

Residents and Environmental Services Policy Overview Committee Review 2015/16

The Council's approach to the problem of hoarding

TERMS OF REFERENCE

- 1. To understand the prevalence of Hoarding in the Borough, and its impact on residents;
- 2. To understand, consider, and recommend improvements to, the Council's approach to resolving Hoarding Cases including identifying staff and budgetary resources to do this work;
- 3. To understand the relationship between Council officers dealing with hoarding and Mental Health Service providers.

PURPOSE OF THE WITNESS SESSION - SETTING THE CONTEXT

The purpose of this first witness session is to consider the problems created by hoarding, and understand the context in which enforcement action is undertaken. Dealing with Hoarders is acknowledged as being a complex issue and members will wish to understand the challenges faced in doing so before reviewing the existing approach in Hillingdon. Members will also at this stage wish to understand the extent of the problem in Hillingdon.

Key Questions

- 1) What constitutes hoarding disorder?
- 2) What impact does hoarding have on those with hoarding disorder and neighbours?
- 3) How can hoarding be managed?
- 4) What type of approach is most successful in stopping hoarding behaviour?
- 5) How prevalent is hoarding behaviour in Hillingdon?

WITNESSES

Listed below are the names and positions of witnesses attending this session. Their areas of expertise are also listed, and members should use these to guide their questioning.

Ed Shaylor, Service Manager, Residents Services (Responsible for the Anti Social Behaviour Investigation Team)

Areas of particular expertise:

- Taking enforcement action
- Hoarding in Hillingdon

Claudia Meissner, Advanced Social Work Practitioner, Adult Social Care and Virindar Basi, Older Persons Specialist Team Manager, Specialist Team, Adult Social Care Areas of particular expertise:

- Social Services interaction with hoarders
- Joint working between Social Services and other areas
- Managing hoarding disorders

Satwant Singh, Nurse Consultant in Cognitive Behavioural Therapy & Mental Health (Representing Hoarding UK - http://www.hoardinguk.org/)

Areas of particular expertise:

- Treating hoarding disorder
- The relationship between enforcement action and Mental Health Services
- Dealing with hoarding without enforcement action
- Examples of interaction between Mental Health Services and Council officers
- Examples of best practice from other authority areas.

FURTHER INFORMATION

A good deal of information about enforcement powers and Hillingdon's current approach was provided in the scoping report, and at the July RESPOC meeting where it was considered. Additional information relevant to this witness session is included below.

What is Hoarding

A hoarding disorder, as defined by the NHS, is where someone acquires an excessive number of items and stores them in a chaotic manner. The items can be of little or no monetary value and usually result in unmanageable amounts of clutter. It's considered to be 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 person's quality of life or their family's for example, they become upset if someone tries to clear the clutter and their relationships with others suffer.

Why People Hoard

Hoarding 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. People with learning disabilities or people developing dementia may be unable

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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 condition in itself and often associated with self-neglect. 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. Most people with a hoarding disorder have a very strong emotional attachment to the objects.

How prevalent is Hoarding?

It has been estimated that between 2 and 5 % of adults in the UK may have symptoms of a hoarding disorder. Potentially only 5% of hoarders come to the attention of professionals, however. In Hillingdon 36 hoarding cases have been considered by the panel in the last 12-18 months, which would suggest that there could be between 600-1000 hoarders in the borough, although the severity of these cases will vary greatly. Certainly there is a perception that hoarding is fairly prevalent in the Borough.

Hoarding Protocols

Many local authorities have developed local Hoarding Protocols which set out a framework for agencies to work in partnership using an outcome focused, solution based model. They ensure that all agencies work in a joined up manner, and often provide useful resourses such as clutter diagrams, and assessment forms which gather the information needed by all agencies. They also set out at what level enforcement powers will be used. The committee may wish to consider whether such a protocol would be useful in Hillingdon. An example of a protocol from the London Borough of Merton is available via this link: http://www.merton.gov.uk/multi_agency_hoarding_protocol_and_practitioner_toolkit_draft_version_april_2014_2-2.pdf

Professional De-clutterers

Some local authorities and housing associations have used professional de-clutterers to help hoarders to part with their belongings. The benefits of this approach are the expertise and time that these businesses can bring to a situation, which may make it easier for a resident to part with their possessions. However, the costs involved are often substantial, and in many cases other professionals will have to support the work, as well as disposal arrangements being made. The Association of Professional Declutterers & Organisers have a Hoarding webpage here which explains the service in greater detail: http://www.apdo-uk.co.uk/resources.php/hoarding

APPENDICES

Appendix A - Case Study from Social Services

REVIEW TIMELINE

RESPOC: 1st Meeting - 23 September 2015	Witness Session 1 - Setting the Context LBH Adult Social Care Anti Social Behaviour Investigation Team External expert witness	Evidence and enquiry
RESPOC: 2 nd Meeting - 15 October 2015	Witness Session 2 - Reviewing the Present Approach Fire Service Planning Enforcement Mental Health Service Anti Social Behaviour Investigation Team	Evidence and enquiry
RESPOC: 12 November 2015	Agree Final Report and Recommendations	Consider Draft Final Report
Cabinet: TBC	The draft final report will be presented to Cabinet by the Chairman of the Committee.	Cabinet may approve, amend or reject as many of the report's recommendations as it wishes.