

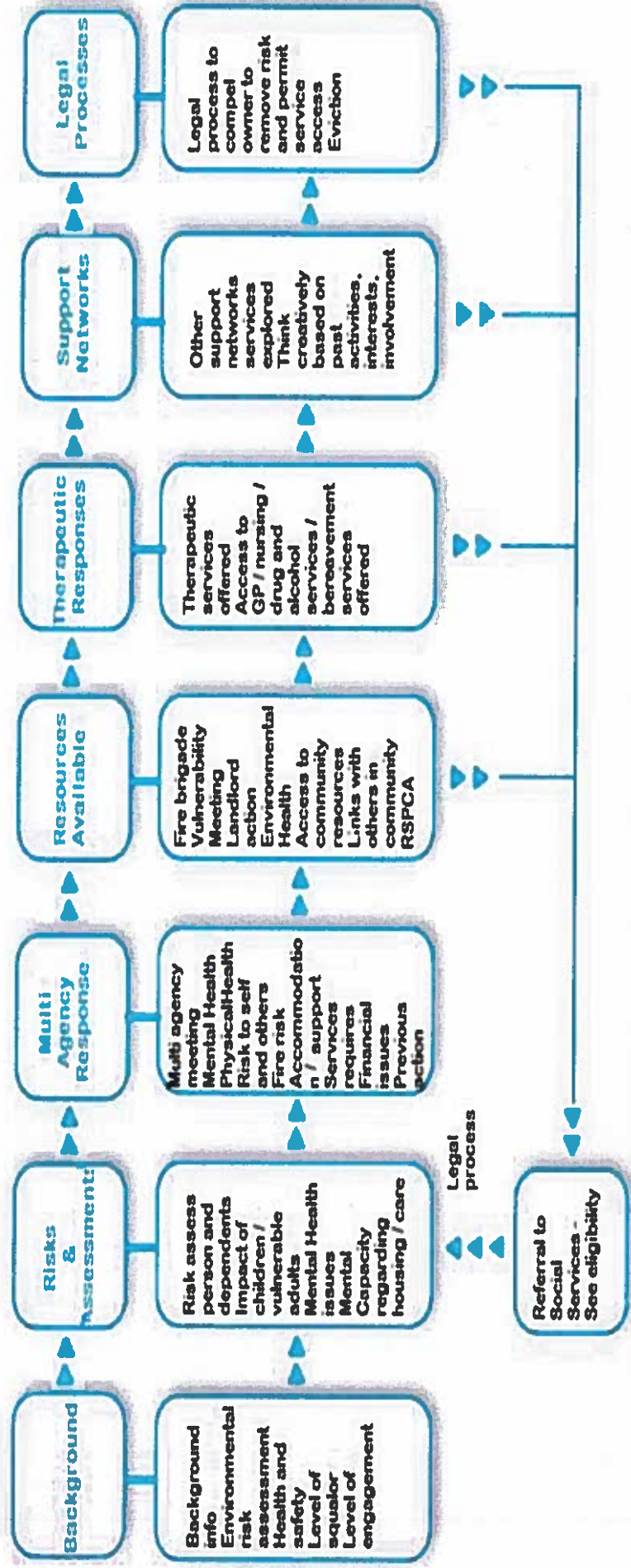
Self-Neglect and Hoarding Threshold Tool

Factors	Guidance		
	Less vulnerable	More Vulnerable	
1. The vulnerability of the person			<ul style="list-style-type: none"> Does the person have capacity to make decisions with regard to care provision / housing etc? Does the person have a diagnosed mental illness? Does the person have support from family or friends? Does the person accept care and treatment? Does the person have insight into the problems they face?
2. Types of Seriousness of Hoarding	Low risk	Moderate	<ul style="list-style-type: none"> Refer to the table overleaf. Types and Seriousness of Hoarding and self-neglect. Look at the relevant categories of hoarding and self-neglect and use your knowledge of the case and your professional judgement to gauge the seriousness of concern. Incidents that might fall outside invoked Adult Protection procedures (Low Risk) could potentially be addressed via preventative measures such as engaging with the person, developing a rapport, supporting the person to address concerns, getting the person to engage with community activities and develop / repair relationships, access to health care and counselling If a Social Worker or nurse is involved in the care report concerns to them as part of preventative measures. <p>This tool does not replace professional judgement and does not aim to set a rigid threshold for intervention. Note professional decision making reflects the fact that the type & seriousness of hoarding and self-neglect may fall within the low risk threshold, other factors may make the issue more serious and therefore warrant progression via safeguarding procedures.</p>
Hoarding Property			
Hoarding household functions			
Hoarding Health and safety			
Hoarding Safeguarding			
Self-Neglect			
3. Level of self-neglect / hoarding (See clutter rating scale for Hoarding)	Low risk	Moderate risk	<p>Determine if the hoarding / self-neglect is:</p> <ul style="list-style-type: none"> A fire risk? Impacting on the person's wellbeing (Care Act 2014 definition)? Preventing access to emergency services? Affecting the person's ability to cook, clean and general hygiene? Creating limited access to main areas of the house? Is the person at increased risk of falls?
4. Background to hoarding / self-neglect	Low impact		<ul style="list-style-type: none"> Does the person have a disability that means that they cannot care for themselves? Does the person have mental health issues and to what extent? Has this been a long standing problem? Does the person engage with services, support and guidance offered? Are there social isolation issues?
5. Impact on others	No one else affected	Others indirectly affected	<p>Others may be affected by the self-neglect or hoarding. Determine if:</p> <ul style="list-style-type: none"> Are there other vulnerable people (Children or adults) within the house affected by the persons hoarding / self-neglect? Does the hoarding / self-neglect prevent the person from seeing family and friends? Are there animals within the property that are not being appropriately cared for?
6. Reasonable suspicion of abuse	No suspicion	Indicators present	<p>Determine if there is reason to suspect:</p> <ul style="list-style-type: none"> That the hoarding self-neglect is an indicator that the person may be being abused The person may be targeted for abuse from local people That a crime may be taking place That the person is being neglected by someone else That safeguarding is required <p>*See Risk Threshold Tool for safeguarding</p>
7. Legal frameworks	No current legal issues	Some minor legal issues not currently impacting	<p>Try to determine whether:</p> <ul style="list-style-type: none"> The person is at risk of eviction, fines, non-payment issues There is an environmental risk that requires action – Public health issues There are safeguarding and animal welfare issues Fire risks that are a danger to others

Types and Seriousness	Examples of concerns that do not require formal safeguarding procedures and can be dealt with by other systems e.g. Health / GP intervention, community engagement, counselling, developing a rapport. It is likely that only concerns in the second column need to be reported – Use professional judgement	The examples below are likely to indicate the need for a referral for formal procedures. If there is any immediate danger of crime or abuse to an individual evident, call 999 straight away and make a safeguarding referral. Please see Self Neglect Hoarding journey to determine intervention process.
Level of Risk Hoarding Property	Minimal Risk <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 	High / Critical <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
Hoarding – Household functions	Moderate <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 	<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 and not used for intended purpose 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 and 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 and is at risk of notice being served by Environmental Health
Hoarding – Health and Safety	<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 	<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 Light insect infestation (bed bugs, lice, fleas, cockroaches, ants, etc.) Latex Gloves, boots or needle stick safe shoes, face mask, hand sanitizer, insect repellent. Personal Protective Equipment required.
Hoarding – Safeguarding of Children, family members and / or animals	<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. 	<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 Heavy insect infestation (bed bugs, lice, fleas, cockroaches, ants, silverfish, etc.) Visible rodent infestation

<p>Self-Neglect</p> <ul style="list-style-type: none"> • Person is accepting support and services • Health care is being addressed • Person is not losing weight • Person accessing services to improve wellbeing • There are no carer issues • Person has access to social and community activities • Person is able to contribute to daily living activities • Personal hygiene is good 	<ul style="list-style-type: none"> • Access to support services is limited • Health care and attendance at appointments is sporadic • Person is of low weight • Person's wellbeing is partially affected • Person has limited social interaction • Carers are not present • Person has limited access to social or community activities • Person's ability to contribute toward daily living activities is affected • Personal hygiene is becoming an issue 	<ul style="list-style-type: none"> • The person refuses to engage with necessary services • Health care is poor and there is deterioration in health • Weight is reducing • Wellbeing is affected on a daily basis • Person is isolated from family and friends • Care is prevented or refused • The person does not engage with social or community activities • The person does not manage daily living activities • Hygiene is poor and causing skin problems • Aids and adaptations refused or not accessed 	<p>RESPONSIBILITY</p> <p>All workers to engage with the person, develop a rapport, supporting the person to address concerns, getting the person to engage with community activities and develop / repair relationships, access to health care and counselling, improve wellbeing – Preventative measures</p>
<p>Referral to Social Services to follow process below and use resources in the toolkit</p>			

Self Neglect and Hoarding - A Journey of Support



STAGE 1 (Raise a Safeguarding Alert with Local Authority and seek advice / guidance)

Is there a potential risk to others? (Consider safeguarding adults who may have care / support needs and children)
 Is there a potential risk from others?
 Is there a potential risk to animals?
 Is there a potential fire risk?
 Is there a potential public health risk as a result of vermin / flies / other?
 Is there potential coercion / harassment affecting the decision making?
 Is there a potential crime?

YES <input type="checkbox"/>	Inform the person that you must report : <ul style="list-style-type: none"> • safeguarding issues, • to the fire service, • to environmental health • to RSPCA • to police • other 	NO <input type="checkbox"/>	Record that you have assessed risks to others and safeguarding issues. Move on to stage 2	Other info to consider: Insight, access to person, support networks
Date discussed	Provide reasons and document discussion below. Move on to stage 2	Who did you report to?	Action to be taken / outcome	
Document discussion				

STAGE 2

Is a multi-agency meeting required? Are there a number of capacity assessments that may require particular expertise, or issues / risks / tasks that require sharing?

Does the person have Mental Health problems that may require a referral to the Mental Health Team?	YES <input type="checkbox"/>	Record action taken	NO <input type="checkbox"/>	Move on to next question
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Does the person have capacity with regard to:
 Please list each financial, care, treatment, safeguarding, housing etc decision assessed and state if the person is not capacitated. Do MCA assessment, consult, get advocate, make best interest decision.
 Record information, advice, guidance given, get the person to sign and continue monitoring.

Finance	For example: 1. Paying bills - X has capacity to make decisions with regard to bill paying. X receives x benefits to cover payments. Payment not made. Supported to access Citizens Advice and given leaflets about managing bills. Informed X that they could be evicted for not paying rent. X signed or 2. Paying bills - X does not have capacity to make decisions with regard to paying bills (See capacity assessment and Best Interests Decision)
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Finance	
Personal hygiene	
Care provision	
Medical treatment	
Safeguarding	
Housing	
Aids & Adaptations	
Assistive technology	
Other	

NOTE: If a person has capacity to make an autonomous decision, even if it appears unwise, then you do not have their consent to provide, care, treatment service, unless there may be a crime, risks to others or they are being coerced / harassed into making that decision. If you consider the person to lack capacity to make a decision then the person who needs consent to provide the care, treatment or service must undertake a capacity assessment (MCA) and make a best interest decision that is the least restrictive option.

