

Response to Severe Hoarding



Meghan Manke, MSAP

Newington Fire Marshal's Office & Office of
Emergency Management

Captain, Fire Prevention Bureau, Newington Fire
Department

Presented March 20, 2019

Lead, Radon and Healthy Homes Semi-Annual Meeting

Hoarding Hazards: Municipal Team Response

What is Hoarding?



1. Acquisition of & failure to discard a large number of possessions
2. Collecting items to the extent that rooms can no longer be used for the purposes for which they were intended
3. Significant distress or impairment in functioning is caused by the conditions

DSM-V Diagnosis: Hoarding Disorder

Variations of Hoarding



Demographics

Onset - childhood/early adolescence

Average age in treatment - 50

Family history

Marital status: single

Level of education varies



Prevalence

2-5% of the U. S. population –

Approximately 15 million people

◆ In Comparison:

- ◆ Alzheimer's Disease
- ◆ Heart Attacks
- ◆ Domestic Violence

◆ Comparable to:

- ◆ Identity theft victims per year
- ◆ Adults in U.S. who have asthma



The Impact of Hoarding

Mental health and public health & safety issue

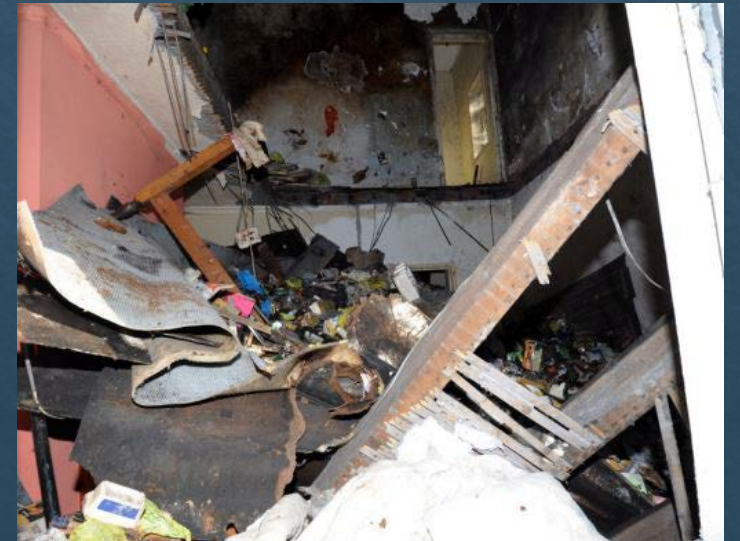
- ❖ Presents significant difficulties to:
 - Individual
 - Friends & Family
 - Individuals Responsible for Response, Mitigation, Intervention
 - Community



Common Health & Safety Hazards



- ◆ Impeded Egress
- ◆ Rapid Fire Spread
- ◆ Mold & Mildew
- ◆ Avalanche / Collapse
- ◆ Trips & Falls
- ◆ Infestations



Hoarding vs. Non-hoarding Fires

Dollar Loss to Owner

- Hoarding- \$93,784
- Non-Hoarding- \$11,711



Containment to Room of Origin

- Hoarding- 40%
- Non-Hoarding- 90%



Presence of Operating Smoke Alarms

- Hoarding- 28%
- Non-Hoarding- 66%

Hoarding Related Fire Fatalities

Since 1999, fires in hoarding households have accounted for *24% of all preventable fire fatalities*

- ❖ Inoperable smoke alarms – 75%
- ❖ Fire spread beyond the room of origin – 75%



Considerations for Response



Least Intrusive

Most Effective

Longest Lasting

Two-Tiered Response

1. Make it SAFE

- ◇ **Who?**
- ◇ **What?**
 - ◇ Case Management
 - ◇ Compliance – Make it SAFE!

Employ local ordinances and state statutes to achieve required safety standards; ensure well-being for both occupant(s) and public

2. Intervention & Follow-up

- ◇ **Who?**
- ◇ **What?**
 - ◇ Make necessary referrals
 - ◇ Mental health interventions and support

Ensures long-term safety and well-being for occupant(s) and the community

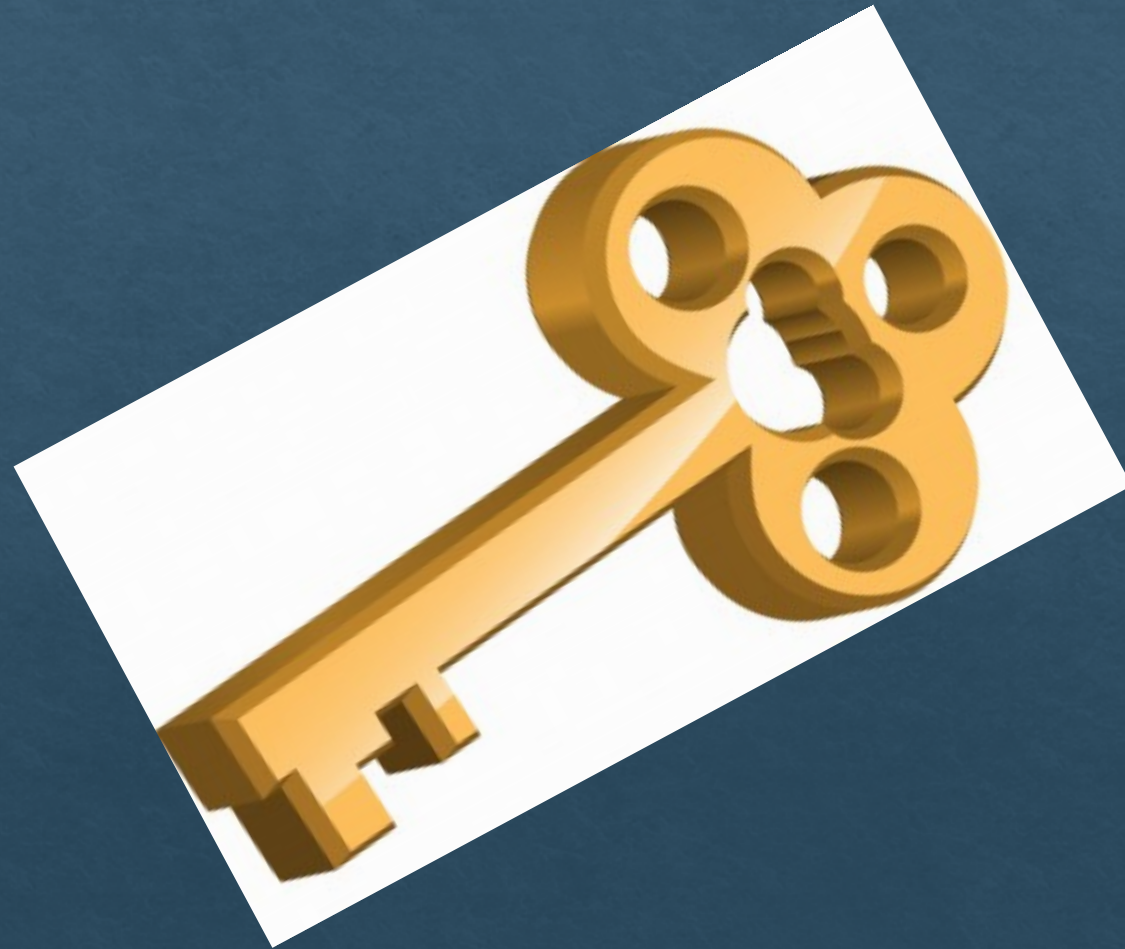
Effective Tools for an Effective Response

“Hoarding Toolbox”

- ❖ Communication
- ❖ Clutter Image Rating Scale
- ❖ Referral Checklist
- ❖ Case Management Form



Communication!



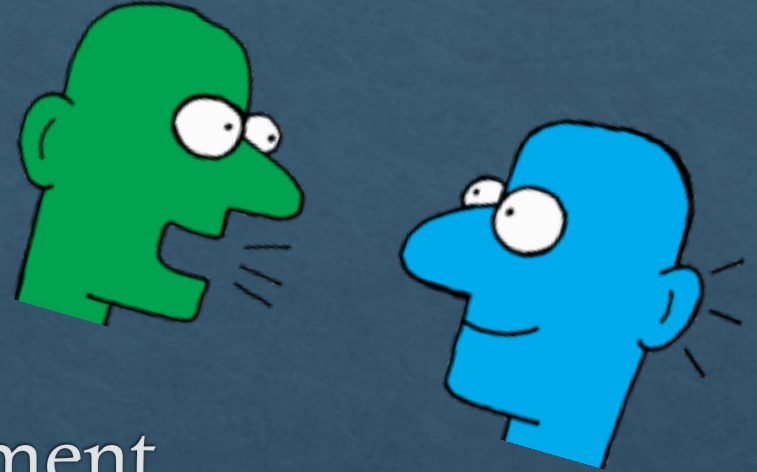
- ◆ Importance of Language Use & Communication
- ◆ The Struggle of De-cluttering
 - ◆ Attachment: *Sentimental, Instrumental, Intrinsic*
- ◆ Understand that *Ambivalence & Resistance* are common
- ◆ “Dos & Don'ts”



Do...

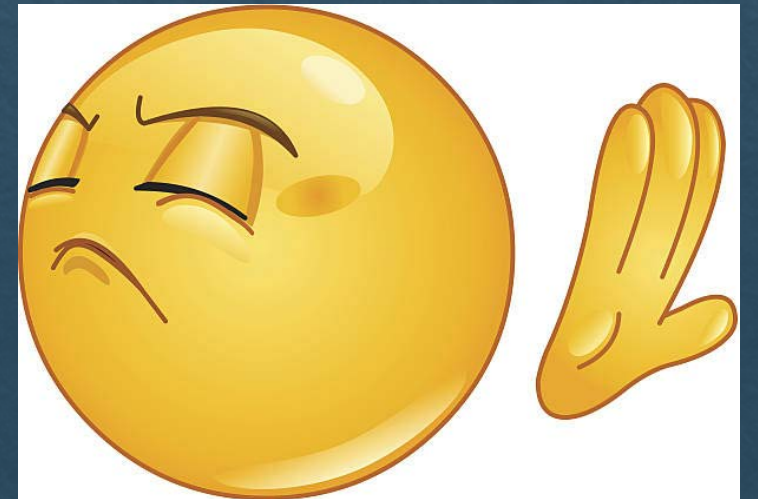
Approach violations with the sensitivity
of a mental illness

- ◎ Sensitivity, empathy, respect
- ◎ Focus on rapport building
- ◎ Reflective listening & effective engagement
- ◎ Build common ground
- ◎ Clearly identify and explain hazards
 - Use fact-based, clear, easily understood language



Do Not...

- ◉ Express doubt, pass judgment
- ◉ Label (“H” Word)
- ◉ Authoritative Role – work with, not against
- ◉ Persuasion, argumentation
- ◉ Overwhelm, embarrass
- ◉ Personal preferences / opinions



Clutter Image Rating Scale

- ◉ Pictorial Tool to assess volume of clutter in homes with hoarding
- ◉ Series of photos depicting a room in worsening states of disarray, rated on a scale from 1-9
- ◉ Hoarding = 4/5

Clutter Image Rating Scale: Kitchen

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



1



2



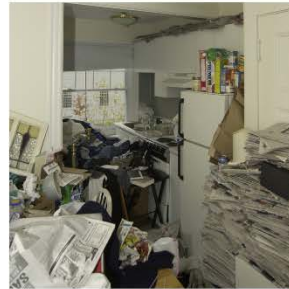
3



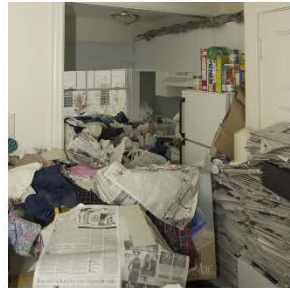
4



5



6



7



8



9

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Press, USA.
www.oup.com

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

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.



1



2



3



4



5



6



7



8



9

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Uses for CIR

Establishes common language

- ◆ Clinicians – gauge perception
- ◆ Assessment tool / point of reference when making referrals or receiving complaints
- ◆ Show progression between visits/inspections
- ◆ You can also find and use the CIR App for Apple devices

Referral Checklist

Conditions Deeming Initial Notification & Intervention

If any of the below conditions are observed or otherwise reported, immediate notification to the respective authority/authorities should be made:

FIRE MARSHAL

Pursuant to CGS 29-306, State Fire Marshal Directive #10

- Combustible or explosive matter
- Blocked, insufficient or impeded egress; Dangerous accumulation of rubbish or any flammable material especially liable to fire, that is so situated as to endanger life or property
- Obstructions or conditions that present a fire hazard to the occupants or interfere with their egress in case of fire
- No working smoke detection

CENTRAL CONNECTICUT HEALTH DISTRICT

Pursuant to CGS 19a-206, Regs. Conn. State Agencies § 19-13-B1,

- 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 therefrom.
- 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.
- filth which in their judgment may endanger the health of the inhabitants

BUILDING DEPARTMENT

Pursuant to CGS 29-393, CT State Building Code

- lack of exit facilities, fire, deterioration, catastrophe or other reason; where the building is in such condition as to be a hazard to any person or persons
- The Building Official shall deem structures or equipment an unsafe condition which are or become:
 - unsafe
 - unsanitary
 - deficient because of inadequate means of egress, inadequate light
 - constitute a fire hazard
 - are otherwise dangerous to human life or public welfare
 - or that involve illegal or improper occupancy or inadequate maintenance

ANIMAL CONTROL

Pursuant to Animal Cruelty C.G.S 53-247, Sec 22-339(b) Failure to Vaccinate, Sec 22-349 Failure to License dog with the Town of Newington

Things to look for to trigger an event / notification to ACO:

- Excess feces and urine odors throughout the home and on the floor
- Animals that appear unkept or evidence of injuries that are not being treated
- Owners unable to provide vaccination records
- Flea Infestations
- Animals appear unusually thin (ribs and hip bones showing)
- No presence of food or clean water
- Concern for overall welfare of an animal(s) (e.g. attitude, appearance, activity)

Case Management Model

- ◆ Encourages collaborative TEAM approach
- ◆ Prioritizes SAFETY for occupant(s), first responders, community & ensures that it is *maintained* long term
- ◆ Serves as a guide for both enforcement AND occupant(s)
- ◆ Establishes follow up procedures

C.M. Form

1. Inspect
2. Complete CMF as a team



3. Review/list all hazards & violations

Safe Homes Case Management Form

SECTION A - Case Information Date Form Completed: _____

Name(s): _____ DOB: _____ Address: _____

Agencies / 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: _____

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.			
2.			
3.			
4.			
5.			
6.			
7.			

Additional Comments:

4. Prioritize all hazards & violations (short term & long term)

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.			
2.			
3.			
4.			
5.			
6.			
7.			

Additional Comments:

5. Establish Target Completion Dates for each

SECTION D - Schedule for Inspection & Follow Up

Date Hazards/ Violation(s) Identified	Date Case Management Form & Agreement Completed	Re-inspection by Code Enforcement		Date all Violation(s)/ Hazards(s) Remediated	Post-Remediation Follow Up By _____		
		Date(s)	Agency/ Initials		___ Months & Initial	___ Months & Initial	___ Months & Initial

6. Create schedules for re-inspection and follow-up inspections

7. CM Agreement

Safe Homes Case Management Agreement

In order to address the violations and/or hazards present at _____ (address), we, _____ (occupant/s), _____ (enforcement), and _____ (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:
 - a.
 - b.
 - c.
 - d.
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 _____ (name/s) from the _____ (enforcing agency), and that follow up inspections will be performed by _____ (name/s) from _____ (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.
- 8.

Signatures:

Occupant(s): _____

Code Enforcement Representative(s): _____

Support services Agency Representative(s): _____

Date: _____

Additional Resources



Statewide Initiatives

- ◎ The Connecticut Hoarding Working Group
- ◎ CT Special Act No. 16-2:
An act establishing a task force to study hoarding



Connecticut State Agencies Response to Hoarding

- ◆ Dept. of Children and Families (DCF)
- ◆ Dept. of Emergency Services and Public Protection (DESPP) / Division of Emergency Management and Homeland Security (DEMHS)
- ◆ Dept. of Mental Health and Addiction Services (DMHAS)
- ◆ Dept. of Public Health (DPH)
- ◆ Division of Criminal Justice, Office of the Chief State's Attorney – Statewide Housing

<http://www.ct.gov/dmhas/lib/dmhas/publications/StateAgencyResponseforHoardingpdf.pdf>



Additional Training

- ◆ Trash or Treasure? Understanding the Phenomena of Hoarding - *Recorded June 12, 2012*
- ◆ Hoarding Hazards: Municipal Team Response – *November 21, 2016*
- ◆ Statewide Hoarding Resources: Assets for Communities (webinar) – *April 18, 2018*
- ◆ Annual Connecticut Conference on Hoarding
 - ◆ 2015 - *When a House is Not a Home*
 - ◆ 2016 - *Making a House a Home Again*
 - ◆ 2017 - *Community Response to Hoarding*
 - ◆ 2018 - *Treating Hoarding Disorder & Hoarding Behaviors*

Available at: <https://ct.train.org>

- ◆ Dept. of Public Health - Hoarding materials webpage:

<http://www.portal.ct.gov/DPH/Environmental-Health/Healthy-Homes/Hoarding>

Contact Information

Meghan Manke, MSAP

Captain, Newington Fire Department Fire Prevention Bureau
Fire Marshal's Office
Office of Emergency Management

1485 Main Street
Newington, CT 06111

(860) 667-5910

mmanke@newingtonct.gov