours.
2. Housing workers will commence identifying potential tenancy management issues from the time a tenancy is entered into via the routine inspections process which establishes the tenants' and SPCHG's requirements with regards to maintaining the property in good repair.

HOARDING POLICY

3. Staff will, wherever possible and appropriate, refer identified tenants to support services in order to build their capacity to sustain their tenancy

6.2. ASSESSMENT

1. The relevant risk assessment tools (Appendix 1) should be used to explore the extent and the impact of the problem including the risks it presents.
2. The assessment should be done collaboratively with other agencies/stakeholders, including input where necessary from any associated support services and particularly from the Metropolitan Fire Brigade (MFB). A judgement should be made about which agency to involve, when and for what purpose.
3. If significant risk is identified, then it will be necessary to arrange an urgent case meeting to ensure the immediate safety and the individual and/or others that may be affected.
4. If there are doubts about an individual's mental capacity, an assessment of their ability to make the required decisions impacting on their safety should be completed as soon as possible to inform the case meeting amongst agencies.

If people resist assessment or help, and there are serious risks present and doubts regarding someone's mental capacity, staff should consider making contact with:

- local psychiatric triage to determine appropriateness for a mental health referral for a clinical assessment
- police or other authorities for a welfare check
- Aged Care Assessment Service if appropriate
- the local council , which can order an inspection (with police) under the Local Government Act.

6.3. SPCHG RESPONSE

Once an assessment of risk has been made it will be necessary to take proportionate actions to minimize the risks to the person with hoarding behaviours and/or others in the community that are affected. Staff will attempt to take a relationship-based approach to engaging with the tenant on these issues. The objective is for a consensual, collaborative approach. Any action will be clearly communicated with the tenant.

The following is a step-by-step procedure as to SPCHG's response:

1. Assign key SPCHG housing worker (Property manager of specific unit)
2. Property manager will engage with the tenant and work together to develop a plan to reduce the issues relating to hoarding and/or squalor and address any health and safety concerns.
 - The plan will include the following actions:
 - a) Identify and agree on persons needs
 - b) Identify and agree on persons goals
 - c) Risk reduction advice/planning
 - d) Staff to ensure person has comprehensive information relating to options available
 - e) Staff member to make referrals to each medical/clinical/practical support as required (ensuring consent of person is obtained to share information)



HOARDING POLICY

- f) Identify and agree on realistic timeline
3. Property manager will need to monitor/review progress
4. All actions taken to be documented in CHINTARO
5. If at any stage of this process there are doubts as to the persons mental capacity and/or there is serious and imminent risk staff should engage clinical services and/or emergency services as required (refer to 7.2)
6. In any of the following cases the Property manager will escalate the SPCHG response to Manager, Housing Operations
 - If attempts/ interventions have seen no change after an agreed period of time
 - If the tenant denies access and/or is non-cooperative
 - If the situation is rated 5 or above on the Clutter Image Rating Scale
 - If the situation poses as a health hazard ie. pests, vermin etc... that is affecting other residents

6.4. ESCALATION OF SPCHG RESPONSE

The objective is still for a consensual, collaborative approach. Any action will be clearly communicated with the tenant. The following actions will be taken by staff in any of the mentioned scenarios in section 7.3 (6), which may involve a combination of these scenarios.

1. If at any stage of this process there are doubts as to the person's mental capacity and/or there is serious and imminent risk staff should engage clinical services and/or emergency services as required (refer to 6.2.4)
2. At minimum the Property manager will make a referral to the MFB for that property to be put on their notification system.
3. The property manager may take action according to the provisions of the Residential Tenancy Act for unclean premises (63) where intervention attempts are not successful, which would be a formal notice.
4. If there is still not a satisfactory outcome, the next step is to seek an Order of Compliance at VCAT, which mandates the tenant to certain actions eg. clearing certain areas, agreeing to regular inspections. This can be done with the assistance of the MFB who will conduct inspections and produce a written report at the request of external agencies working with the affected person. In some instances external agencies will receive requests to produce reports as part of the process of a Residential Tenancy Tribunal case. This must be approved by the Manager, Housing Operations.
5. In an event that a resolution cannot be reached we will seek an Order of Possession.
6. In extreme cases of hoarding where a serious health and safety issue has been identified (a rating of 5 or above on the CIRS) and someone is housed at a property without a sprinkler system it will be essential that the person is relocated. The preference is for a consensual, collaborative approach but if this is not possible staff will seek an Order of Possession. The process of negotiating relocation and seeking an Order of Possession, must be approved by the CEO.



HOARDING POLICY

7. FUTURE ACTIONS

This policy will be reviewed annually according to best practice for managing cases of hoarding and/or squalor

HOARDING POLICY

8. **APPENDIX A**

The purpose of this tool is to gauge the impact of hoarding on the person with the hoarding behaviour.

8.1. CLUTTER IMAGE RATING SCALE: PART 1 OF 3 – KITCHEN

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



1



2



3



4



5



6



7



8



9

HOARDING POLICY

8.2. CLUTTER IMAGE RATING SCALE: PART 2 OF 3 – BEDROOM

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



1



2



3



4



5



6



7



8



9

HOARDING POLICY

8.3. CLUTTER IMAGE RATING SCALE: PART 3 OF 3 – LIVING ROOM

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



1



2



3



4



5



6



7



8



9