

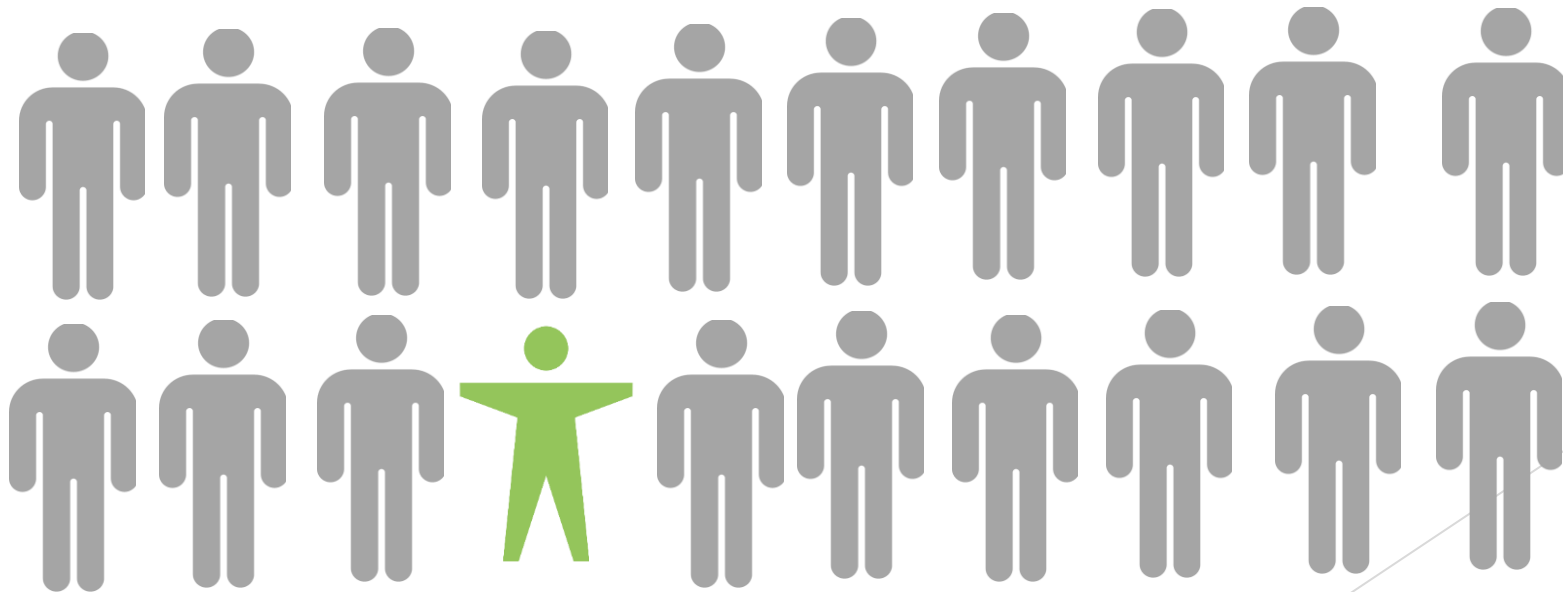
Addressing High Clutter and Hoarding in Affordable Housing

Ruben Rivera-Jackman, MNPL
Resident Services Coordinator
HumanGood

Ruben.riverajackman@humangood.org

Prevalence in the U.S

- Affects 1 in 20 Americans
- About 2-5% of the population;
about 15 million people



Prevalence in the U.S.

- Begins in early childhood around age 13 and progresses with age.
- Equal opportunity: regardless of race, ethnicity, age, sex or socio-economic status.
- Gender: undetermined, contradictory findings.

Prevalence in the U.S.

- Genetics/heredity, seems to run in families.
- Global phenomena: occurs cross-culturally. Japan, UK, Australia, Germany, etc.

Comorbidities

Hoarding disorder is a co-occurring disorder 92% of the time.

- 57% Major depressive
- 30-40% OCD
- 31% Organic brain illness
- 29% Social phobias
- 28% Generalized anxiety

Hoarding Disorder Defined

(DSM-V) May 2013

Diagnosis must include the following 4 parts:

1. Persistent difficulty discarding or parting with personal possessions.
2. Accumulation of a large number of possessions that fill up and clutter the active living areas of the home, workplace, or other personal surroundings.

Hoarding Disorder Defined (DSM-V) May 2013

3. Prevents normal use of the space.
4. Symptoms cause clinically significant distress or impairment.

5 Types of Hoarding

1. Animals
2. Food
3. Paper
4. Shopping
5. Trash

4 Types of Hoarders

1. Environmentalist
2. Guru of Information
3. Storytellers
4. Collectors



Beliefs about Possessions

- Responsible for the planet: doesn't want it to end in landfill, wants it to go to a good home.
- Saving to share information with others. (newspapers, books, magazines, etc.)
- Sentimental: represents my life, it's a part of me, family heirloom, etc.
- Fear of running out of stuff. (paper towels, toilet paper, soup cans, etc.)

Thoughts and Emotional Responses

- “I Could lose this information forever.”
Causes: anxiety, fear, sadness, guilt.
- “I need to save this information to share with the right person at the right time.” Causes: excitement, joy, satisfaction
- “I’ll just deal with my situation later when I have the time and energy.”
Causes: relief, and avoidance!

Collectors

- **Pride:** feel proud about items collected.
- **Organized:** keep items organized and well maintained.
- **Joy:** find joy sharing and willingly display items and shares with others.
- **Socialize:** attend meetings or conferences with others who share their interest.
- **Can Afford it:** budget their time and money.

High Clutter

- No major difficulty with excessive acquisition.
- No major difficulty discarding items.
- Can carry on with normal activities in home.
- May pose a safety/tripping hazard.

Hoarders

- **Embarrassed** by chaos and loss of control.
- **Scatter randomly** w/o functional organization, loss of functional living space.
- **Feel uncomfortable** with others and refuses to let others see.
- Often in **extreme debt**.
- **Feel ashamed, sad or depressed** after acquiring additional items.

Hoarding Facts

- MH disorder, not a deliberate decision or act.
- Not a moral issue.
- Not caused by laziness, lack of standards or lack of responsibility.

Hoarding and Insight

Hoarders have varying levels of insight about the extent of their problem and the ways that it impacts them and those around them.

- Low or no insight. (denial)
- Non-insightful. (low self-awareness)

Hoarding and Insight

- Insightful, but unmotivated.
- Insightful, motivated, but noncompliant.
- Others are often more aware of or bothered by the clutter than the individual.

Psychological Impacts of Hoarding

- Safety risks
- Health concerns
- Social isolation
- Stigmatization and judgment
- Financial burden
- Legal consequences
- Neighbor concerns
- Family strain
- Decline in quality of life
- MH implications

Family

- Family members can range in reactivity and beliefs
- They can influence intervention efforts or hinder them
- They may have hoarding tendencies themselves
- Family relationships are likely strained because of the clutter

10 Telltale Signs

1. Living areas are unusable.
 - There are often no sitting areas in the home. The hoarder creates “nests” if they need a place to sit or sleep.
2. Appliances and utilities are shut off.
 - Moldy refrigerators, overflowing toilets and infested ovens are often found in hoarding homes, making basic functions like cooking and bathing impossible.
possessions.

10 Telltale Signs

3. No organization to the clutter.
 - Hoarders may be unable to control their impulse to buy things or take free items, but they do not organize or display their possessions.
4. Home is unsanitary.
 - From structural damage to infestations to decaying piles of garbage, sanitation problems can quickly arise and spread to neighboring homes.

10 Telltale Signs

5. Lack of maintenance requests.
 - Hoarders may not request repairs or allow routine maintenance to help hide their hoarding behavior.
6. An extreme number of pets.
 - Animal hoarders may intend to care for their pets, but the situation often leads to unintentional neglect, abuse, or death.

10 Telltale Signs

7. Unwilling to dispose or give up items.
 - Psychologically or sentimentally attached to their belongings.
 - When another person touches, moves, or attempts to dispose of their things, it can cause overwhelming anxiety.

10 Telltale Signs

8. Combative or defensive when confronted.
 - Ultimatums do not usually work.
 - Become angry or distance themselves if pushed to change their behavior.

10 Telltale Signs of Hoarding

9. Socially isolated.

- Hoarders may feel alienated by family and friends who do not understand their behavior, or they may hoard to comfort their loneliness resulting from isolation.

10 Telltale Signs of Hoarding

10. Unwilling to allow people in their home.

- Guilt, shame and embarrassment may prevent hoarders from allowing people to enter their homes.

Manage Initial Reactions to Cluttered Home

- ❑ Before going into resident's HOME, take a deep breath and leave all biases at the door.
- ❑ Use respectful language
- ❑ Avoid judgments: "What a mess!"
- ❑ Be aware of non-verbal cues

Manage Initial Reactions to Cluttered Home

- ❑ Facial expressions: your reaction will set the foundation for trust between you and the resident. (Vick's)
- ❑ Match person's language
- ❑ Avoid using "trash", "junk", "hoarding"
- ❑ Use resident's words: "your *things*", "your *collections*"

Challenges

- High clutter and hoarding present significant challenges within low-income and affordable housing communities, impacting residents, property management, and the broader community.
- Here's a comprehensive exploration of these challenges:

Challenges

1. Health and Safety Hazards
2. Property Damage and Maintenance Issues
3. Social Isolation and Stigma
4. Financial Strain
5. Legal and Regulatory Challenges
6. Limited Access to Resources
7. Mental Health and Trauma

Multi-Faceted Approach

- Addressing the challenges posed by hoarding requires a multi-faceted approach that encompasses education, support, intervention, and collaboration among stakeholders.
- By recognizing the complex nature of hoarding behaviors and implementing targeted strategies, communities can create safer, healthier, and more inclusive environments for all residents.

Interagency Team

1. Resident
2. Property Manager
3. Service Coordinator
4. Maintenance Supervisor
5. 504 Coordinator

External Team and Stakeholders

1. Family
2. Experienced clinical therapist, MHPs
3. Adult Protective Services APS/CPS
4. Professional organizer
5. Professional cleaner

Multi-disciplinary Strategy

1. Community assessment
2. Education and awareness
3. Outreach and engagement
4. Individualized support plans
5. Collaborative problem-solving

Multi-disciplinary Strategy

6. Gradual decluttering process
7. Safety assessments and interventions
8. Emotional support and validation
9. Skills-building workshops
10. Follow-up and on-going support

Supporting Staff

All staff should be trained to identify the signs of hoarding and to raise alerts and make appropriate internal referrals as part of their normal interaction with residents and work within properties. (KUDOS)

Supporting Staff

- Training should cover how to talk to people who hoard and how to behave in respect of their collection of material.
- This will help to gain/retain the willingness of residents to work to identify and then address their hoarding behavior.

Supporting Staff

- It's important to develop clear policies and procedures.
- Provides staff members the confidence to act when they see signs of hoarding and will embed it as an issue to look for in the course of their work with residents.

What We See

- Dirt. Mess, trash.
- Health hazard.
- Crazy behavior.
- Upset neighbors.
- A problem/something to be fixed.

What the Resident Sees

- Their whole world.
- What they needed to survive.
- No one else's business.
- Creative efforts.
- Sense of worth/wealth.

Strategies & Interventions

- When approaching individuals struggling with high clutter and hoarding tendencies, sensitivity and effectiveness are paramount.
- Here are some practical strategies and intervention techniques:

Strategies & Interventions

- Build trust and rapport
- Education and psychoeducation
- Motivational interviewing
- Gradual exposure and desensitization
- Collaborate problem-solving

Strategies & Interventions

- Cognitive-behavioral techniques
- Emotional support
- Safety planning
- Continued support and follow-up
- Collaboration with support networks

Build Trust

- Focus on immediate/urgent safety concerns
- Avoid discussing the “fate” of the residents possessions during initial visits, will be addressed later and may require input from other professionals
- Clarify safety and legal requirements (Section 8, Fire hazards)

Build Trust

- Try to place yourself and walk in your resident's shoes. (Empathy)
- How would you want others to help you manage your anger, frustration, resentment, and embarrassment?

Communicating with Residents

- DO remain calm and factual, but caring and supportive.
- DO evaluate for safety.
- DO evaluate for human or animal neglect/cruelty.
- DO report your suspicions, findings.

Communicating with Residents

- DO talk to the person face-to-face.
- Do use a gentle approach and let the person tell his/her story.
- DO respect the attachment to possessions by the person.

Communicating with Residents

- DO talk to the person face-to-face.
- Do use a gentle approach and let the person tell his/her story.
- DO respect the attachment to possessions by the person.

Communicating with Residents

- DON'T make negative, teasing, or sarcastic comments.
- DON'T talk about the person to with other residents.
- DON'T Ignore the situation.
Trust your gut. You must report.

Roll with the Resistance

- Expect it and do not fight it
- Consider the behavior to be the resident's best attempt to protect him or herself against uncomfortable/painful feelings
- Remember this is a MH condition.
- Consider that the resident could be experiencing a traumatic response or declining health

Objects

Avoid touching Resident's objects

- Can evoke strong emotions from residents
- Violation; fear
- Use a notebook and pen to keep hands occupied; less temptation to touch objects

Avoid making suggestions about the belongings

- Suggestions though well-intended are generally poorly received.

Ineffective Intervention Strategies

- Make decisions about a plan of action for a resident.
- Do not threaten, rationalize, argue or try to persuade.
- Do not pressure resident to discard.

Ineffective Intervention Strategies

- Do not tell the resident how they should feel.
- Do not give verbal and non-verbal cues that are judgmental or negative in nature.

Hoarding is a Housing Problem When

- It violates applicable housing health and safety
- Standards, including those for animals
- It endangers vulnerable people as defined by state law
 - Children
 - Elders/vulnerable adults
 - Persons with Disabilities
 - Mandated reporters

Hoarding is a Housing Problem When

- When it violates or progresses toward violating the Lease.
- Impairment of Neighborhood-
Shall refrain from illegal or other activity which impairs the physical or social environment of the project or neighborhood

Hoarding is a Housing Problem When

It violates or progresses toward violating:

- HUD Standards including REAC and HQS
- Local or state health and safety codes
- Animal cruelty standards

HUD Sec. 5.703

HUD housing must be
descent, safe, sanitary and
in good repair.

(HUD - REAC Inspections)

(HUD-Section 8 HQIs)

Impact on the Community

- Health & safety risks
- Property values and neighborhood aesthetics
- Social isolation and stigma
- Community resources and services

Impact on the Community

- Emergency response and crisis management
- Legal and regulatory issues
- Environmental impact
- Interpersonally dynamics

Key Strategies

By implementing the following key strategies in affordable senior living communities, it is possible to address the challenges posed by high clutter and hoarding in a sensitive and effective manner, ultimately improving the quality of life for residents.

Key Strategies

1. Education and Awareness
2. Training for staff
3. Support services
(MHPs, counseling, therapy, or support groups)
4. Individualized eviction diversion/safety plans.

Key Strategies

5. Environmental Modifications

- Storage solutions, decluttering strategies and regular inspections

6. Community engagement

- Social activities helps to reduce social isolation

7. Regular Monitoring and Follow-up.

- Ensures that residents are receiving the necessary support and that the interventions are effective in managing hoarding behavior over time.

Safety

- Fire hazard
- Blocked exits
- Risk of falls and death due to items falling (avalanche)

Safety

- Lack of routine home maintenance
- Structural damage to building from increased weight and volume of clutter
- Risk of eviction and homelessness

May Lead to Death

NBCConnecticut.com 6/16/2014

A Connecticut woman was found dead in the basement of a home packed with clutter in Cheshire on Saturday, her body buried beneath a first floor that collapsed under the weight of it all, police said.

Officers responded to 22 Winslow Road in Cheshire on Thursday to check on Beverly Mitchell, 66, after a postman reported mail was piling up, but they were not actually able to get into the house until Saturday.

The structural damage to the first floor was so significant that emergency responders couldn't enter the home safely until Saturday morning.

Once they were able to get inside, police found Mitchell's body in the basement of the home she'd lived in for decades. She had apparently been living in the basement.

Notification and Accountability

- Property manager determines which notice to issue: 10-day or 30-day housekeeping notice
- Initial inspection is completed by management, 10-day notice issued.
- Resident is notified that a referral is being made to service coordinator.

Notification and Accountability

- Service coordinator makes contact, develops working relationship, creates Eviction Diversion Plan and notifies management if resident is responsive/cooperative.
- Reinspection date is set, focusing on the goals established in the Eviction Diversion Plan EDP.

Notification and Accountability

- If resident does not pass the inspection (expected), 30 Day notice should be issued with a re-inspection date established. (Housekeeping Notice)
- SC schedules regular check ins according to those agreed upon in the EDP, and works on the unit until determined safe according to their lease

Uniform Inspection Checklist

As a tool the UIC covers the minimum safety and sanitation standards required by multiple inspection sources such as:

- Housing authorities
- Property management companies
- Code enforcement
- Public health
- Fire

The UIC ensures all involved parties, including the resident, have clear and consistent expectations and guidelines for rectifying and maintaining a safe and sanitary home environment.

Eviction Diversion Plan

Hoarding Program Support Groups



BURIED IN TREASURES: HOARDING SUPPORT GROUP AND WORKSHOP

Join like-minded individuals in a supportive community where you will learn tools to address compulsive acquiring and saving while deepening your understanding of clutter and how you got here.

WHEN: Wednesdays, January 18 – May 17, 5:30-7:30pm (16 sessions)

*no group on April 5th or April 12th

GENERAL MONTHLY DROP IN SUPPORT

For individuals who have completed a prior hoarding support group program.

WHEN: Third Tuesday of the month, 4-5pm

SUPPORTING YOUR LOVED ONES WITH HOARDING DISORDER

Find community and connection with individuals whose partner, parent, or loved one is also struggling with hoarding disorder.

WHERE:

All groups meet via Zoom (link provided after registration.)

COST:

Some groups have a sliding scale cost to participate. If you are interested in a Hoarding Program Support Group, please do not let financial concerns keep you from calling.

REGISTER:

To register or for more information on sliding scale options, contact Sybil Griffith at 267.315.5731 or sgriffith@jfcshilly.org.

For more information on JFCS' Hoarding Support Program, visit [jfcshilly.org/hoarding-program](https://www.jfcshilly.org/hoarding-program).



Eviction Diversion Plan

- Holistic combination of services that divert a landlord-tenant dispute away from a court judgment.
- Aims to have landlords and tenants create a mutually acceptable agreement that stops the court case from proceeding and that ultimately promotes housing stability.

EDP General Guidelines

- Everything in the unit is able to function as it was built to be used. e.g.. the oven/stove contains no clutter so that a meal could be cooked, or a person could bathe in the tub/shower
- Full access to all plumbing
- Clear walkways, paths throughout unit

EDP General Guidelines

Maintenance/Damages

- Shall keep the premises and such other areas as may be assigned to Tenant for Tenant's exclusive use in a clean, orderly, safe condition, including but not limited to, cleaning drapes, windows, floors, cabinets, refrigerators, ranges and ovens.

EDP General Guidelines

- No accumulation of combustible materials, such as newspapers, clothing and rubbish, this poses a severe fire hazard
- PM should look for sagging floors or ceilings from weight of the items.

EDP General Guidelines

- ✓ Items on countertops stacked no higher than 2 feet
- ✓ Items stacked on floor no higher than five feet, unless against a wall
- ✓ No storage of hazardous materials

EDP General Guidelines

- REAC policies applicable e.g. There should be clear, easy exit/egress and there should be no obstructions
- There should be at least a 10-inch clearance by all heaters and vents
- There should be at least a 10-inch clearance in front of all windows

EDP General Guidelines

- No Egress concerns
- No overloading circuits and hazardous use of extension cords not permissible
- No garbage or clutter that attracts rodents or insects, or that produces foul odors is not allowed

EDP General Guidelines

- No signs of insect or rodent infestation, including gnawing/teeth marks on boxes, holes in items from chewing, nests
- Bedbugs/fleas

EDP General Guidelines

- No evidence insect exoskeleton (a brown or black husk), these can be seen on floors
- No excessive dust build up is not allowed
- No storage of hazardous materials

EDP General Guidelines

- No evidence of mold/mildew anywhere in unit
- All doors should operate as intended, able to swing all the way and closets able to roll back and forth, open/close
- Drains must be clear and no soap scum build-up

EDP General Guidelines

- As long as the resident makes progress, they can continue to get 30 days notices. (patience)
- If the resident **does not** continue to comply with the EDP, proceed with termination

Available Resources

Non-profit agencies:

- The Hoarding Project
- International OCD Foundation
- Mental Health Association of San Francisco
- Institute of Challenging Disorganization
- Children of Hoarders

Support Groups

- The Hoarding Project
- The Clutter Movement and The Clutter Movement Family Support groups on Facebook
- www.ocdseattle.org/support-seattle.aspx
- Children of Hoarders
- Clutterers Anonymous

Hoarding Resources



INSTITUTE FOR
CHALLENGING
DISORGANIZATION

ICD 1693 S. Hanley Rd.
St..Louis, MO
314-416-2236



**BEHAVIORAL
SCIENCES**
OF ALABAMA

Solutions for ADHD, anxiety and life's many challenges

810 Shoney Drive, Suite 120
Huntsville, AL 35801
256-883-3231



The National Study Group on Chronic Disorganization
(NSGCD) Clutter Hoarding Scale
- an assessment measuring tool (2003)



Randy Frost, PhD

Click here for a welcome message from Randy.



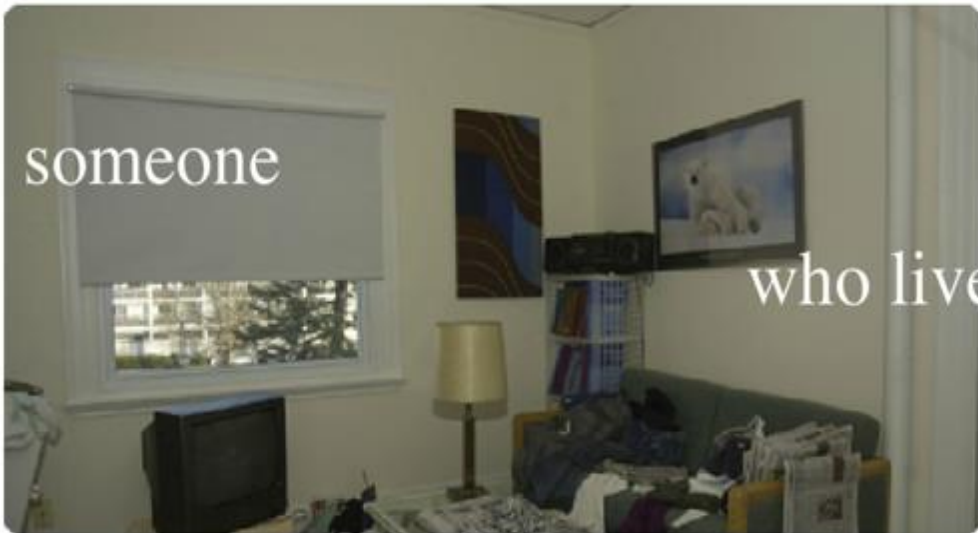
Follow Us



Become a Fan



- Home
- About Hoarding
- Help For Hoarding
- Community Services
- Resources
- Research



Welcome to the IOCDF Hoarding Center


Hoarding has been a hidden disorder for many years. Before the early 1990's, there was little research on hoarding. Since then, however, interest has increased dramatically among research scientists and clinicians. Recent media coverage of hoarding has also increased awareness and interest among sufferers, family members, and human service personnel who often deal with the problem. The IOCDF Hoarding Center is designed to provide the most up-to-date and accurate information about hoarding and its treatment. The Center has five goals:

- Educate the general public about hoarding.
- Facilitate education and training of human service personnel including mental health, social services, public health and housing as well as police and fire officials.
- Support research into the causes of and effective treatments for hoarding.
- Improve access to resources for those with hoarding disorder and their families, as well as clinicians and service personnel.
- Advocate and lobby for public policy change as it affects people who hoard, their families and community members.

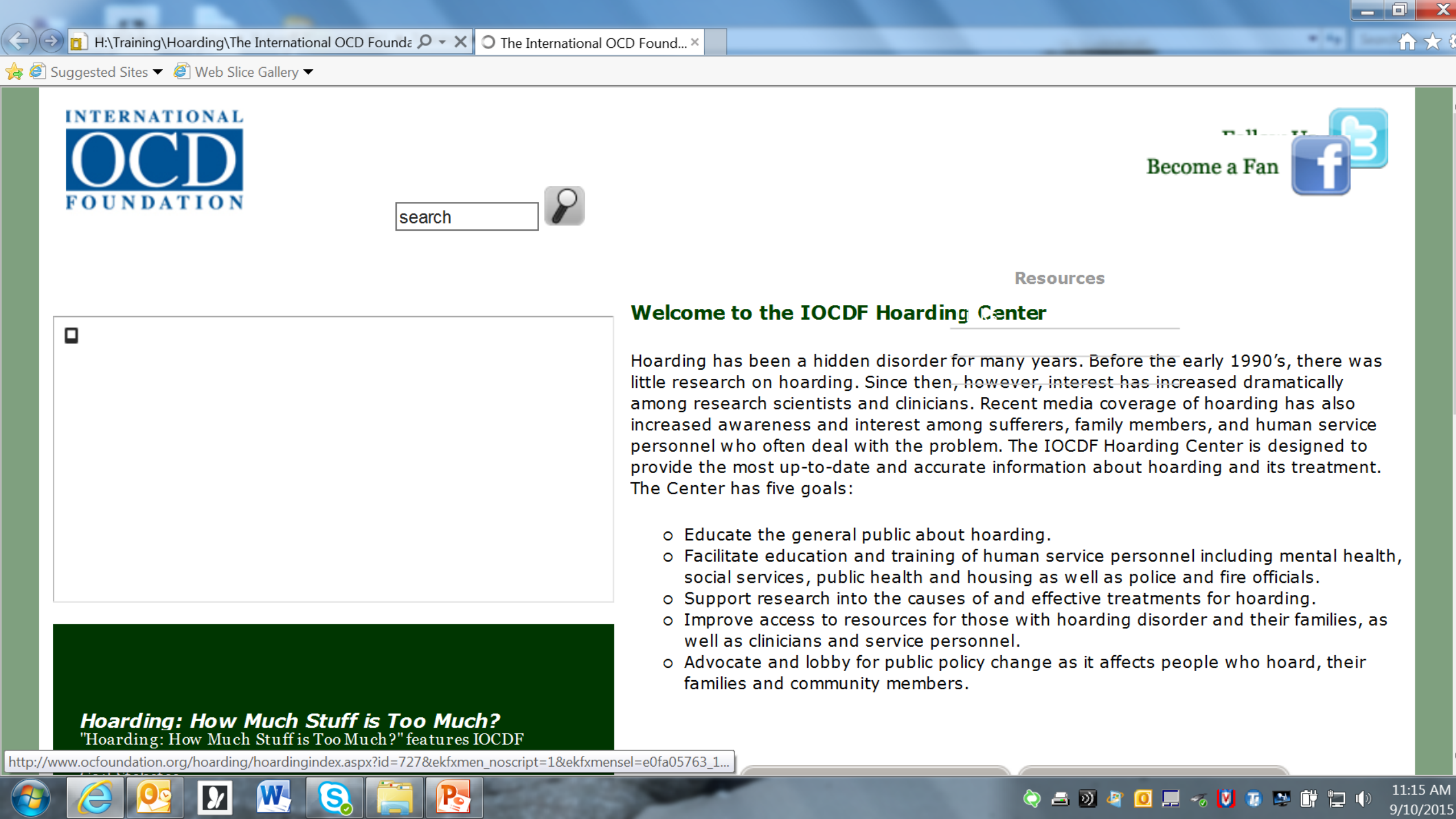
Hoarding in the News

IOCDF Announces 2nd Annual Hoarding Meeting in Los Angeles in July 2014

We are excited to announce that for the second year in a row, we will be holding the **Annual Hoarding Meeting** at the **Annual OCD**

 **MAKE A DONATION**
Click Here Now

 **MEMBERSHIP**
Click Here To Join/Renew



Become a Fan

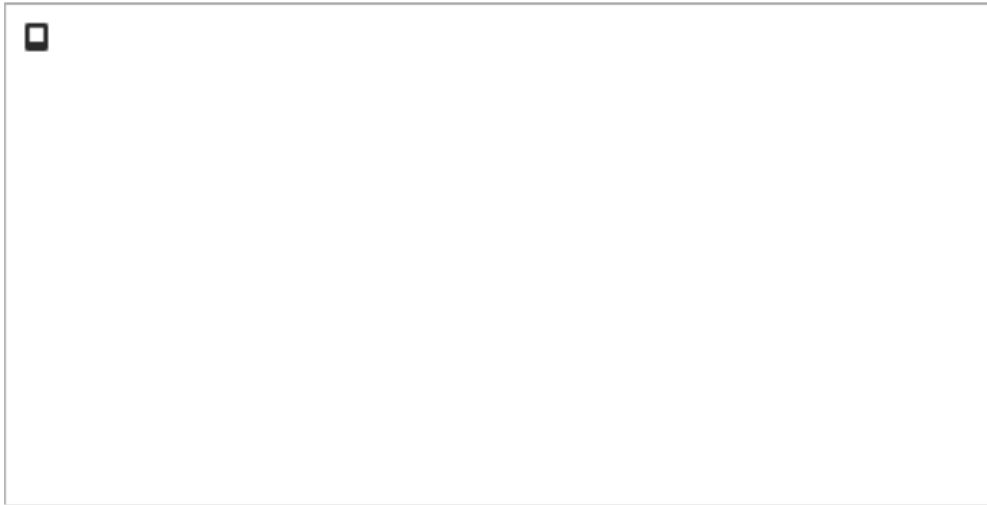


Resources

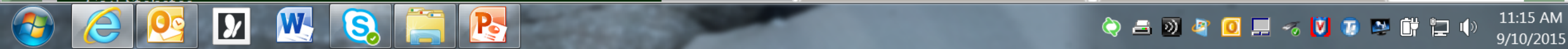
Welcome to the IOCDF Hoarding Center

Hoarding has been a hidden disorder for many years. Before the early 1990's, there was little research on hoarding. Since then, however, interest has increased dramatically among research scientists and clinicians. Recent media coverage of hoarding has also increased awareness and interest among sufferers, family members, and human service personnel who often deal with the problem. The IOCDF Hoarding Center is designed to provide the most up-to-date and accurate information about hoarding and its treatment. The Center has five goals:

- Educate the general public about hoarding.
- Facilitate education and training of human service personnel including mental health, social services, public health and housing as well as police and fire officials.
- Support research into the causes of and effective treatments for hoarding.
- Improve access to resources for those with hoarding disorder and their families, as well as clinicians and service personnel.
- Advocate and lobby for public policy change as it affects people who hoard, their families and community members.



http://www.ocfoundation.org/hoarding/hoardingindex.aspx?id=727&ekfxmen_noscript=1&ekfxmense=e0fa05763_1...





[Opportunities](#)

[Donate Now](#)
Support Our Work 

[Home](#)

[About](#)

[What is Hoarding Disorder](#)

[What We Do](#)

[Who We Serve](#)

[Get Involved](#)

[Contact](#)

>> [Home](#) >> [King Pierce County Hoarding Task Force](#)

King/Pierce County Hoarding Task Force

Please join us for our monthly meeting every 3rd Tuesday morning of each month. Please visit our [Google + page](#) for more information on our upcoming events!

For more information on our upcoming events for our 2015 Hoarding Awareness Week [click here](#)

Mission:



<http://thehoardingproject.org/home> ti-disciplinary collective in King and Pierce County aimed at promoting a



10:55 AM
9/10/2015

Uniform Inspection Checklist - Hoarding/Excessive Clutter - Quick Reference

Date Completed:

Person Completing This Form:

Address:

Town:

RESIDENT

The purpose of inspection is to ensure housing is decent, safe, sanitary, & in good repair. Inspector must be able to view, reach, and test all items on inspection checklist.



INSTRUCTIONS

For **STATUS**, use **P** to indicate **Pass** if item **MEETS STANDARD** or **F** to indicate **Fail** if the item **DOES NOT MEET STANDARD**. Use **UNK** to indicate **Unknown** if item unobserved or **N/A** to indicate if item Not Applicable. Write comments in space to right of target.

STEP 1

STATUS

The following items must be UNOBSTRUCTED - completely clear of any items -

SPECIFIC AREA NEEDING TO BE ADDRESSED
(EX: BACK DOOR, BEDROOM WINDOW, PATH FROM BEDROOM TO KITCHEN, ETC.)

HARM REDUCTION TARGETS

- ▼ **Egresses** - means of exit - must be unobstructed, egress doors must open full 90 degrees *or* from door frame to door stop, whichever is wider
- ▼ **Pathways** - Minimum of 36"/91cm wide unobstructed and continuous pathways throughout residence
- ▼ **Staircases** - must be unobstructed (if applicable)
- ▼ **Smoke detectors, CO detectors, and sprinkler heads** - (all that apply) must be unobstructed with front and surrounding clearance of 18"/91cm
- ▼ **Internal Doors** - must be unobstructed - (Applies primarily to residences requiring inspection for tenancy) closet, cabinet, pantry, etc. Inspector must be able to open & close doors fully & freely, & be able to latch if applicable.
- ▼ **Windows** - 1 window per room must be unobstructed, includes every room with a window measuring over 20"/51cm width x 24"/61cm height
- ▼ **Heat & Electrical Sources** - stoves, ovens, refrigerators, washing machine/dryer, a/c units, heat thermostats (all that apply) must be unobstructed
- ▼ **Heat & Electrical Sources - clearance requirements** - open flame heat sources, fireplaces, furnaces, oil tanks, water units, electrical panels, etc... must be unobstructed with front and surrounding clearance of 36"/91cm
- ▼ **Emergency Pull Cords** - (if applicable) must be unobstructed, end of cord must be no more than 18"/46cm distance from the floor

STEP 2

STATUS

The following items must be ACCESSIBLE - easily able to be reached by inspector -

PRIMARY INSPECTION TARGETS

- ▼ **Windows** - must be accessible (any window not included above)
- ▼ **Electrical outlets** - must be accessible
- ▼ **Plumbing fixtures & pipes** - must be accessible, including under sinks
- ▼ Toilets, sinks, bathtubs, & showers must be accessible

STEP 3

STATUS

The following items provide a guide for addressing GENERAL HEALTH AND SAFETY.

GENERAL HEALTH AND SAFETY TARGETS

- ▼ Sinks must function and show routine use & care
- ▼ Kitchen must have clear & sanitary space sufficient for food preparation counter, portable kitchen island, or table will satisfy requirement
- ▼ Refrigerator/freezer must be sanitary, no expired/decaying food, not overfilled - door & drawers easily close, light & temp controls accessible
- ▼ No expired or decaying food in residence
- ▼ All gas pilot lights must be lit (if applicable)
- ▼ Stove, range w/ oven - interior, exterior, & top must be sanitary & free of debris, **NO** flammable items inside, on, or within 6"/15cm of stove top
- ▼ No evidence of infestation
- ▼ Garbage & debris must be removed from residence on a routine basis
- ▼ No trip hazards, fall hazards, or avalanche risk
- ▼ No extension cords under carpets, across floors, or across rooms
- ▼ No long-term storage of newspapers, magazines, papers, or flammable/ignitable liquids to cause or accelerate fires
- ▼ No exposed or frayed electrical wiring
- ▼ No inoperable or unregistered vehicles in yard (if applicable)
- ▼ No excessive pet odor, pet hair, pet waste

ICD Clutter-Hoarding Scale

Assessment of home's interior, except where outside structure affects overall safety of interior

Guideline tool by professional organizers and related professionals

5 categories:

- Structure and Zoning
- Animals and Pests
- Household Functions
- Health & Safety
- Personal Protective Equipment (PPE)

The image shows a thumbnail of the 'ICD Clutter-Hoarding Scale' Quick Reference Guide. The document is organized into several sections:

- ICD CLUTTER — HOARDING SCALE FIVE CATEGORIES:** This section lists five categories: Structure and Zoning, Animals and Pests, Household Functions, Health and Safety, and Personal Protective Equipment (PPE). Each category has a brief description of what it assesses.
- ICD CLUTTER — HOARDING SCALE FIVE LEVELS:** This section lists five levels of clutter/hoarding, each with a color-coded header and a brief description of the level's characteristics and the professional support needed:
 - LEVEL I GREEN LOW:** Household environment is considered standard. No special knowledge in working with the chronically disorganized is necessary.
 - LEVEL II BLUE GUARDED:** Household environment requires professional organizers or related professionals who have additional knowledge and understanding of chronic disorganization.
 - LEVEL III YELLOW ELEVATED:** Point point between a cluttered household environment and a potential hoarding environment. Those working with Level III household environments should have significant training in chronic disorganization and will require a community network of resources, especially mental health professionals.
 - LEVEL IV ORANGE HIGH:** Household environment requires a coordinated collaborative team of service providers in addition to professional organizers and family mental health professionals, social workers, financial counselors, pest and animal control officers, crime scene cleaners, licensed contractors and handymen.
 - LEVEL V RED SEVERE:** Professional organizers should not work alone in a case V environment. Requires a collaborative team, potentially including family mental health professionals, social workers, building manager, pesting, fire, and/or safety agents. Formal written agreements among the parties should be in place before proceeding.
- SCOPE OF SCALE:** This section defines the purpose of the scale, stating it is to be used as an assessment guideline tool only, specifically for use in the assessment of a home's interior, except where the outside structure affects the overall safety of the interior. It also notes that it is not to be used for diagnostic purposes or for any psychological evaluation of a person or persons.
- FOR:** Professional Organizers, Related Professionals, Collaborating Team Members.
- Contact ICD and Learn More!** Institute for Challenging Disorganization, 1693 S. Hanley Rd. | St. Louis, MO 63144, 314-416-2236, www.challengingdisorganization.org.

Available for free download:
www.challengingdisorganization.org

Clutter Image Rating

- Developed to overcome problems with over- and under-reporting
- 9 photos/4 main rooms: Bathroom, Kitchen, Livingroom, and Bedroom
- 1= no clutter to 9 = severe clutter
- Review room and select picture that looks most like room in the home
- Score of 4 or more = clinically significant clutter problem

“Levels” of Hoarding (ICD Clutter Hoarding Scale)



CLUTTER — HOARDING SCALE (CHS) QUICK REFERENCE GUIDE

	Structure and Zoning	Animals and Pests	Household Functions	Health and Safety	Personal Protective Equipment (PPE)
LEVEL I	All doors, stairs and windows accessible; plumbing, electric and HVAC operational; fire and CO2 detectors installed and functional	Normal animal control (behavior/sanitation); approved number of animals; no evidence of rodents or insects	No excessive clutter; all rooms properly used; appliances functional; good housekeeping and maintenance	Safe, sanitary, no odors; medication control OK	OPTIONAL
LEVEL II	1 major exit blocked; 1 major appliance or HVAC device not working for longer than one season; some plumbing or electrical systems not fully functional; fire or CO2 detectors non-existent or non-functional	Evidence of inappropriate animal control; visible or odorous pet waste; visible pet fur/hair/feathers; light to medium evidence of common household pests/insects	Clutter beginning to obstruct living areas; slight congestion of exits, entrances, hallways and stairs; some household appliances not functional; inconsistent housekeeping and maintenance	Diminished appropriate sanitation; odors from dirty dishes, food prep, laundry, toilets; mildew present; medication control questionable	LIGHT PPE Medical or work gloves; caps (baseball or poly bouffant); first aid kit; insect repellent; hand sanitizer
LEVEL III	Outside clutter of items normally stored indoors; HVAC devices not working for longer than one season; fire or CO2 detectors non-existent or non-functional; one part of home has light structural damage (occurring within past six mos.)	Animal population exceeds local regulations; inappropriate animal control; inadequate sanitation; audible evidence of pests; medium level of spiders; light insect infestation such as bed bugs, lice, fleas, roaches, ants, silverfish, spiders, etc.	Clutter obstructing functions of key living areas; building up around exits, entrances, hallways and stairs; at least one room not being used for intended purpose; several appliances not functional; inappropriate usage of electric appliances and extension cords; substandard housekeeping and maintenance; hazardous substances in small quantities	Limited evidence of maintaining sanitation (heavily soiled food prep areas, dirty dishes, mildew); odors obvious and irritating; garbage cans not in use or overflowing; dirt, dust and debris; dirty laundry throughout house; Rx and OTC medications hazardous control (re children, pets, mentally impaired)	MEDIUM PPE Face masks or N95 respirator masks; eye protection; gloves; disposable coveralls; poly caps; work shoes/boots; first aid kit; hand sanitizer; insect repellent
LEVEL IV	Excessive outdoor clutter of items normally stored indoors; HVAC devices not working for longer than one year; CO2 detectors non-existent or non-functional; structural damage to home lasting longer than six months; water damaged floors, damaged walls and foundations, broken windows, doors or plumbing; odor or evidence of sewer backup	Animal population exceeds local ordinances; poor animal sanitation; destructive behavior; excessive spiders and webs; bats, squirrels, rodents in attic or basement (audible and visible); medium insect infestation	Diminished use and accessibility to key living areas; several rooms cluttered to extent they cannot be used for intended purposes; clutter inhibits access to doorways, hallways and stairs; inappropriate storage of hazardous/combustible materials; appliances used inappropriately; improper use of electric space heaters, fans or extension cords	Rotting food, organic contamination; expired, leaking cans or bottles, buckled sides and tops; dishes and utensils unusable; no linens on beds; sleeping on mattress; chair or floor; infestation of bedding and/or furniture; medications Rx and OTC medications easily accessible to anybody	FULL PPE Face masks or N95 respirator mask; safety goggles; medical or industrial grade latex or nitrile gloves; heavy duty work gloves; disposable coveralls; caps; work shoes/boots; first aid kit; hand sanitizer; insect repellent; headlamp or flashlight
LEVEL V	Extreme indoor/outdoor clutter; foliage overgrowth; abandoned machinery; ventilation inadequate or nonexistent; HVAC systems not working; water damaged floors, walls and foundation; broken windows, doors or plumbing; unreliable electrical, water and/or septic systems; odor or sewer backup; irreparable damage to exterior and interior structure	Animals at risk and dangerous to people due to behavior, health and numbers; pervasive spiders, cockroaches, mice, rats, squirrels, raccoons, bats, snakes, etc.; heavy infestation of insects such as bed bugs, lice, fleas, cockroaches, ants, silverfish, etc.	Key living spaces not usable; all rooms not used for intended purposes; entrances, hallways and stairs blocked; toilets, sinks and tubs not functioning; hazardous conditions obscured by clutter; appliances unusable; hazardous and primitive use of kerosene, lanterns, candles, fireplace/woodstove as primary source of heat and/or light	Human urine and excrement present; rotting food; organic contamination; cans or jars expired, leaking or buckled; dishes and utensils buried or nonexistent; beds inaccessible or unusable due to clutter or infestation; pervasive mold and/or mildew; moisture or standing water; Rx and OTC medications easily accessible to anybody; presence of expired Rx	FULL PPE REQUIRED N95 respirator mask or mask with organic filter(s); safety goggles; medical or industrial grade latex or nitrile gloves; heavy duty work gloves; disposable coveralls; poly caps; work shoes/boots; first aid kit; hand sanitizer; insect repellent; headlamp or flashlight

ICD's
CLUTTER-HOARDING SCALE®
FIVE CATEGORIES.

Structure and Zoning

Assessment of access to entrances and exits; function of plumbing, electrical, HVAC (any aspect of heating, ventilation or air conditioning) systems and appliances; and structural integrity

Animals and Pests

Assessment of animal care and control; compliance with local animal regulations; assessment for evidence of infestations of pests (rodents, insects or other vermin)

Household Functions

Assessment of safety, functionality and accessibility of rooms for intended purposes

Health and Safety

Assessment of sanitation levels in household; household management of medications for prescribed (Rx) and/or over-the-counter (OTC) drugs

Personal Protective Equipment (PPE)

Recommendations for PPE (face masks, gloves, eye shields or clothing that protect wearer from environmental health and safety hazards); additional supplies as appropriate to observational level

SCOPE OF SCALE

PURPOSE OF SCALE: This document is to be used as an assessment/guideline tool only, specifically for use in the assessment of a home's interior, except where the outside structure affects the overall safety of the interior. Does not include sheds, unattached garages or outbuildings. It is not to be used for diagnostic purposes or for any psychological evaluation of a person or persons. ICD is not responsible for any work performed by a professional organizer or other related professional using ICD's C-HS® or C-HS® Quick Reference Guide.

REPRINTING: ICD grants permission to copy, reprint and transmit the Clutter-Hoarding Scale® (C-HS®) Quick Reference Guide for educational, not-for-profit purposes provided credit is given to ICD. Requests for permission to quote, copy, reproduce or redistribute all or parts of this guide for commercial purposes should be submitted in writing to www.challengingdisorganization.org.

ICD's
CLUTTER-HOARDING SCALE®
FIVE LEVELS.

Five progressive levels indicate the degree of household clutter and/or hoarding; Level I as the lowest, and Level V the highest. ICD considers Level III as the pivot point between a household that might be assessed as cluttered, and a household environment that may require the deeper considerations of working in a hoarding environment.

LEVEL I GREEN LOW

Household environment is considered standard. No special knowledge in working with the chronically disorganized is necessary.

LEVEL II BLUE GUARDED

Household environment requires professional organizers or related professionals who have additional knowledge and understanding of chronic disorganization.

LEVEL III YELLOW ELEVATED

Pivot point between a cluttered household environment and a potential hoarding environment. Those working with Level III household environments should have significant training in chronic disorganization and will require a community network of resources, especially mental health professionals.

LEVEL IV ORANGE HIGH

Household environment requires a coordinated collaborative team of service providers in addition to professional organizers and family: mental health professionals, social workers, financial counselors, pest and animal control officers, crime scene cleaners, licensed contractors and handypersons.

LEVEL V RED SEVERE

Professional organizers should not work alone in a Level V environment. Requires a collaborative team, potentially including family, mental health professionals, social workers, building manager, zoning, fire, and/or safety agents. Formal written agreements among the parties should be in place before proceeding.

COPYRIGHT: ©2019 The Institute for Challenging Disorganization (ICD), Larchmont, NY, U.S.A.
ACKNOWLEDGEMENTS: 2011 C-HS® Quick Reference Guide adaptation by Donna Rosman, CPO-CD®. 2011 C-HS™ written by Kristin Bergfeld; Sheila Delson, CPO-CD®; Randi Lyman, CPO-CD®; Lynn Mino, CPO-CD®; and Heidi Schultz, CPO-CD®
 The full version of the Clutter-Hoarding Scale® is available on the ICD website at www.challengingdisorganization.org.

CLUTTER-HOARDING SCALE®
QUICK REFERENCE GUIDE



INSTITUTE FOR CHALLENGING DISORGANIZATION®
 Education. Research. Strategies.

For:

Professional Organizers
 Related Professionals
 Collaborating Team Members

Contact ICD and Learn More!

Institute for Challenging Disorganization

1-800-674-7818

icd@challengingdisorganization.org
www.challengingdisorganization.org

Clutter Image Rating Scale: Bathroom

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



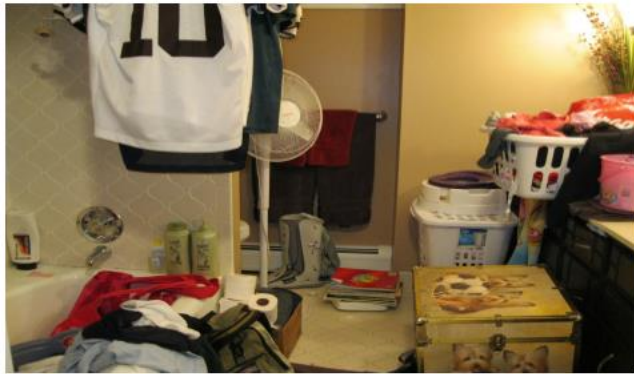
1



2



3



4



5



6



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



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



facebook

Sign Up

Email or Phone

Password

Log In

Keep me logged in

[Forgot your password?](#)

To connect with King/Pierce County Washington Hoarding Task Force, sign up for Facebook today.

Sign Up

Log In



King/Pierce County Washington Hoarding Task Force

Community Organization

[Timeline](#) [About](#) [Photos](#) [Likes](#) [More ▾](#)

PEOPLE >

50 likes

PHOTOS >



King/Pierce County Washington Hoarding Task Force

via **The Hoarding Project**

July 10 · 🌐

Join us for our day-long conference in Renton in October! We hope to see you there! Register soon to receive \$10 registration fee!



Register for October 2015 WA Hoarding Awareness Conference

https://www.facebook.com/WashingtonHoardingTaskForce/photos/a.157057844451269.35215.152664531557267/1...



A- AA+

Search ...

SEARCH



SENIOR CENTERS

CALENDAR

NEWSLETTER

DONATE

Senior Services is now **Sound Generations**

Golden Gala

Unmasking the Future of Aging





- HOME
- SERVICES
- NATIONAL RESOURCES
- FAQ
- ABOUT US
- CONTACT
- LINKS
- HELP FOR HOARDERS
- HELP FOR FAMILIES
- TRAINING
- HOARDING SUP

Featured Listings
Click On a Box

Washington Resources

Cleaning Companies

Companies with a gold seal have attended a HoardingCleanup.com training program!

Hoarding Experts NW
Serving all of Washington State
888-412-6300
[Company Info/Contact by Email](#)

Psychologists/Psychiatrists

Lisa J. Shaw, PhD
55 1st Place NW
Issaquah, WA 98027 US
Phone: (425) 681-3760
Child/Adol/Adult/OC Spectrum Disorder/
BDD/Trichotillomania/Hoarding /Home
[Visits/FRP/CBT](#)

Interactive
Click On a

MESSA BOARD
(Click Here)

ONLINE



Featured Listings
Click On a Box

National Help

Interactive
Click On a

Click on Your State for Hoarding Resources



Steri-Clean
RESTORING HOMES AND LIVES

(800) 462-7337

California
Florida
Illinois
Indiana
Kentucky

MESSA BOARD
(Click Here)

ONLINE SUPPORT GROUP

Hoarding Webin



COMPANY ▾ SERVICES ▾ PRICING CONTACT FRANCHISE BLOG

LIVE CHAT

Junk King Central Seattle

Providing the Central Seattle area with professional, fast and eco-friendly junk removal services.

Hoarder Cleanup Help in Seattle



A perfect example of why it is so important to clean out the junk in your home happened recently right here in Seattle. Firefighters responded to an alarm from a 91-year-old woman who had lit a fire in her fireplace when the sparks leaped out and kicked up a fire. The problem was that there was so much debris in the house, the firefighters not only had to contend with the blaze but also moving through

Book Online & Save \$30* or Call 888.888.5865

FIRST & LAST NAME

ADDRESS

POSTAL CODE PHONE



ServiceMaster of San Francisco/San Mateo

Serving San Francisco, San Mateo and Santa Clara County

Available **24/7**
(800) 439-8833

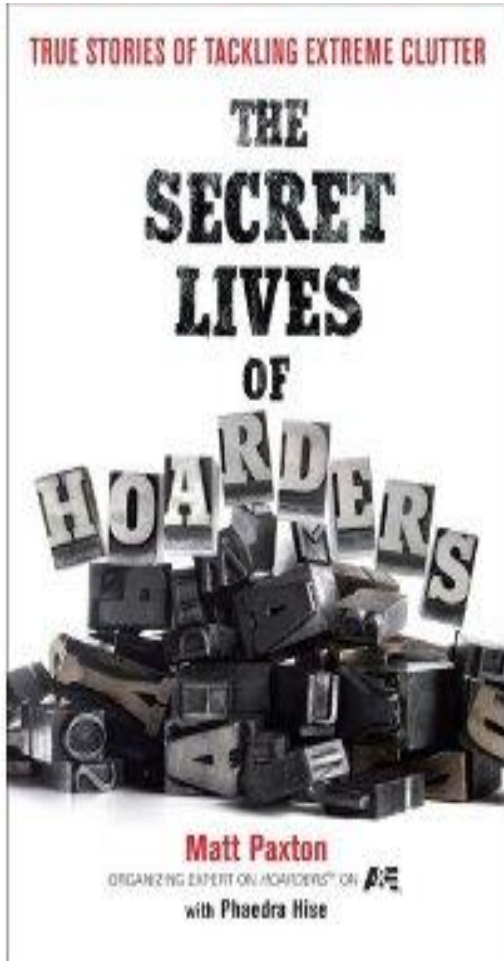
- HOME
- SERVICES ▾
- ABOUT ▾
- LOCATIONS ▾
- CONTACT
- BLOG
- Q



Call ServiceMaster Now
Toll Free: **(800) 439-8833**
Local: **(415) 584-6100**

Contact Us

Choose a Service (required)



Matt Paxton from
The A&E "Hoarders"
and I



**ServiceMASTER
Clean**

*The clean you expect.
The service you deserve.™*

**Residential/Commercial
Cleaning & Disaster
Restoration & Janitorial Services**

ServiceMASTER Family of Brands



Buried in Treasures: Help for Compulsive Acquiring, Saving, and Hoarding

