

NORTHUMBERLAND SAFEGUARDING ADULTS BOARD

SELF-NEGLECT AND HOARDING GUIDANCE DOCUMENT FOR PROFESSIONALS

July 2021 – to be reviewed July 2024

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1.0 Introduction

1.1 The aim of this document is to provide guidance for professionals supporting adults with care and support needs who are at risk of harm because of self-neglect. The guidance aims to support good practice in managing the balance between protecting adults from self-neglect and their right to self-determination.

1.2 Partners to this guidance document will act in a way consistent with the Care Act (2014) in respect of the 6 key principles which underpin all adult safeguarding work:

- Empowerment – people being supported and encouraged to make their own decisions and informed consent
- Prevention – it is better to act before harm occurs
- Proportionality – the least intrusive response appropriate to the risk presented.
- Protection – support and representation for those in greatest need.
- Partnership – local solutions through services working with their communities as they have a part to play in preventing, detecting, and reporting neglect and abuse.
- Accountability – accountability and transparency in delivering safeguarding.

1.3 Partners to this guidance document acknowledges that public authorities, as defined in the Human Rights Act 1998, must act in accordance with the requirements of public law.

1.4 Self-neglect covers many behaviours and can range from moderate to severe. A person may have issues with self-care; neglecting to care for their own health or their surroundings; may refuse care or treatment for health and care needs; could be hoarding various types of possessions to the point of being at risk, or someone may be unable to manage their personal affairs, for instance debt and bills.

1.5 During Covid-19 restrictions in Northumberland there has been a significant increase in numbers of adults who have been “hidden” during lockdown and then presented with more acute self-neglect/hoarding. Engagement with adults who self-neglect has proven more difficult to promote a positive relationship due to the restrictions. This is in line with other local authority areas.

2.0 Definitions of self-neglect

2.1 The Care Act (2014) states self-neglect covers a wide range of behaviour relating to neglecting to care for one’s personal hygiene, health or surroundings and includes behaviour such as hoarding. It should be noted that self-neglect may not prompt a section 42 enquiry. An assessment should be made on a case-by-case basis. A decision on whether a response is required under safeguarding will depend on the adult’s ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this, without external support.

2.2 There is currently no standard definition of self-neglect. In addition to the Care Act (2014) definition above, research has suggested that there are three recognised forms of self-neglect which include:

- Lack of self-care – this may involve neglecting personal hygiene, nutrition and hydration or health. This type of neglect would involve a judgement to be made about what is an acceptable level of risk and what constitutes wellbeing.

- Lack of care of one's environment – this may result in unpleasant or dirty home conditions and an increased level of risk in the domestic environment such as health and safety and fire risks associated with hoarding. This may again be subjective and require a judgement call to determine whether the conditions within an individual's home environment are acceptable.
- Refusal of services that could alleviate these issues – this may include the refusal of care services, treatment, assessments, or intervention, which could potentially improve self-care or care of one's environment.

2.3 Alcohol and drug misuse in relation to self-neglect

- Self-neglect can impact on an adult's wellbeing but the cause of this is not directly a result of physical or mental impairment or illness but arises from acts of their own, such as drug and alcohol misuse and the chaotic lifestyle and risk-taking behaviour associated with this.
- Attachment to their substance of choice and prioritising this above all else, can impact on their relationships with others. Definition of addiction is the loss of the ability to make choices. Latin meaning for addiction implies enslavement.
- Financial difficulties can occur due to expenditure on drugs/ alcohol resulting in debts and inability to pay for food, gas, electric and other basic daily needs
- Increased risk of homelessness if unable to adhere to tenancy agreements
- Increased risk of deterioration in physical and mental health
- Risk of overdose or impure substances if purchased on the street
- Risk of engaging in criminal activity to fund their lifestyle
- Exploitation by others, including sexual exploitation.

2.4 Self-neglect and homelessness

- Multiple exclusion homelessness is a safeguarding issue and reporting a safeguarding concern should be considered in situations where this is or a risk of abuse or neglect including self-neglect.
- One of the main issues facing those sleeping rough/homeless is misuse of drugs or alcohol and they can find it difficult to access services that can help them. Their health will continue to deteriorate, and it becomes harder for them to turn their lives around.
- Learning from alcohol related safeguarding adults' reviews (2020) identified that there were correlations with self-neglect and/or homelessness.

2.5 How to recognise self-neglect?

- Poor personal hygiene
- Unkempt appearance
- Lack of essential food, clothing, or shelter
- Malnutrition and/or dehydration
- Living in squalid or unsanitary conditions
- Neglecting household maintenance
- Hoarding
- Collecting many animals in inappropriate conditions
- Non-compliance with health or care services
- Inability or unwillingness to take medication or treat illness or injury.

3.0 Definitions of hoarding

3.1 Hoarding disorder was previously considered a form of Obsessive-Compulsive Disorder (OCD). Hoarding is now considered a standalone mental disorder and is included in the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM) 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 higher than the real value.

3.2 There are 5 diagnostic criteria for identifying a case of hoarding disorder, namely:

1. Persistent difficulty discarding or parting with possessions, regardless of their monetary value.
2. This difficulty is due to a perceived need to save items and distress associated with discarding items.
3. The difficulty discarding possessions results in the accumulation of possessions that congest and clutter active living areas.
4. The hoarding causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.
5. The hoarding is not attributable to another medical condition or mental disorder.

3.3 There are 3 types of hoarding:

1. Inanimate objects – this could include one type of object or a collection of a mixture of objects such as old clothes, newspapers, books, food, containers, or papers.
2. Animal hoarding – this is the obsessive collecting of animals, often with an inability to provide minimal standards of care. The homes of animal hoarders are often eventually destroyed by the accumulation of animal faeces and infestation by insects.
3. Data hoarding – there is little research on this matter, but it could include data collection equipment such as computers, electronic storage devices or papers or it could include a need to store copies of emails and other information in an electronic format.

3.4 How to recognise hoarding?

- Evidence of fear and anxiety which may have started as a learnt behaviour or a significant event such as bereavement.
- Long term behaviour pattern.
- Excessive attachment to possessions
- Indecisiveness
- Unrelenting standards
- Socially isolated – should also consider if they are refusing home visits and insisting on office-based appointments.
- Large number of pets
- Extreme clutter.
- Self-care – they may appear unkempt and dishevelled.
- Poor insight.

4.0 Clutter Image Rating Tool (CIRT)

Clutter Image Rating Scale - Bedroom

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



Clutter Image Rating Scale - Lounge

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



Clutter Image Rating Scale – Kitchen

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



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4.1 Clutter Assessment Guidelines

Level 1 Clutter image rating 1-3	Household environment is considered reasonable. No specialised assistance is needed.	Actions
Property structure, services, and garden area	<ul style="list-style-type: none"> All entrances and exits, stairways, windows accessible. Smoke alarms fitted and functional. All services functional and maintained in good working order. Garden is accessible, tidy and maintained. 	<ul style="list-style-type: none"> Care Act assessment if appropriate and consent has been provided by the adult. Raise a request to the fire and rescue service to provide fire safety advice if necessary. If other concerns of abuse are noted a request for a decision should be made to the safeguarding triage team.
Household Functions	<ul style="list-style-type: none"> No excessive clutter, all rooms can be safely used for their intended purposes. All rooms are rated 0-3 on the CIRT. 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. 	
Health and safety	<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. 	
Safeguard of children & family members	<ul style="list-style-type: none"> No concerns for household members. 	
Animals and pests	<ul style="list-style-type: none"> Any pets at the property are well cared for. No pests or infestations at the property. 	
Level 2 Clutter image rating 4-6	Household environment requires professional assistance to resolve the clutter and the maintenance issues of the property.	
Property structure, services, and 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 	<ul style="list-style-type: none"> Complete Care Act Assessment if appropriate. If consent not provided refer to safeguarding triage team for a decision. Consider a referral to GP. Referral to debt advice if appropriate Ensure information sharing with all agencies involved to ensure a collaborative approach and a sustainable resolution. Complete practitioners' assessment tool.
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) scores between 4-5 on the clutter scale. 	

	<ul style="list-style-type: none"> • 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"> • Refer to landlord if resident is a tenant. • Refer to environmental health. • Raise a request to the fire and rescue service to provide fire safety advice. • Provide details of garden services • If other concerns of abuse are of concern or have been reported, progression to safeguarding referral and investigation may be necessary. • Referral to police if a crime is suspected. • Refer to RSPCA/animal welfare for advice and guidance.
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 • Quantities of medication are within appropriate limits, in date and stored appropriately. 	
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 alert under a different risk. 	
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.) 	
Level 3 Clutter image rating 7-9	Household environment will require intervention with a collaborative multi-agency approach with the involvement from a wide range of professionals. This level of hoarding constitutes 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.	Actions
Property structure, services, and garden area	<ul style="list-style-type: none"> • Limited access or evidence of extreme clutter can be seen inside or outside the property. • Services not connected or not functioning properly • Smoke alarms not fitted or not functioning - can the resident escape from all rooms in the event of a fire or other emergency? • Property lacks ventilation due to clutter • Interior doors missing or blocked open • Evidence of structural damage or outstanding repairs 	<ul style="list-style-type: none"> • Raise safeguarding referral as soon as practically possible. • Raise a request to the fire and rescue service to provide fire prevention advice. • Refer to environmental health.

	<ul style="list-style-type: none"> including damp and/or mould. Evidence of indoor items stored outside 	<ul style="list-style-type: none"> Visit resident to assess support needs Refer to “Hoarding Guidance Questions for practitioners” Complete practitioners’ assessment tool Ensure information sharing with all agencies involved to ensure a collaborative approach and sustainable resolution. Notify the RSPCA/Animal Welfare for further advice and guidance
Household Functions	<ul style="list-style-type: none"> Clutter is obstructing the living spaces and is preventing the use of the rooms for their 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 Resident has no safe cooking environment Resident is using candles, electric or gas heating appliances 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 	
Health and safety	<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 and dishes. Inappropriate quantities or storage of medication. Concern with the integrity of the electrics i.e inappropriate use of electrical extension cords or evidence of unqualified work to the electrics. No evidence of appropriate heating to the property. 	
Safeguard of children & family members	<ul style="list-style-type: none"> Additional concerns for householders 	
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 be 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 or rodent infestation (bed bugs, lice, fleas, cockroaches, ants, silverfish, etc.) 	

5.0 Guidance for practitioners – Questions which could be used during an assessment.

- 5.1 Practitioners should try and establish the root cause of why the adult is self-neglecting. Sometimes the reasons are clear for example a health condition may make it physically impossible, or they reject societal expectations. When assessing the situation, the practitioner should differentiate between inability and unwillingness. The first contact is crucial and needs to convey respect for the individual’s perspective. There may be many visits over a period before a relationship can be formed and therefore patience is essential. The key message is not to close the case because of non-engagement but to ensure you have considered all options and the person’s wishes before a case is closed. Further information can be found [here](#).
- 5.2 In previous cases, practitioners have found it helpful to start “small” with practical tasks. It can also be helpful to identify a family member or friend that the adult values to help build the relationship. Some services may be more welcome than others for example fire service.
- 5.3 Listed in the table 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 self-neglect and hoarding. Most adults with a hoarding problem will be embarrassed about their surroundings so adapt the question to suit your assessment with the person.

When was the last time you allowed a friend or family member to visit you at home?
How do you get in and out of your home, do you feel safe living here?
Have you ever had an accident, slipped, tripped or fallen? How did it happen?
How have you made your home safer to prevent you falling again?
How do you move safely around your home?
Has a fire ever started by accident?
How do you get hot water, lighting, heating in your home? Do these services work properly? Have they ever been tested?
Do you ever use candles or an open flame to heat and light the room 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 into 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 a 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 or shower?
Can you show me where you sleep and let me see your upstairs rooms? Are the stairs safe to walk up? Are you able to change your bed linen regularly? When did you last change them?
What do you do with your dirty washing?
How do you keep yourself warm at night? Have you got extra coverings to put on your bed if you are cold?
Do you find it difficult to use some of your rooms? If so which ones?
Do you struggle with discarding things or do you have difficulty discarding ordinary things that other people would get rid of?




5.4 Listed below are observations which could be noted in preparation for your assessment of risk or referral to safeguarding adults:

Property structure services and garden area	<ul style="list-style-type: none"> • Visually assess the access to all entrances and exits for the property. • Can the occupant escape from all rooms in the event of a fire or other emergency? • Check whether the smoke alarm works • Carry out a cursory visual assessment of the condition of the services within the property as this will help with your next course of action • Are the services connected – try them out. • Assess the garden, size, access, and condition.
Household functions	<ul style="list-style-type: none"> • Assess the current functionality of the rooms i.e., can the kitchen be used for cooking. • Select the appropriate rating on the clutter scale • Estimate the % of floor space covered by clutter • Estimate the height of the clutter in each room.
Health and safety	<ul style="list-style-type: none"> • Assess the level of sanitation in the property • Are the floors clean and are readily cleansed? • Are the work surfaces clean? • Are you aware of any odours in the property? • Is there rotting food? • Is there evidence of the use of candles, portable electric or gas heaters? • Did you witness a higher than expected number of flies and other insects? • Are household members struggling with personal care? • Is there random or chaotic writing on the walls of the property? • Are there unreasonable amounts of medication collected – prescribed or over the counter? • Is there evidence of illegal drug use or excess empty alcohol containers? • Is there any faecal matter, urine or other body fluids visible within the property?
Safeguard of children and family members	<ul style="list-style-type: none"> • Does the household contain young people, children or other vulnerable adults or do they visit?
Animals and pests	<ul style="list-style-type: none"> • Are there any pets at the property and do they appear well cared for or are you concerned about their health? • Is there evidence of any infestation e.g., bed bugs, cockroaches, fleas, 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.?

6.0 Self-neglect which is not hoarding or environmental

- 6.1 Alcohol and drug misuse can play a significant role in the lives who receive support from social services.
- 6.2 Alcohol is a causal factor in more than 60 medical conditions (Alcohol Change UK).
- 6.3 Implementing change can be difficult to other risks associated with drug and alcohol misuse i.e., suicide/self-harm; domestic abuse; mental health issues; physical health issues; child abuse; and adverse childhood experiences or previous trauma.
- 6.4 Whilst domestic abuse can be associated with drug and alcohol misuse there could also be other underlying issues for example controlling and coercive behaviour, the normalisation of abuse and social isolation etc.
- 6.5 Peer groups can impact on the engagement in services due to the culture influence which also increases risks of how substances are used.
- 6.6 [Learning from alcohol related safeguarding adults' reviews \(2020\)](#) identified 45% had self-neglect as a type of abuse identified of which 25% the principal focus was on a person with alcohol related concerns.
- 6.7 Certain people who misuse substances may have no diagnosable physical or mental impairment or have the 'appearance of need' but still present a significant risk to themselves and their own wellbeing. In such cases, it is important to give advice and guidance or signpost to other services. This should be documented to support evidence of an appropriate and proportionate response. It is widely recognised that cases involving those who misuse drugs and alcohol must often be dealt with outside usual prescribed timescales of the safeguarding adults processes. Professionals must work to forge relationships with individuals to gain their trust and confidence.
- 6.8 Attempts at engagement may need to be repeated several times before an individual begins to engage but it is important not to sever contact with an individual who is displaying self-neglect / risk taking behavioural traits purely based on refusal to engage with services or agencies regardless of capacity.

Recommended reading or useful tools

Agency		 
Hoarding UK	020 3239 1600	info@hoardinguk.org
Making Room	0330 088 5684	https://makingroom.co.uk
RSPCA		https://www.rspca.org.uk/utilities/contactus/reportcruelty
MIND	0300 123 3393	https://www.mind.org.uk/information-support/typesof-mental-healthproblems/hoarding/causes/#.XKdxJ0xFwdU
Alcohol Change UK		https://alcoholchange.org.uk/help-and-support/gethelp-now/for-practitioners
Ann Craft Trust Advice & Information	0115 951 5400	https://www.anncrafttrust.org/what-is-self-neglect
SCIE		https://www.scie.org.uk/self-neglect/policy-practice