





Hoarding is...

- Acquisition of and failure to discard a large number of possessions
- Collecting items to the extent that rooms can no longer be used for the purposes for which they were intended
- Significant distress or impairment in functioning is caused by the hoarding

DSM-V Diagnosis

DSM-5 Diagnosis Criteria

Hoarding Disorder added to the DSM-5, as a distinct disorder, in the Obsessive Compulsive and Related Disorders Section

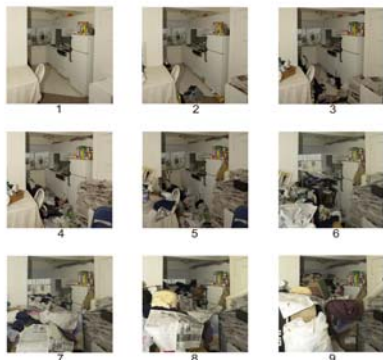
Hoarding disorder is characterized by the persistent difficulty discarding or parting with possessions, regardless of the value others may attribute to these possessions. The behavior usually has harmful effects—emotional, physical, social, financial, and even legal—for the person suffering from the disorder and family members. For individuals who hoard, the quantity of their collected items sets them apart from people with normal collecting behaviors. They accumulate a large number of possessions that often fill up or clutter active living areas of the home or workplace to the extent that their intended use is no longer possible.

Symptoms of the disorder cause clinically significant distress or impairment in social, occupational or other important areas of functioning including maintaining an environment for self and/or others. While some people who hoard may not be particularly distressed by their behavior, their behavior can be distressing to other people, such as family members or landlords.

4

Clutter Image Rating Scale: Kitchen

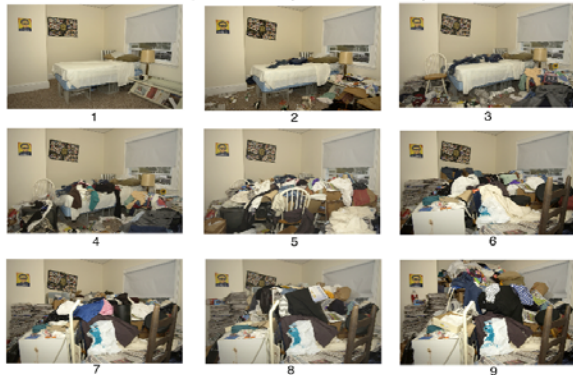
Please select the photo below that most accurately reflects the amount of clutter in your room.



By permission of
Oxford University
Press, USA.
www.oup.com

Clutter Image Rating: Bedroom

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



By permission of Oxford University Press, USA. www.oup.com

Clutter Image Rating: Living Room
 Please select the photo below that most accurately reflects the amount of clutter in your room.

By permission of Oxford University Press, USA. www.ooup.com

Municipal Team Response

Task Force Model

Who?

What?

**Least Intrusive
 Most Effective
 Longest Lasting**

Two-Tiered Response

<p>1. Initial Response</p> <p>Who?</p> <ul style="list-style-type: none"> First Responders Code Enforcement <p>What?</p> <ul style="list-style-type: none"> Case Management Form Compliance – Make it SAFE! <p>Employ local ordinances and state statutes to achieve required safety standards.</p> <p>To ensure well-being for both occupant(s) and the public</p>	<p>2. Follow-up</p> <p>Who?</p> <ul style="list-style-type: none"> Social / Support / Protective Services <p>What?</p> <ul style="list-style-type: none"> Make necessary referrals Mental health interventions and support <p>Ensures long-term safety and well-being for occupant(s) and the community</p>
--	---

Setting the stage for the day

The case of John, Maggie & Matt

- Medical issues
- DCF & DSS Reporting
- Mental Health & Community Support Needs
- Animal Control
- Building & Code Implications
 - Safety of physical space, lack of egress, fire risk

(Please find a copy of the scenario in your folder)

State of Connecticut Division of Criminal Justice and Department of Emergency Services and Public Protection

JUDITH R. DICINE, J.D.
SGT. WILFRED BLANCHETTE

LEGAL DISCLAIMER



This presentation includes important general principles of CT law regarding hoarding hazard enforcement. It is not intended to be used as legal advice, nor is it exhaustive in the areas referenced.

Questions of law on legal remedies, or proper administration and enforcement in your jurisdiction should be directed to your legal counsel.

OCCUPANT AND FIRST RESPONDER SAFETY



www.paparoni.com

13

CODE OFFICIAL DUTIES

The Basics: Discretionary vs. Ministerial

When the law requires that an official perform any certain action, failure to perform is a violation of duty. This is the case particularly where the acts are ministerial in nature, rather than discretionary.

14

Duties: The Basics

Discretionary vs. Ministerial

When is an act “discretionary?”

When a law, policy or directive includes some act or omission, and the decision of how to perform the act or whether to act at all requires or allows for professional judgment. These are referred to as “discretionary acts.”

Terms often used are “may” and “is authorized.”

15

Duties: The Basics

Discretionary vs. Ministerial

When is an act "ministerial?"

When a law, policy or directive clearly establishes that an act **must** be performed, the relevant officials are not free to exercise their own judgment in determining whether to perform the act. These are call "ministerial acts."

Often uses terms "shall", "must" or "will."

16

CT HOARDING HAZARDS: APPLICABLE INSPECTION AND ENFORCEMENT LAWS

- FIRE**
- HEALTH**
- BUILDING**
- BLIGHT**
- HOUSING**



17

Before you get there...

Two fundamental questions must be answered by a governmental official:

- a. Do I have jurisdiction?
- b. Do laws that I enforce apply?

When you arrive...

Governmental official may only enter lawfully.

18

What does this mean?

Jurisdiction: Do I have authority here geographically?

Code Application: Is this the type of structure that is covered by code or state statute?

19

GOVERNMENTAL RIGHT OF ENTRY VS.



Know the extent of your inspection and enforcement requirements and those of the rights of the individual for privacy. Governmental officials, which includes code officials, should be prepared to answer questions about your authority in a respectful and professional manner.

20

GOVERNMENTAL INSPECTION WHERE ENTRY REFUSED

When cooperation ceases and access to the property is denied, an administrative search warrant is required before entry and inspection can be accomplished unless other lawful conditions for entry exist.



21

ADMINISTRATIVE SEARCH WARRANT
PROCESS UPHELD BY U.S. SUPREME COURT

“Probable cause to issue a warrant to inspect for safety code violation exists if reasonable legislative or administrative standards for conducting an area inspection are satisfied.” *Camara v. Municipal Court*, 387 U.S. 523 (1967).

22

INSPECTION PROCESS ENFORCEMENT:
ADMINISTRATIVE SEARCH WARRANTS

An administrative search warrant is similar to a search and seizure warrant except no seizure takes place and there is no requirement to show probable cause that a violation exists. All that there is to be demonstrated to a judge is that the official has a lawful right to inspect and that the premises is within your jurisdiction.

23

INSPECTION PROCESS ENFORCEMENT:
ADMINISTRATIVE SEARCH WARRANTS

The administrative warrant affidavit and application is a simple form to complete. It must be signed by two co-affiants and sworn to or affirmed in the presence of a judge of the superior court.

Preparation of the affidavit is not complex, nor should it be.

24

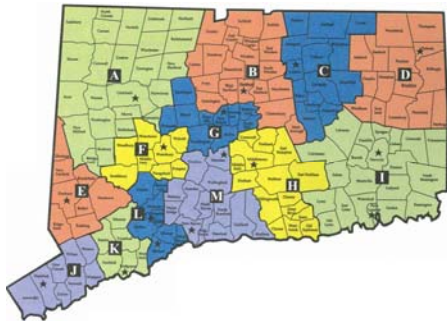
INSPECTION PROCESS ENFORCEMENT: ADMINISTRATIVE SEARCH WARRANTS

A state prosecutor must review all administrative search warrant applications before they may be submitted to a judge.

The administrative search warrant form is available through the State's Attorney's Office or the State Fire Marshal's Office.

25

CT'S 13 JUDICIAL DISTRICTS



- A: Litchfield
- B: Hartford
- C: Tolland
- D: Windham
- E: Danbury
- F: Waterbury
- G: New Britain
- H: Middlesex
- I: New London
- J: Stamford-Norwalk
- K: Fairfield
- L: Ansonia-Milford
- M: New Haven

26

DCJ HOUSING PROSECUTOR ASSIGNMENTS AS OF 5/2017

<http://www.ct.gov/dca/cwp/view.asp?c=1798&w=47708>

Judith R. Dicine, Supv. Asst. State's Attorney, Housing Matters
Ansonia/Milford (Derby GA), Litchfield, Tolland and Windham JDs (A,C,D,L)
(judith.dicine@ct.gov) 203-773-6755

Patrice K. Palombo, Senior Assistant State's Attorney
Ansonia/Milford (Milford GA), New Haven and Waterbury JDs (F,L,M)
(patrice.palombo@ct.gov) 203-773-6755

Donna Parker, Senior Assistant State's Attorney
Fairfield, Stamford/Norwalk and Danbury JDs (K,J,E)
(donna.parker@ct.gov) 203-579-7237

Steven M. Lesko, Assistant State's Attorney
Hartford, Middlesex, New Britain, and New London JDs (B, G, H, I)
(steven.lesko@ct.gov) 860-756-7810

27

FIRE SAFETY LAWS



28

CT General Statute Sec. 29-305 Inspections

(b) Each local fire marshal shall inspect or cause to be inspected, at least once each calendar year or as often as prescribed by the State Fire Marshal pursuant to subsection (e) of this section, in the interests of public safety, all buildings and facilities of public service and all occupancies regulated by the Fire Safety Code within the local fire marshal's jurisdiction, except residential buildings designed to be occupied by one or two families which shall be inspected, upon complaint or request of an owner or occupant, only for the purpose of determining whether the requirements specified in said codes relative to smoke detection and warning equipment have been satisfied.

29

CT General Statute Sec. 29-305 Inspections, cont.

(d) Upon receipt by the local fire marshal of information from an authentic source that any other building or facility within the local fire marshal's jurisdiction is hazardous to life safety from fire, the local fire marshal shall inspect such building or facility.

30

CT General Statute Sec. 29-306(a)

Fire Marshal **shall** issue orders in **any** premises with:

- (1) **combustible or explosive matter, dangerous accumulation of rubbish or any flammable material especially liable to fire, that is so situated as to endanger life or property,**
- (2) **obstructions or conditions that present a fire hazard to the occupants or interfere with their egress in case of fire,**
- (3) a condition in violation of the statutes relating to fire prevention or safety, or any regulation made pursuant thereto...

31

CGS Sec. 29-306(b)
Criminal and Civil Actions

CGS Sec. 29-306(b)

- the Local Fire Marshall **shall** notify the **prosecuting attorney** if the owner or occupant fail to abate a hazard as reasonably ordered.
- the LFM may ask the **municipality's attorney** to seek an additional remedy of a civil injunction to close or restrict the use of the building through a civil court order.

32

What if there is imminent danger?
Order to Vacate CGS Sec. 29-306(c)

CGS Sec. 29-306, cont.

- (c) allows a local fire marshal or police officer to order **any** building vacated, where such person determines that there exists in the building a *risk of death or injury* from one or more of the *enumerated violations* known as the "five deadly sins", which include:

cont. ...

33

CGS Sec. 29-306(c) Vacate Order
 “Five Deadly Sins”

1. **Blocked, insufficient or impeded egress**
2. Required fire protection or warning system shut off or maintenance failure
3. Unpermitted flammable or explosive material or in excess of permitted quantities
4. Unpermitted fireworks or pyrotechnics
5. Exceeding occupancy limit established by FM

34

Vacate Order Review by
 State Fire Marshal

CGS Sec. 29-306(c), cont.

- If imminent egress hazards cannot be corrected within **FOUR HOURS**, this statute and the SFM Directive #10 require notification to the State Fire Marshal who reviews the circumstances and may either uphold, modify or reverse the vacate order.

35

Policy Directive #10
 STATE OF CT
 OFFICE OF STATE FIRE MARSHAL

SUBJECT: Restricting the Use of a Building – Immediate Hazard

PURPOSE:

(1) To establish a uniform enforcement platform for fire marshal’s and police officers with guidance on the application of CGS 29-306 (c) for the issuance of a verbal or written order to immediately vacate a building for certain specified conditions that they determine to exist in a building and that place the occupants at risk for injury or death from these conditions.

(2) Establish a uniform method of notifying the state fire marshal that such an order has been issued, and what minimum information must be reported to the state fire marshal.

Link to OSFM Directive #10:
http://www.ct.gov/dcs/lib/dcs/office_of_state_fire_marshal_files/directives-files/10/pd10.pdf

36

HEALTH LAWS



37

CGS Sec. 19a-206 DIRECTORS OF HEALTH

(a) Town, city and borough directors of health or their authorized agents shall, within their respective jurisdictions, examine all nuisances and sources of filth injurious to the public health, cause such nuisances to be abated and cause to be removed all filth which in their judgment may endanger the health of the inhabitants.

38

CGS Sec. 19a-206, cont. Right of Entry for Health Official

(a)...Any local director of health or his authorized agent or a sanitarian authorized may enter all places within his jurisdiction where there is just cause to suspect any nuisance or source of filth exists by such director, and abate or cause to be abated such nuisance and remove or cause to be removed such filth.

39

CGS Sec. 19a-206, cont.

(b) When any such nuisance or source of filth is found on private property, such director of health shall order the owner or occupant of such property, or both, to remove or abate the same within such time as the director directs. If such order is not complied with, within the time fixed by such director: (1) Such director, or any official of such town, city or borough authorized to institute actions on behalf of such town, city or borough, may institute and maintain a civil action for injunctive relief in any court of competent jurisdiction to require the abatement of such nuisance, the removal of such filth and the restraining and prohibiting of acts which caused such nuisance or filth, and such court shall have power to grant such injunctive relief upon notice and hearing;

40

CGS Sec. 19a-206, cont.

(e) When such nuisance is abated or source of filth is removed from private property, such abatement or removal shall be at the expense of the owner or occupant of such property, or both, and damages for such abatement or removal may be recovered against them by the town, city or borough in a civil action as provided in subsection (b) or in a separate civil action brought by the director of health or any official of such city, town or borough authorized to institute civil actions.

41

CT PUBLIC HEALTH CODE - Conditions Specifically Declared To Constitute Public Nuisances

Sec. 19-13-B1 includes:

Discharge or exposure of sewage, garbage or any other organic filth into or on any public place in such a way that transmission of infective material may result thereby

Stagnant water likely to afford breeding places for mosquitoes within a residential district or within a distance of one thousand feet there from.

Buildings or any part thereof which are in a dilapidated or filthy condition which may endanger the life or health of persons living in the vicinity.

42

CT PUBLIC HEALTH CODE –
Abatement of Nuisance

19-13-B2. Abatement of nuisance (a) Any local director of health, upon information of the existence of a nuisance or any pollution occurring within his jurisdiction, or when any such nuisance or pollution comes to his attention, shall, within a reasonable time, investigate and, upon finding such nuisance or pollution exists, shall issue his order in writing for the abatement of the same.

(b) Such order shall specify the nature of such nuisance or pollution and shall designate the time within which such abatement or discontinuance shall be accomplished; and if such order is not complied with within the time specified, the facts shall be submitted to the prosecuting authority. Copies of all orders shall be kept on file by the director of health in his office and copies of the same shall be furnished the state commissioner of health on request.

43

BUILDING LAWS



44

CGS Sec. 29-393
Right of Entry

On receipt of information from the local fire marshal or from any other authentic source that any building in his jurisdiction, due to lack of exit facilities, fire, deterioration, catastrophe or other cause, is in such condition as to be a hazard to any person or persons, the building inspector shall immediately make an inspection by himself or by his assistant,...

45

CGS Sec. 29-393 Right of Entry, cont.

...and **may make orders** for additional exit facilities or the repair or alteration of the building if the same is susceptible to repair or both or for the removal of such building or any portion thereof if any such order is **necessary in the interests of public safety**.

46

CT State Building Code Sec. 116: Unsafe Structures and Equipment

The Building Official **shall** deem structures or equipment an unsafe condition which are or become:

- Unsafe
- Insanitary
- Deficient because of inadequate means of egress, inadequate light and ventilation

47

SBC Sec. 116: Unsafe structures and equipment, cont.

- Constitute a fire hazard
- Or are otherwise dangerous to human life or public welfare
- Or that involve illegal or improper occupancy or inadequate maintenance.

The BO **shall** cause a report to be filed on an unsafe condition. SBC 116.2

48

SBC Sec. 116: Unsafe structures and equipment, cont.

The unsafe structure shall be taken down and removed or made safe, as the BO deems necessary.

Formatted order for Unsafe Structure may be found at State Building Inspector page:
<http://www.ct.gov/dcs/cwp/view.asp?a=4447&q=522242>

49

SBC 117 Emergency measures

Imminent danger of failure or collapse of a building or structure or any part thereof which endangers human life, or

Has fallen and human life is endangered by the occupation.

BO is authorized and empowered to order and require the occupants to vacate forthwith. (Formatted order at same page.)

50

HOUSING LAWS



51

CT Lacks a state housing Code, but many CT municipalities have adopted a local housing code such as the International Property Maintenance Code, which is used as example.

(IPMC) Sec. 305: Interior Structure

SECTION 305 INTERIOR STRUCTURE

305.1 General. The interior of a structure and equipment therein shall be maintained in good repair, structurally sound and in a sanitary condition. *Occupants* shall keep that part of the structure which they occupy or control in a clean and sanitary condition. Every *owner* of a structure containing a *rooming house, housekeeping units, a hotel, a dormitory, two or more dwelling units* or two or more nonresidential occupancies, shall maintain, in a clean and sanitary condition, the shared or public areas of the structure and *exterior property*.

52

IPMC Section Sec. 308: Rubbish & Garbage

308.1 Accumulation of rubbish or garbage. All *exterior property* and *premises*, and the interior of every structure, shall be free from any accumulation of *rubbish* or garbage.

308.2 Disposal of rubbish. Every *occupant* of a structure shall dispose of all *rubbish* in a clean and sanitary manner by placing such *rubbish* in *approved* containers.

308.2.1 Rubbish storage facilities. The *owner* of every occupied *premises* shall supply *approved* covered containers for *rubbish*, and the *owner* of the *premises* shall be responsible for the removal of *rubbish*.

308.2.2 Refrigerators. Refrigerators and similar equipment not in operation shall not be discarded, abandoned or stored on *premises* without first removing the doors.

53

BLIGHT LAWS



54

BLIGHT – CIVIL REMEDIES

From the Municipal Powers Act Section CGS 7-148(c)(7)(H)(xv):

“Make and enforce regulations for the prevention and remediation of housing blight, including regulations reducing assessments and authorizing designated agents of the municipality to enter property during reasonable hours for the purpose of remediating blighted conditions, provided such regulations define housing blight and require such municipality to give **written notice** of any violation to the owner and occupant of the property and **provide a reasonable opportunity for the owner and occupant to remediate** the blighted conditions prior to any enforcement action being taken, and further provided such regulations **shall not authorize such municipality or its designated agents to enter any dwelling house or structure on such property**, and including regulations establishing a duty to maintain property and specifying standards to determine if there is neglect, prescribe civil penalties for the violation of such regulations of not less than ten or more than one hundred dollars for each day that a violation continues and, if such civil penalties are prescribed, such municipality shall adopt a citation hearing procedure in accordance with section 7-152c;”

55

BLIGHT – CRIMINAL REMEDIES

CCS Sec. 7-148o. Willful violation of ordinances concerning prevention and remediation of housing blight. Penalties. (a) Except as provided in subsection (b) of this section, any person who, **after written notice and a reasonable opportunity to remediate** blighted conditions, willfully violates any regulation adopted pursuant to subparagraph (H)(xv) of subdivision (7) of subsection (c) of section 7-148 concerning the prevention and remediation of housing blight shall be **finned by the state not more than two hundred fifty dollars for each day** for which it can be shown, based on actual inspection of the property on each such day, that the blighted conditions continued to exist after written notice to the owner or occupant as provided in this section, and the expiration of a reasonable opportunity to remediate.

(b) Any person who is a new owner or new occupant shall, upon request, be granted a thirty-day extension of the notice and opportunity to remediate provided pursuant to subsection (a) of this section. For the purposes of this section, “new owner” means any person or entity who has taken title to a property within thirty days of the notice, and “new occupant” means any person who has taken occupancy of a property within thirty days of the notice.

56

RELOCATION LAWS



57

RELOCATION - CGS 8-266

Uniform Relocation Act applies in:
 Circumstances involving removal of persons from use or occupancy of buildings by officials. Affixes to shut down of a premises under relevant CT General Statutes.
 Requires referral to Uniform Relocation Act administrator for your town, city or district for assistance to affected occupants.

58

**CONTACT INFORMATION
 CT DCJ, OCSA – HOUSING**

Judith R. Dicine, J.D.
 Supervisory Assistant State’s Attorney,
 Housing Matters
 State of CT, Division of Criminal Justice
 121 Elm Street, New Haven, CT 06510
 Office Phone: 203 773-6755
 FAX: 203 789-6459
 Email: judith.dicine@ct.gov (BEST FOR CONTACT)

59

Contact Information

Sergeant Wilfred J. Blanchette III
 Office: 860-706-5600
 Cell: 860-888-3762
 24-hour message center 860-685-8190
 Email: wilfred.blanchette@ct.gov

60

Animal Hoarding Resources



Ray Connors
Connecticut Department of Agriculture
State Animal Control Unit

61

WARNING

CONTENTS OF THIS PROGRAM ARE GRAPHIC IN NATURE



62

Not Just An Animal Control Problem



63

Animal Hoarding is different in many ways from hoarding inanimate objects



64

Animal Hoarding May Be A Criminal Act



65

SECTION 53-247CGS
CRUELTY TO ANIMALS

66

Deprives of necessary sustenance



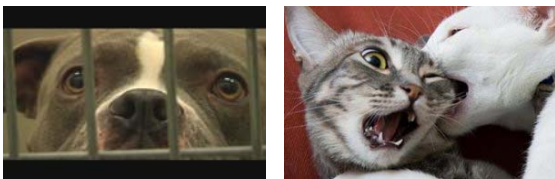
67

Having impounded or confined and fails to give proper care




68


Neglects to cage or restrain animals to prevent injury to themselves or other animals



69



Fails To Supply With:
Wholesome Air




Take care to get what you like or you will be forced to like what you get. Where there is no ventilation fresh air is declared unwholesome.
(George Bernard Shaw)

izquotes.com

70

Food or Water



71

Having charge or custody inflicts cruelty or fails to provide proper food, drink



72

Defining Animal Hoarders

Large Number of Animals

Failure to provide minimal standards of sanitation, space, nutrition, and veterinary care for the animals

Inability to recognize the effects of this failure on the welfare of the animals, human members of the household, and the environment

73

Defining Animal Hoarders

Obsessive attempts to accumulate or maintain a collection of animals in the face of **progressively deteriorating conditions**

Denial or minimization of problems and living conditions for people and animals


74

JUSTIFICATION

ANIMALS ARE SURROGATE CHILDREN

NO ONE ELSE CAN CARE FOR THEM

WILL NOT SEEK HELP FOR FEAR OF THE ANIMALS BEING EUTHANIZED



75

DO YOU NEED RESOURCES?



76



77

Working With The Person

EVERY CASE IS NOT AN AUTOMATIC SEIZURE OF THE ANIMALS



78

BUILD A TRUSTING RELATIONSHIP

ARE THE ANIMALS VACCINATED?

HAS A VETERINARIAN SEEN THE ANIMALS?



79

WILL THEY RELEASE SOME OF THE ANIMALS?



80

Cooperation Stops



81

Is There Probable Cause?



82

DOES THE SITUATION MEET THE ELEMENTS OF THE CRIME?

83

- ARE THEY PROVIDING PROPER CARE?
- ARE THEY PROVIDING PROPER FOOD & WATER?
- HOW IS THE AIR QUALITY?
- SANITATION?

84

Search Warrant



85

Before you go to serve the warrant



86

What am you going to need?

Help
Mutual Aid From
Surrounding Towns
You Are Not Going To Do
This Alone



87

How Many Animals?




Do The Math

$$\begin{aligned} 2 > -3 & \quad + - \\ 0.999\dots = 1 & \quad \infty \quad \times \quad - \\ \pi \approx 3.14 & \quad \div \\ \sqrt{2} & \quad 1 + 2 \cdot 3 \quad 5^2 \\ & \quad (1 - 2) + 3 \\ 5(2 + 2) & \quad 101_2 = 5_{10} \end{aligned}$$

Hidden Animals You Didn't Know About



Animals living in walls




91

Planning Is Important

Where Are You Going To House All Of The Animals Seized?

Prepare For Long Term Housing



92

EVERY ANIMAL EXAMINED



93

What's It Going To Cost?



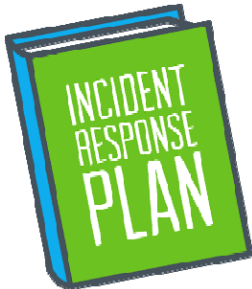
94

Who's Going To Handle The Press?



95

Have a Plan!!!!



96

RESOURCES YOU WILL NEED

97

POLICE DEPARTMENT



98

HEALTH DIRECTOR



99

SOCIAL SERVICES



100

CHILDREN & FAMILIES



101

FIRE DEPARTMENT/FIRE MARSHAL



102

Building Inspector



103

Local Emergency Management Director



104

FOLLOW PROPER PROTOCOL

CONTACT LOCAL EMD
LOCAL EMD CONTACTS REGIONAL COORDINATOR
REGIONAL COORDINATOR CONTACTS SART TEAMS
FOR ADDITIONAL RESOURCES

105

Remember:
You May Be Multiple Days On Scene



106

CONTACT INFO

Raymond Connors
CT DEPT OF AGRICULTURE
raymond.connors@ct.gov
(860) 713-2506



107



Connecticut Division of
Emergency Management and
Homeland Security (DEMHS)

HENRY PASZCZUK
REGIONAL PLANNER

DEMHS

The CT Division of Emergency Management & Homeland Security (DEMHS) is a division within the Department of Emergency Services & Public Protection (DESPP)

109

DEMHS

The DEMHS Office of Emergency Management (OEM) is headed by the State Emergency Management Director

The mission of this Office is to provide a coordinated, integrated program for state-wide emergency management, including strategic and operational all-hazards planning, community preparedness, exercise, training, and grants planning and management.

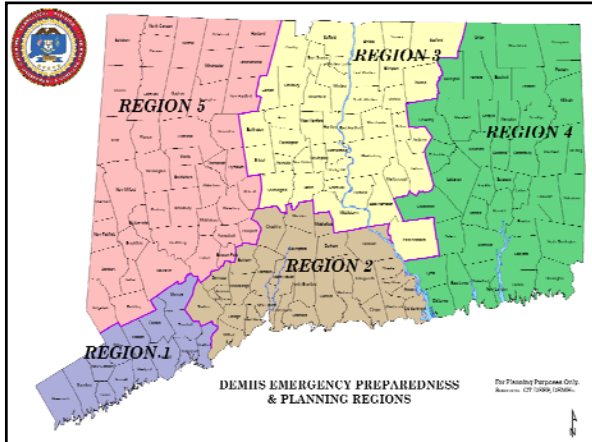
110

DEMHS

To support the regional model, DEMHS maintains five regional offices.

A Regional Coordinator is assigned to each regional office

111



DEMHS

The five DEMHS Regional Offices serve as direct points of contact to local jurisdictions to provide:

- on-site monitoring of localized emergencies;
- requests for assistance;
- assistance to local jurisdictions
- coordinate a regional response to ongoing emergency situations.

113

DEMHS

DEMHS Regional Coordinators serve as the primary interface with the local chief elected officials/ executive officers and emergency management directors.

114

DEMHS

Regional Resources

- State Animal Response Teams (SART)
 - One in each DEMHS Region
- Animal Cages & Other Animal Related Equipment
 - Available for pick up or contained in trailers
- Light Towers
 - For scene safety if needed

115

DEMHS

If there is a need for a SART team the local Emergency Local Emergency Management Director would contact the Regional Coordinator to activate the team for insurance coverage

116

DEMHS

The Regional Coordinator would contact the SART leader and inform them of the situation and provide contact information for the Emergency Management Director (EMD)

The SART leader would contact the EMD for further information and specific incident needs

117

DEMHS

The Regional Coordinator would monitor the incident for situational awareness and to see if there are any further resource or coordination needs

The Regional Coordinator would also monitor resource deployment to determine availability of resources for any additional incidents


118

DEMHS

The Regional Coordinator would confirm with the Emergency Management Director during incident termination that there are no unmet needs

The Coordinator would make sure that any deployed assets are returned to maintain operational readiness

119



Newington Human Services

KAREN FUTOMA, MSW
DIRECTOR OF HUMAN SERVICES
TOWN OF NEWINGTON

Mission Statement

We serve residents of all ages to achieve their maximum quality of life by increasing their knowledge, skill and self-sufficiency through a comprehensive continuum of social work and community services.

History

The Newington Department of Human Services was established in 1955 to assist Newington residents with social, emotional and economic needs. Since the inception of the department, the community has grown and we have evolved into a full-service agency.

In an effort to meet Newington's changing needs, the Department offers a wide variety of programs that serve children, youth, families, adults, persons with disabilities and the elderly.

121

Newington Department of Human Services
 131 Cedar Street Newington, CT. 06114
 (860) 665-8500, Fax (860) 665-8599
 e-mail: humanservices@newingtonct.gov
For information, programs and confidential services

<p>COMMUNITY EDUCATION Parent Education Workshops/Courses, Support Groups Prevention/Education Programs Topics including: Substance Use-current trends, Early Childhood Development, Internet Safety, Elderly Care-giving Diversity & Disability Awareness Some Programs offered in Collaboration with Schools, Civic, Religious, Private & Business Organizations.</p>	<p>SOCIAL CASEWORK Food Bank/Clothing Closet, Holiday Food & Gift Program Basic Needs Assistance, Energy Applications Housing, homelessness, evictions, & foreclosure issues Medicare Counseling Medical coverage consultation & referrals Assistance with Public & Private Financial Assistance Resources Coordination with Federal, State & Local Agencies</p>
<p>INFORMATION & REFERRAL Day Care, Elder Care, Housing, Community Resources, Social Service Agencies</p>	<p>CRISIS RESPONSE Emergency Disaster Response Safety checks, Shelter Dementia, Health, Mental Health Domestic Violence Persons At-Risk</p>
<p>POSITIVE YOUTH DEVELOPMENT PROGRAMS Adventure Learning Program-Success (ALPS) SCORE After-School Activities Summer Youth Adventure Adventure Challenge Ropes Course Youth Leadership Mentoring Community Service Projects</p>	<p>CASEWORK & COUNSELING (Children, Youth, Adults, Seniors & Families) Presenting Issues: Child & Family Development Impact from Divorce, Death or Remarriage Child or Elderly Abuse/Neglect Alcohol or Drug Abuse Police Diversion/Lawenla Review Board Health, Mental Health Individual or Family Grief</p>

© Newington, Connecticut 2016

122

Information & Referral



As Human Service advocates we assist residents in accessing eligible benefits, services and resources. Skilled and professionally trained staff respond to inquiries regarding housing, financial assistance, childcare, eldercare, mental health, substance use, homecare, legal issues and other topics.

Fiscal year 2015-16, we responded to 10,906 I & R requests, an increase from last year (FY 2014-2015 9,467 requests).

123

Social Casework

Social workers provide case management and supportive counseling to adults, elderly and families. Individuals present with their own needs or concerns for others. Referrals come from many different sources including: Police, Fire and other Town departments, neighbors, relatives, self-initiated, schools, medical providers, etc.

Areas may include financial, medical, disabilities, family relations, mental health or at-risk and crisis intervention.

Financial issues may include evictions, foreclosures, overdue taxes, utility bills, heat, transportation, employment, medical insurance, Medicare counseling, entitlement applications, eyeglasses, dental, homecare.

Most situations necessitate multiple sessions and ongoing case management.

124

Teamwork & Collaboration

Human Services staff work closely with town departments to insure and promote the safety and well being of our residents, especially those most vulnerable. When appropriate and necessary, as mandated reporters, we make referrals to DCF and Elderly Protective Services. We have also petitioned Probate Court for appointment of Conservators, when there was no one else to do so.

We work with the Senior & Disabled Center, Police, Fire, NEMS, Health, Building, Zoning Enforcement, Tax, Highway, Parks & Recreation, Library. Many of us meet regularly to review, share expertise and assist each other regarding blight and safe home concerns. We initiated and are members of our local Safe Homes Task Force to promote the safety and well-being of our residents.

125

Crisis Intervention

We work closely with first responders and schools to assist in crises.

Examples include fire, water main breaks, loss of power and/or heat, at-risk individuals with mental and physical health concerns that may need services and/or hospitalization, a referral to DCF or Elderly Protective Services, suicides or other deaths, health and safety concerns including hoarding or other dangerous living conditions, homelessness and domestic violence.

126



Department of Mental Health & Addiction Services

SHELLY NOLAN, MS, LPC
BEHAVIORAL HEALTH CLINICAL MANAGER, COMMUNITY SERVICES DIVISION, OFFICE OF THE COMMISSIONER

DMHAS Mission

The Connecticut Department of Mental Health and Addiction Services is a health care agency whose mission is to promote the overall health and wellness of persons with behavioral health needs through an integrated network of holistic, comprehensive, effective, and efficient services and supports that foster dignity, respect, and self-sufficiency in those we serve.

128

DSM-5 Diagnosis Criteria

Hoarding Disorder added to the DSM-5, as a distinct disorder, in the Obsessive Compulsive and Related Disorders Section

Hoarding disorder is characterized by the persistent difficulty discarding or parting with possessions, regardless of the value others may attribute to these possessions. The behavior usually has harmful effects—emotional, physical, social, financial, and even legal—for the person suffering from the disorder and family members. For individuals who hoard, the quantity of their collected items sets them apart from people with normal collecting behaviors. They accumulate a large number of possessions that often fill up or clutter active living areas of the home or workplace to the extent that their intended use is no longer possible.

Symptoms of the disorder cause clinically significant distress or impairment in social, occupational or other important areas of functioning including maintaining an environment for self and/or others. While some people who hoard may not be particularly distressed by their behavior, their behavior can be distressing to other people, such as family members or landlords.

129

Crisis Services

DMHAS provides regional crisis services for adults 18 years of age or older. Individuals can call the line and be screened by a clinician who will determine the next course of action which may include referrals for community services, setting up an in person assessment in the office, dispatching a member of the crisis team to the community for further intervention, or calling 911 for immediate response.

130

Crisis Services (continued)

Hospitalization

- If the person is deemed to be at significant "risk", the team may send the person to the hospital for further psychiatric evaluation. In some cases, if the person is unwilling to go to the hospital but it is believed that they are at risk to himself/herself or others, a Physician Emergency Certificate or PEC may be necessary.
- There are specific criteria that warrant this type of action.
 - substantial risk for physical harm to oneself (suicide)
 - substantial risk for physical harm to someone else (homicide)
 - the person is deemed to be "gravely disabled" This means that the individual is at risk for serious harm because of not being able to provide for their basic needs such as food, clothing, shelter or safety due to a mental illness.
- Even in these cases, it is important to remember that inpatient hospitalization will likely be short term. It is the goal of the department to provide services to individuals in the least restrictive setting possible.

131

Community Services

There are a number of DMHAS designated Local Mental Health Authorities (LMHA) throughout the state and complete list is on the DMHAS website.

- The target population of DMHAS is individuals with SMI or Severe Mental Illness, such as schizophrenia, schizoaffective disorder or bipolar illness who receive Medicaid benefits.
- Most individuals with Hoarding Disorder will not fall into this category

- DMHAS also provides limited funding to private, non-profit agencies who work with individuals with a variety of mental health and substance use issues. Individuals may find it helpful to contact their insurance company to find out what services may be covered within their benefit package. Those with Husky insurance or Medicaid can contact Beacon Health Options at 877-552-8247 or www.ctbhp.com.

132

Challenges in the Mental Health Service System

As a general rule, community mental health services are voluntary. An individual needs to be receptive to help and an active part of the recovery process in order for it to be effective and create change.

This can be frustrating for people in the person's life who recognize the issue and especially true for hoarding cases. Often family members, friends and even helping professionals are ready to make change before the individual is ready to seek or accept help. In some cases it may be beneficial for concerned family and friends to seek personal support for themselves around this challenging issue.

133



Connecticut Department of Children & Families (DCF)

KRISTINE S. RIVERA, LCSW
SOCIAL WORK SUPERVISOR
CHILD WELFARE TRAINER
ACADEMY FOR WORKFORCE DEVELOPMENT

Mission and Transformation of the Department

"Working together with families and communities for children who are healthy, safe, smart and strong."

Seven Cross Cutting Themes:

- Implementing strength-based family policy, practice and programs;
- Applying the neuroscience of early childhood and adolescent development;
- Expanding trauma-informed practice and culture;
- Addressing racial inequities in all areas of our practice;
- Building new community and agency partnerships;
- Improving leadership, management, supervision and accountability; and
- Becoming a learning organization.

135

Mandated Reporting

Connecticut General Statutes (State law) identify professionals who, because their work involves regular contact with children, are mandated by law to report **suspected** child abuse and neglect.



136

Who Must Report

- Any person paid to care for a child in any public or private facility, child day care center, group day care home or family day care home which is licensed by the State.
- The Child Advocate and any employee of the Office of the Child Advocate
- Chiropractors
- Dental Hygienists
- Dentists
- Department of Children and Families Employees
- Department of Public Health / Office of Early Childhood employees responsible for the licensing of child day care centers, group day care homes, family day care homes or youth camps.
- Domestic Violence Counselor
- Family Relations Counselor, Family Relations Counselor Trainee, or Family Services Supervisor employed by the Judicial Department.
- Licensed/Certified Alcohol and Drug Counselors
- Licensed/Certified Emergency Medical Services Providers
- Licensed Foster Parents
- Licensed Marital and Family Therapists
- Licensed or Unlicensed Resident Interns
- Licensed or Unlicensed Resident Physicians
- Licensed Physicians
- Licensed Practical Nurses
- Licensed Professional Counselors
- Licensed Surgeons
- Medical Examiners
- Members of the Clergy
- Mental Health Professionals
- Optometrists
- Parole Officers (Juvenile or Adult)
- Pharmacists
- Physical Therapists
- Physician Assistants
- Podiatrists
- Police Officers
- Probation Officers (Juvenile or Adult)
- *Professionals identified in Public Act 14-186
- Psychologists
- Registered Nurses
- *School Employees (defined in [section 53a-65](#) of CGS)
- Sexual Assault Counselors
- Social Workers

137

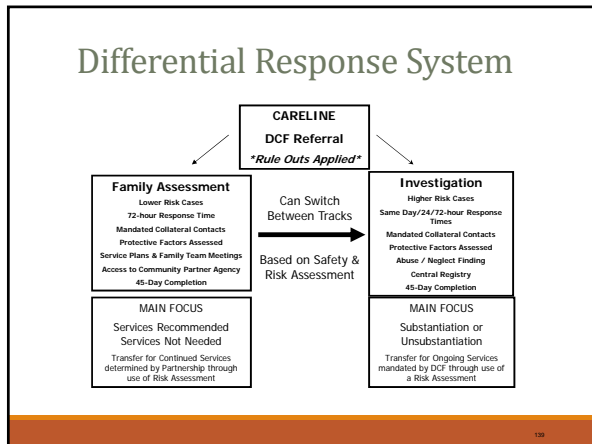
Careline

One point of entry for all reports - DCF Careline
Report must meet statutory definition of abuse or neglect to be accepted for services.

24/7

Careline Phone Number
1-800-842-2288

138



Ongoing Assessment of Safety & Risk

Engagement & Needs Assessment

Comprehensive assessment of household and all family members

- Safety
- Risk
- Strengths & needs

Consultation with Regional Resource Groups:

- Nurses
- Mental Health Clinicians/Licensed Clinical Social Workers
- Education Specialists
- Substance Recovery Specialists
- Intimate Partner Violence Specialists

Service Referral

- Community Partnerships

Intervention & Services

Case planning

- Goals
- Objectives
- Monitoring

Permanency Teaming/Community Collaboration

Superior Court for Juvenile Matters

Confidentiality



If you suspect a child is being abused or neglected, please call:

DCF Careline
1-800-842-2288

Mandated Reporter Training

- Online or In-Person
- <http://www.ct.gov/dcf/cwp/view.asp?a=3483&Q=413540>

142



Connecticut Department of Social Services
Caring for Connecticut

Connecticut Department of Social Services (DSS)

DORIAN J. LONG, LMSW
PROGRAM ADMINISTRATIVE MANAGER

Protective Services for the Elderly

Serves:

- CT Residents
- 60 years old and older
- Where abuse, neglect, exploitation and/or abandonment are suspected
- No financial criteria

144

Protective Services for the Elderly

Social workers investigate to determine risk to elder (substantiating or un-substantiating the report)

Develop a non-funded service plan to meet long term needs.

Discretionary paid short term emergency services may be put in place to stabilize a case

Services must be offered in the least restrictive environment and respect client's right to self determination

All services are voluntary unless cognitive impairment is noted.

145

Funded Services

Based on the specific needs of the individual elder and may include crisis intervention and/or arranging for and coordinating access to any of the following services: adult day-care, companionship, counseling, homemaker, chore services, home health care and home-delivered meals.

146

Making PSE Reports

To report cases of suspected abuse, neglect or exploitation, call the toll-free In State referral line at 1-888-385-4225.

Note: On Holidays, Weekends or After 4:30 call Infoline at 211----Out of State1-800-203-1234.

and/or

Submit a "Report Form for Protective Services For the Elderly" (W-675) to the DSS Central Office via fax 860-424-5091.

147

Partnerships

Strategic partnerships are a great asset to Connecticut's PSE program. Without them, the PSE program would not be as effective in providing assistance to vulnerable elders. Some of our partnerships include :

- Law Enforcement
- Town Code Enforcement
- Veteran's Administration
- Mental Health Providers
- Fire Department
- Municipal Social Services
- Resident Coordinators
- Medical Providers

148

Reporting Resources

Immediate Danger or Harm Call **911**

Local Law Enforcement

Protective Services for the Elderly **1-888-385-4225**

Statewide Domestic Violence Hotline **888-774-2900**

CT Long-term Care Ombudsman: **1-866-388-1888**

CT Legal Services **1-800-453-3320**

Local Probate Courts

◦ <http://www.ctprobate.gov/Pages/Welcome.aspx>

149

Hoarding Help from Professional Organizers:



The Who, What, How of the Professional Organizing Industry

SARAH SOBOLESKI, LCSW
PRESIDENT, NAPO-CT

Road Map...

- Who we are
- What we do
- How we do it
- Before and after pictures

Write down your questions for the panel at the end of the day!

151

What's the point?



"I don't think you're getting the point of this exercise."

152

...WHO WE ARE...

153

Who we are...NAPO

NAPO =

National Association of Professional Organizers

An association that has a membership of approximately 4,000 organizing & productivity professionals dedicated to helping people and organizations bring order and efficiency to their lives.

154

Who we are...NAPO

NAPO was founded in the early 80s by a small group of women who gathered in a living room to network & exchange ideas

There are now 32 chapters across the US including NAPO-CT which is 40 members strong.

155

Who we are...Other Assoc.'s

ICD: Institute for Challenging Disorganization

APPO: Association of Personal Photo Organizers

NASMM: National Association of Senior Move Managers

POC: Professional Organizers of Canada

JALO: Japan Association of Life Organizers

156

Who we are...Backgrounds

POs often come to the profession from different fields:

- Education
- Law
- Business
- Medical
- Human services

157

...WHAT WE DO...

158

What we do...Do's & Don'ts

NAPO defines professional organizing as “a process that enhances the lives of clients by designing systems & processes using organizing principles & through transferring of organizing skills.”

What we are NOT:

- Housecleaners, dog walkers, babysitters, therapists, personal shoppers, interior decorators, marriage counselors

159

What we do...The start-up

The process with most POs is some variation of the following:

- Initial phone call / intake
- In-home assessment / consultation
- Hands-on organizing sessions
- Follow-up support / evaluation

160

What we do...Methodology

We are the ones in the trenches with the clients doing the hands-on work.

S.T.A.R.T. = Sort, Throw, Appoint a Home, Restrict to Containers, Take back Control

S.P.A.C.E. = Sort, Purge, Assign a Home, Containerize, Equalize

I.D.L.E. = Identify, Decide, Locate/Let Go, Evaluate

We uphold a code of ethics.

161

What we do...Collaborate

We collaborate with others when appropriate:

- Attend therapy sessions
- Communicate with social service agencies/participate in planning meetings
- Act as a buffer between family members
- Help train family/friends on skills of organizing/coaching, body doubling, etc.

162

What we do...Resources

We have creative ways to assist with the removal of stuff:

- Charities in the area
- Places for unique items
- Upcycling resources
- Appraisers, auction services
- Junk haulers, dumpsters, shredding services
- Closet system companies, shelf installers, office suppliers

163

...HOW WE DO IT...

164

How we do it...Dialoguing

Randy Frost once said:

If you find yourself trying to convince someone to get rid of something – you're on the wrong track. You want them to make the argument for why they want to get rid of things.

We ask a ton of questions in our work with clients, but never with the intent to pressure them into throwing things away.

165

Before:



After:



How we do it...Inside Advantage

Many individuals with Hoarding Disorder have some insight into their problem, but are often unwilling to get treatment.

Often times they can admit they have a "stuff problem" and will allow a PO in the home. This is a big step in the right direction!

How we do it... Fundamentals

We take into consideration:

- Current developmental stage
- Recent life changes
- Emotional impact
- Learning styles
- Personality Traits
- Co-morbid disorders

169

How we do it... Education

We teach clients:

- The main areas of disorganization
- The main causes of clutter build-up
- Harm Reduction principles
- Clutter Image Rating Scale tool
- The how-to's of organizing activities
- Promote the benefits of being organized

170

...BEFORE & AFTERS...

171

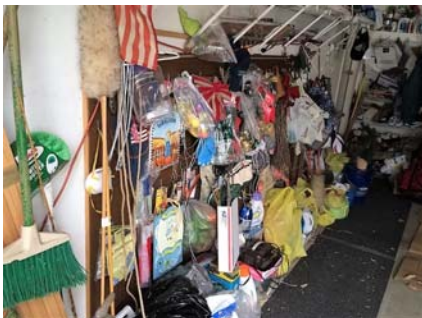
Garage Makeover: Bay 1 – Before



Garage Makeover: Bay 1 – After



Garage Makeover: Pegboard – Before



Garage Makeover: Pegboard – After



Garage
Makeover:
Bay 2 – Before



Garage
Makeover:
Bay 2 –
Progress



Garage Makeover: Bay 2 – After



Garage Makeover: Emptying/Sorting
– Driveway



Garage Makeover:
Emptying/Sorting – Front Yard



Garage Makeover:
Amazing Pro Organizers



Growth is painful.
Change is painful.

But nothing is as
painful as staying
stuck somewhere
you don't belong.



182

Thank You

Please visit

www.napoct.com



183

How Probate Can Support Hoarding Cases

JUDGE MATTHEW J. JALOWIEC
SOUTHINGTON-CHESHIRE PROBATE COURT

Case Scenario Wrap Up

The case of John, Maggie & Matt

- Medical issues
- DCF & DSS Reporting
- Mental Health & Community Support Needs
- Animal Control
- Building & Code Implications
 - Safety of physical space, lack of egress, fire risk

185

The Team
Approach
WORKS!



186

Case Management Form

Intent & Scope

Benefits

Applying the Case Scenario

Safe Homes Case Management Form

SECTION A - Case Information Date Form Completed: _____

Name(s) _____ DOB _____ Address _____

Agency / Individuals Present _____

Additional Comments / Information: _____

SECTION B - Existing Hazards &/or Violations

Hazards / Violation(s) Identified	Date Identified	Order Issued (if applicable)	Issuing Agency (if applicable)	Remediation Deadline	Date Remediated	Remediation Verified By

Additional Comments / Information: _____

187

Page 1, Section A

Safe Homes Case Management Form

SECTION A - Case Information Date Form Completed: Thurs. Nov. 03, 2016

Name(s): John Smith, Maggie Smith DOB: 1940, 1977 Address: 123 Main Street, Anywhereville, CT

Agency / Individuals Present:
Joe, Fire Marshal Sam, Social Services Jessica, DSS
Bob, Health Dept. Abby, ACO Steve, DCF

Additional Comments / Information:
A 3 year old child also lives in the home.
 Include any other important / relevant general case information here. _____

188

Page 1, Section B

SECTION B - Existing Hazards &/or Violations

Hazards / Violation(s) Identified	Date Identified	Order Issued (if applicable)	Issuing Agency (if applicable)	Remediation Deadline	Date Remediated	Remediation Verified By
FIRE: - Impeded Egress to front door - Excessive Combustibles especially liable to fire (extension cords) in Living Room - Use of electric space heaters - Lack of working smoke detection	11/03/2016			12/16/2016		
Buildings: - Porch is not working - Roof slightly damaged, resulting in prior water damage along interior wall						
Health: - Cat feces on floor throughout home resulting in strong odor - Furnace is not working						
Animal Control: - Excessive cats (inside and out), lacking proper care						

Additional Comments / Information:
 Identify any other agency (DCF, DSS, etc.) concerns/actions required here. _____

189

Page 2, Section C

SECTION C - Goals & Objectives

Immediate & Short Term Goals - Pose imminent risk / Must be completed to achieve compliance

Objective	Target Completion Date	Actual Completion Date	Verifying Agency
1. Test / install working smoke & CO alarms	11/04/2016		
2. Clear egress path to front door & clear spaces around space heaters	11/04/2016		
3. Remove extension cords	11/07/2016		
4. Remove and vet all cats	11/11/2016		
5. Reduce combustibles in Living Room by 50% (necessary to allow access for furnace repair)	11/25/2016		
6. Get furnace repaired and remove space heaters	12/02/2016		
7. Professional cleaning of all living spaces to remove cat waste and to address odor concerns	12/16/2016		

Additional Comments:

Per DCJ, the children can not return to the home until _____ are remediated. Per DSS, _____
 XCCO will coordinate removal with _____
 Social Services will assist in connecting residents with professional services to assist with these goals.

Page 2, Section C

Long Term Goals - May not be required by code, but may improve quality of life / Ongoing occupant considerations for health and safety hazards

Objective	Target Completion Date	Actual Completion Date	Verifying Agency
1. Repair minor roof damage & water damage to interior wall	Spring 2017		
2.			
3.			
4.			
5.			
6.			
7.			

Additional Comments:

Page 3, Section D

SECTION D - Schedule for Inspection & Follow Up

Date Hazard(s)/ Violation(s) Identified	Date Case Management Form & Agreement Completed	Re-Inspection by Code Enforcement		Date all Violation(s) Remediated	Post Remediation Follow Up By		
		Date(s)	Agency/ Initials		Month(s) & Initial	Month(s) & Initial	Month(s) & Initial
		11/04/16	FMO				
		11/07/16	FMO				
		11/11/16	ACO (Removal Day)				
		11/20/16	FMO				
		11/25/16	FMO				
		12/02/16	FMO				
		12/09/16	Health				
		12/16/16	Health				

Page 4, Case Management Agreement

Safe Homes Case Management Agreement

In order to address the violations and/or hazards present at 123 Main Street, Anywhereville, CT (address), we, John & Maggie Smith (occupant/s), (personnel - names) (enforcement), and (personnel - names) (support services) agree to the following:

1. The occupant agrees to maintain his/her/their unit in compliance with the health and safety requirements, as identified and outlined in SECTION B above.
2. The occupant/s agrees to work towards the goals identified within SECTION C, within the timeframes set forth by SECTION C.
3. The occupant/s understand that failure to meet the goals and objectives identified within SECTION C may result in further and/or additional enforcement action.
4. Enforcement officials and support services agree to assist the occupant/s in working towards the goals identified within SECTION B in the following ways:
List all ways town/agencies have agreed to assist the occupant(s) with clean up process
 - a. E.g. Social Services will assist occupant(s) in finding mental health treatment options
 - b. E.g. FMO will provide working smoke and CO detectors
 - c.
 - d.

193

Page 4, Case Management Agreement

5. The occupant/s agrees to the "Inspection and Follow Up Schedule" identified in SECTION D above.
 - a. All parties involved agree that re-inspection will be conducted by (personnel - names) (name/s) from the (list agencies) (enforcing agency), and that follow up inspections will be performed by (personnel - names) (name/s) from (list departments) (Department).
6. All parties agree that if a cancellation must be made regarding the inspection and/or follow up schedule (SECTION D), he/she will notify all individuals and/or agencies involved at least 24 hours before the scheduled inspection was to be performed. That inspection MUST be rescheduled for the same week, or within one week of the cancelled inspection.
7. Include any additional relevant items here.
- 8.

Signatures:
Occupant(s): _____
Code Enforcement Representative(s): _____
Support services Agency Representative(s): _____
Date: _____

194

Case Management Form

Form & Case Completion

Importance of Follow Up

PRACTICE!

Safe Homes Case Management Form Date Form Completed: _____

SECTION B: Case Information

Name(s) _____ City _____ Address _____

Agencies / Individuals Present: _____

Additional Comments / Information: _____

SECTION C: Existing Hazards/Code Violations

Hazard / Violation(s) Identified	Date Identified	Order Issued / # of citations	Issuing Agency / Department	Remediation Deadline	Date Remediated	Remediation Verified By

Additional Comments / Information: _____

195

Contact Information

Captain Meghan Manke
Newington Fire Department
Fire Marshal's Office
Office of Emergency Management

1485 Main Street
Newington, CT 06111
(860) 667-5910
mmanke@newingtonct.gov

196



CT Hoarding Working Group

197





THANK YOU FOR COMING!
