

MALONEY PROPERTIES, INC.
PROTOCOL
FOR DEALING WITH THE PROBLEM OF HOARDING

Background

Hoarding is collecting and keeping an excess of possessions (including animals) until they interfere with day-to-day functions, including home life, health, family, work and social life; and so that functional parts of the home cannot be used for their intended purpose. Severe hoarding causes safety and health hazards.

Hoarding is recognized as both a mental health issue and a public health problem. It is typically not an immediate crisis. The hoarding behavior usually has been occurring for a long time and **there is no quick solution**. In addition, interventions without the individual's cooperation can make the problem worse. Careful assessment of the individual situation is essential for a successful outcome.

Property Managers and RSCs should collaborate with the individual, family and agencies such as mental health, adult protective services, child protective services, code enforcement, inspectional services, animal control and, ultimately the courts.

It needs to be made clear to the resident that hoarding, which causes health and safety issues, constitutes a lease violation, and that the safety and health hazards must be addressed if the individual is to retain his or her tenancy.

Steps to Take

1. Hoarding may be discovered in a variety of ways, typically – on apartment inspection, maintenance call, RSC visit, complaint of neighbors, concerned family member, REAC or other agency inspection, EMT or fire department response.
2. Property Manager should make inspection to verify the condition of the apartment and whether it meets the definition of hoarding or is an issue of poor housekeeping.¹
3. The Property Manager should then write up lease violations² and send notice of lease violation(s) to resident, arrange meeting with resident and inform RSC, if applicable.
4. Property Manager and RSC should adhere to the following:
 - Contact the resident face-to-face
 - Treat the resident with respect and dignity.
 - Respect the meaning and attachment to possessions by the resident.
 - Remain non-judgmental and factual.

¹ To help staff and resident assess hoarding and degree of severity, the “Clutter Image Rating” scale published by Oxford University Press is included with this document.

² Typically the lease violation will be failure to maintain the apartment in safe and sanitary condition. You can also cite building codes that require free and clear access to all exits and three (sometimes four) feet clear passageway.

- Evaluate for safety.
 - Reassure the resident that others will try to help work with him/her.
 - Involve the resident in seeking solutions.
 - Consider whether the resident has a right to a reasonable accommodation, such as time for a specialist to work with the resident.
5. If the hoarding presents health and safety issues (for example: fire hazard, pest control, hazardous materials, danger to elder, child, person with disabilities or animals) call the appropriate authorities. This may be a necessary step to motivate the resident to cooperate, and will be useful if management needs to proceed to eviction. Who are the appropriate authorities?
- Fire Chief
 - Inspectional Services
 - Board of Health
 - Child Protective Services
 - Elder Protective Services
 - Disabled Persons Protection Commission
 - MSPCA or Animal Rescue League

Please note, because a call to the fire department, inspectional services or board of health may have implications for the Owner of the property, the Regional Manager must be consulted before these authorities are called.

6. If the resident is receptive and cooperative, refer the resident for help³. Resources for help (for both staff and residents) include:
- Local mental health agencies
 - In Eastern Massachusetts: @ Home VNA – Michael Galatis, (781) 238-0209. The VNA in Burlington runs a pilot program that provides occupational therapy and other skilled services to help deal with hoarding. VNA first checks insurance coverage via name, birthdate and SS#. Then a nurse visits, followed by the OT, who begins to work with the resident. Costs are billed by the VNA to Medicare or MassHealth. Several of our properties have worked with Iris Gordon (OT) at the VNA.
 - For a resident over the age of 60, consult the local ASAP (home care agency) for heavy chore service.
 - The Tenancy Preservation Program (through MassHousing) may offer assistance that will preserve the tenancy or help the resident if he or she must move out.
 - The Obsessive Compulsive Foundation has a useful website, <http://www.ocfoundation.org/hoarding/>
 - Elizabeth Burden, LICSW, MPH, Senior Clinical Social Worker at Lemuel Shattuck Hospital, (617) 522-8110, offers periodic workshops on

³ Often, this is not the first time the resident has experienced hoarding behavior. Ask the resident if this has ever been an issue in the past, and if so, what resources – or who – helped the resident address the problem in the past.

hoarding and hoarding behavior at NERSC conferences, TAP trainings and NASWMA trainings.

7. If the resident is willing to cooperate, make a written agreement with the resident that specifies a time frame for resolving the lease violations, the services that the resident agrees to, and the monitoring that the Property Manager/RSC will do to insure compliance.
8. Give the resident “reasonable time” to address the problem provided the resident remains compliant with the plan that all parties have agreed to. A reasonable plan could include monthly inspections, with observable progress expected each month and continued compliance with outside services.
9. Documentation: The RSC and Property Manager need to document – both with pictures and notes to the file – the condition of the apartment; the steps that management has put in place; the resources offered to the resident; and the actions of the resident (e.g., cooperation with services or refusal of services). In the event of non-compliance, legal action will be necessary and so the documentation is particularly important. It is also a “reality check” for the resident – as you can demonstrate the change (good or bad) in the condition of the apartment and refer back to what the resident agreed to do.

Clutter Image Rating⁴

Using the three series of pictures (CIR: Living Room, CIR: Kitchen, and CIR: Bedroom) please select the picture that best represents the amount of clutter for each of the rooms of your (*or your resident's*) home. Put the number on the line below.

Please pick the picture that is closest to being accurate, even if it is not exactly right. If your home (*or your resident's home*) does not have one of the rooms listed, just put NA for “not applicable” on that line.

<u>Room</u>	<u>Number of picture that looks most like your room (1 – 9)</u>
Living Room	_____
Kitchen	_____
Bedroom #1	_____
Bedroom #2	_____
Bedroom #3	_____
Bedroom #4	_____

⁴ Based on “Clutter Image Rating”, Copyright © 2007 Oxford University Press. Images included.

Clutter Image Rating: 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

Clutter Image Rating: Bedroom

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



1



2



3



4



5



6



7



8



9

Clutter Image Rating Scale: 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