ADULT SOCIAL CARE PRACTITIONER GUIDELINES

Note: this document is for immediate reference only. Do not file it, as it will go out-of-date over time and be replaced by newer versions on-line. Always refer to the latest on-line version.

SELF NEGLECT AND HOARDING

This guidance is for Social Care staff who may encounter service users living in unsanitary and hoarded conditions. Hoarding is a serious concern to communities and to individuals, causing distress to the individual and those around them and putting both at risk of fire, falls, infection and infestation. The purpose of a hoarding and self neglect case management process is to reduce the risk to the community and the person through direct work, invoking relevant legislation where necessary. If the person says they do not want any help, you <u>must still</u> consider whether anything should or could be done, by assessing the risk to their health and wellbeing and their capacity to make relevant decisions.

After following all guidance it may become apparent that you have considered every action within your statutory power to improve the situation without any or partial success, and must then respect the person's choice to continue as they are.

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1. General Guidance:

- a) Staff who encounter clients who hoard/ neglect themselves and/ or their environment must seek support and guidance from their line manager.
- b) Records of individual and Team discussions and decisions must be kept as per recording policy. (*link to recording section*)
- c) In cases of serious hoarding, it will be beneficial to carry out a joint visit with another appropriate professional, or your manager if necessary. This will enable a joint opinion on the severity and impact of the hoarding and contribute to a more effective management plan.
- d) It is important to see the person within their home environment if there is any suggestion/ evidence of hoarding/ self neglect.
- e) In cases where hoarding is severe and there are risks to the client's health from filthy or verminous premises, or their living conditions are becoming a nuisance to neighbours/ affecting their enjoyment of their property, advice from Environmental Health (EH) should be sought and joint working should take place. This includes working together with EH officers to manage challenging behaviour and Mental Capacity issues.
- f) Consider all relevant professionals and interested parties, such as health (including GP, district nurse, podiatry, dietetics), Voluntary agencies, Housing/ Social Housing Landlords, Environmental Health, Substance Use and Social Inclusion Teams, Mental Health Teams and family if appropriate.
- g) Take into account any fire risks and refer to London Fire Brigade for free safety check
- h) Your assessment should take into account all aspects of health, social and welfare. Has there been a change in the person's behaviour? Or a significant life event?
- i) A Risk assessment should be completed taking into account the following factors
 - > Physical and psychological impact
 - Mental health
 - Mental Capacity
 - Activities of daily living
 - > Previous history/ behaviours and patters/ recent deterioration
 - Environment
 - Nutrition
 - Social Network
 - Engagement with health services
 - Risks of intervention

2. If the person is willing to accept help:

- a) Undertake a full Needs Assessment for new clients. (link to S6 Assessments) and either review or reassessment for existing clients.
- b) Undertake a full risk assessment with the client. (link to S7.8 Risk assessment)
- c) Identify and involve all the known support networks, and be sure to include informal carers and families wherever possible,
- d) If indicated you should undertake an assessment of the vulnerable person's mental capacity to choose and manage their home, clearly recording the process and outcome of the assessment. Even if a person is accepting help, they may lack capacity to maintain their

accommodation and a decision regarding their residence will need to be made in their best interests. NB, This will not automatically mean they will need to be removed from their home. *(link to mental capacity and best interests section)*

- e) For lower levels of hoarding refer to Age UK decluttering service and consider long term support to maintain the environment.
- f) Organising a 'Deep clean', do this in conjunction with their landlord who may fully or part fund the clean. We would expect the person themselves to fund the clean.
- g) Refer to the Social Inclusion Team for cases where the person is at risk of losing their tenancy, and may also have debt management problems, alcohol or substance use/ dependence / socially isolated, which is affecting their ability to care for themselves or their home.
- h) Consider organising changes to personal and home care arrangements. (link to cp section)
- i) Monitor regularly through regular professional meetings and care plan review.
- j) When assessing capacity, remember this is an assessment of capacity for whether the client has capacity to access help for their hoarding – so, does the client understand they have a problem with hoarding; is the client able to weigh up the alternative options eg being able to move around their accommodation unhindered, being able to sleep in their bed, take a bath, cook in their kitchen, sit down on a chair/sofa (this list is not exhaustive!); can the client retain the information given to them (eg, if the accommodation is cleared, you would be able to move around your accommodation etc); can the client communicate their decision. It is essential that any capacity assessment is clearly documented on case records.

3. If a person is refusing help:

You need to determine whether the individual has mental capacity to make this choice. A thorough assessment of this will be central to how you proceed and what powers you can use to make improvements to their situation. Consideration should be given, and referenced in your recording, regarding executive and problem solving capacity.

3.1 For clients who are mentally unwell

If there is evidence of mental disorder, use of a warrant under section 135(1) of the Mental Health Act 1983 may be indicated. Lack of capacity is not a prerequisite for a warrant.

This warrant provides for a police officer to enter a premises to search for and, if thought fit, remove the person to a place of safety, for the purpose either of completing a Mental Health Act assessment to detain the person, or for "other arrangements for their treatment or care". The police officer must be accompanied by an Approved Mental Health Professional and a doctor.

The warrant will be granted by a magistrate who is given evidence that there is reason to believe that a person who is mentally disordered is being neglected, or ill-treated, or kept otherwise than under proper control, or if living alone is unable to care for themselves.

This means that a person with mental ill health who is self-neglecting or is being neglected can be removed to a place of safety, which can be the mental health unit, or the emergency department of a general hospital, or any other place willing to act as such (e.g. a care home).

It must be noted that the execution of a warrant under s135(1) only permits entry and removal of the person to a place of safety. It provides no authority to assess or treat the person, or to intervene in the person's home environment. These actions can only be undertaken with informed consent or in the person's best interests if they lack capacity to make the relevant decisions.

If considering using a warrant under the Mental Health Act, advice should be sought from the AMHP duty service.

3.2 For clients assessed as having mental capacity to decide how they are living: (link to S24 consent and capacity)

- a) Talk to them thoroughly about the risks they are running and the different choices they might be able to make. Liaise with family members, their landlord (if relevant) and carers if possible.
- b) For new clients explain how an assessment and services might help them.
- c) Complete as full assessment as possible with the known information: FACE Assessment and Care/ Support Plan.
- d) If the person continues to refuse assistance, consider whether it is appropriate to liaise with the Council's Environmental Health Department – who can use Public Health legislation to ensure that filthy or verminous premises are cleansed and hazards to health removed. In particular if the environment is impacting on neighbours.
- e) The situation should be kept under regular review and the person's mental capacity re-tested over time.
- f) If the person has full mental capacity, but appears unable to care for themselves due to some physical disability or disorder, and are refusing help it may be possible to use the National Assistance Act (S47). See <u>www.careandhealthlaw.com</u> for guidance on circumstances in which this act can be used. Section 47 allows for the removal to, and detention and maintenance in, suitable premises, of persons in need of care and attention, even if they refuse to go, and refuse consent to having care and attention.

3.3 For individuals assessed as not to having Mental Capacity to decide how they are living:

- a) Each Mental Capacity assessment should be decision specific. So it may be that the person has capacity to make some decisions about their lifestyle choices, but not others. Each choice should be assessed separately, but in relation to each other.
- b) A Best Interests meeting should be held with all relevant professionals, and any family/ interested parties. If there are no family members involved, or it is thought that they would not act in the person's best interests, and the decision relates to a change to where the person is living then an IMCA should be consulted. (link to S25 Best Interests)
- c) Depending on the Best Interests Decision that is made around living conditions, the person may be required to move temporarily to allow works to be carried out and new ongoing home support arrangements to be put in place OR the person may be required to move to new permanent accommodation in their Best Interests. There is provision in the Mental Capacity Act to remove a person against their wishes, or the MHA S135 (removal to a place of safety) can also be used following a best interests decision. The Mental Capacity Act cannot be used to deprive a person of their liberty.

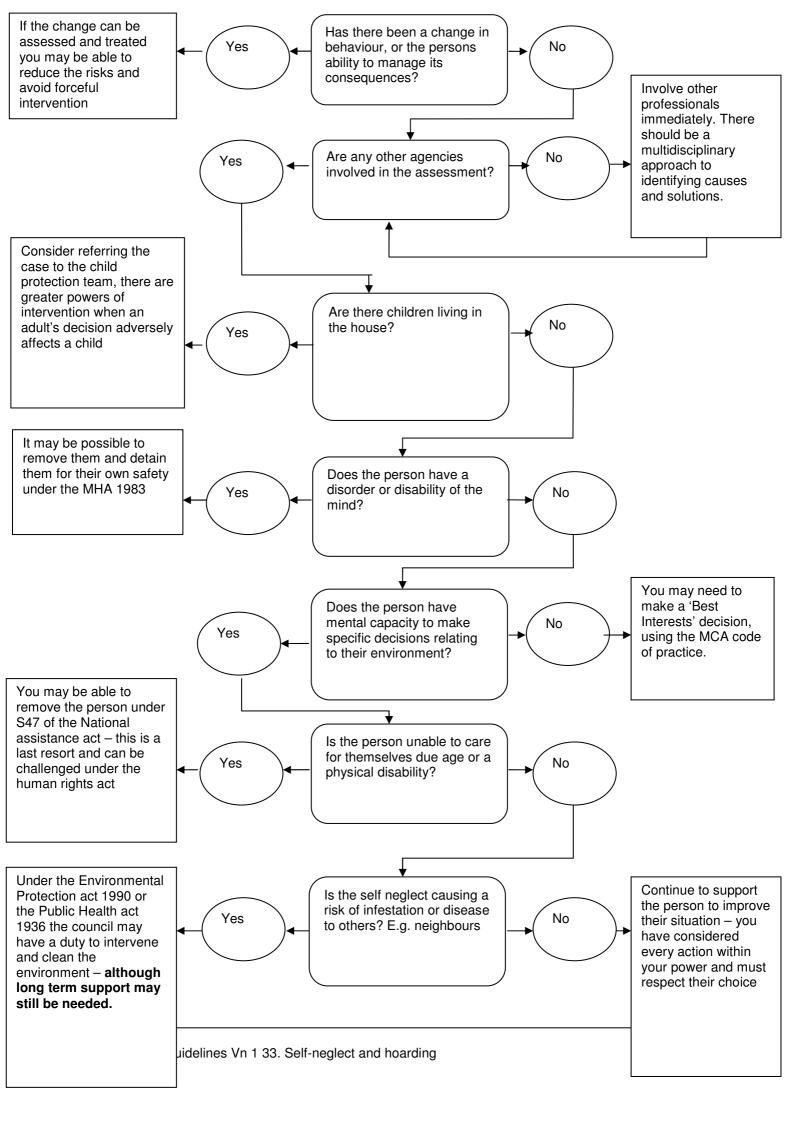
4. If there are children living in the home

- a) If you consider that children are at risk from the level of clutter/ cleanliness of the property or that they may be being neglected in any other way then discuss a referral with Children and Families services.
- b) Is the child caring for the adult in any way consider young carers services

5. Please see powers available by various agencies

AGENCY	LEGAL POWER AND ACTION	CIRCUMSTANCES REQURING INTERVENTION
Environmental health	Power of entry/ Warrant (s.287 Public Health Act) Gain entry for examination/ execution of necessary work required under Public Health Act Police attendance required for forced entry	Non-engagement of person. To gain entry for examination/execution of necessary work (All tenure including Leaseholders/ Freeholders)
Environmental health	Power of entry/ Warrant (s.239/240 Public Health Act) Environmental Health Officer to apply to Magistrate. Good reason to force entry will be required (all party evidence gathering) Police attendance required	Non engagement of person/entry previously denied. To survey and examine (All tenure including Leaseholders/ Freeholders)
Environmental health	Enforcement Notice (s.83 PHA 1936) Notice requires person served to comply. Failure to do so can lead to council carrying out requirements, at own expense; though can recover expenses that were reasonably incurred	Filthy or unwholesome condition of premises (articles requiring cleansing or destruction) Prevention of injury or danger to person served. (All tenure including Leaseholders/ Freeholders/Empty properties)
Environmental health	Litter Clearing Notice (Section 92a Environmental Protection Act 1990) Environmental Health to make an assessment to see if this option is the most suitable.	Where land open to air is defaced by refuse which is detrimental to the amenity of the locality. An example would be where hoarding has spilled over into a garden area.
Metropolitan police	Power of Entry (S17 of Police and Criminal Evidence Act) Person inside the property is not responding to outside contact and there is evidence of danger.	Information that someone was inside the premises was ill or injured and the Police would need to gain entry to save life and limb
London Fire Brigade	Prohibition or Restriction of use (Regulatory Reform (Fire Safety)Order 2005) The fire brigade can serve a prohibition or restriction notice to an occupier which will take immediate effect. In some circumstances this can apply to domestic premises including single private dwellings where the appropriate criteria of risk to relevant persons apply.	If a premises involves such risk to persons so serious that the use of the premises ought to be Prohibited or Restricted notice can be served on the responsible person (owner/occupier).

Animal Welfare agencies	Animal Welfare Act 2006	Cases of Animal mistreatment/ neglect.
such as RSPCA/Local	Offences (Improvement notice)	The Act makes it not only against the law to be cruel to
authority e.g.		an animal, but that a person must ensure that the
Environmental	Education for owner a preferred initial step, Improvement notice issued and	welfare needs of the animals are met.
Health/DEFRA	monitored, If not complied can lead to a fine or imprisonment	See also: http://www.defra.gov.uk/wildlife-pets/.
Local Authority/ Adult	National Assistance Act 1948	Where a person by way of chronic disease, age infirmity
Social Care	(Section 47 Power of Removal)	or physical incapacity is living in insanitary conditions
		and is unable to care for themselves. However, this
	This is the power to remove but not necessarily to resolve so would have to be	action may be open to challenge under the Human
	used in conjunction with other measures. An assessment would have to be	Rights Act 1998 and should only ever be used as an
	carried out regarding the person's living conditions and their best interest. This	absolute last resort, with justification such as reasonable
	would always have to be undertaken by a professional.	belief it is to prevent death.
Mental Health	Mental Health Act 1983	Evidence must be laid before a magistrate by an AMHP
	Section 135(1)	that there is reasonable cause to believe that a person
		• Is suffering from mental disorder, and is being
	Provides for a police officer to enter a private premises, if need be by force, to	Ill treated, or
	search for and, if though fit, remove a person to a place of safety if certain	Neglected, or
	grounds are met.	• Being kept other than under proper control, or
	The police officer must be accompanied by an Approved Mental Health	• If living alone is unable to care for self
	Professional (AMHP) and a doctor.	And that the action is a proportionate response to the
	NB. Place of Safety is usually the mental health unit, but can be the Emergency	risks involved
	Department of a general hospital, or anywhere willing to act as such.	



Resources

Professional Practice Note: hoarding and how to approach it. – guidance for environmental health officers and others

http://www.cieh.org/uploadedFiles/Core/Policy/Publications_and_information_services/Policy_publications/Publications/Hoarding_PPN_May09.pdf

http://www.insidehousing.co.uk/home/blogs/hoard-times/6521081.article

http://www.guardian.co.uk/society/2012/jan/03/hoarders-help-clutter-changebehaviour?INTCMP=SRCH

http://www.communitycare.co.uk/blogs/adult-care-blog/2012/06/occupational-therapistroland-simmons-says.html

http://www.guardian.co.uk/social-care-network/2012/jun/12/help-hoarding-orbitgroup?INTCMP=SRCH

- <u>www.squalorsurvivors.com</u>
- www.legislation.gov.uk
- www.communitycare.co.uk/static.../guide-to-self-neglect-assessments
- www.scie.org.uk/adults/safeguarding/selfneglect/index.asp