

# 7-Minute Briefing for primary care – Self-Neglect and / or Hoarding

## 01 What is self-neglect? What is hoarding?

Self-neglect covers a wide range of behaviour which in general means someone is not caring for their own personal hygiene, health, safety or surroundings. It can also include hoarding behaviour, although not always. Hoarding can involve specific things, very general items, animals – even data can be hoarded. Hoarding Disorder is considered a mental health condition distinct from the act of collecting as it's not a lifestyle choice.

Chronic self-neglect and/or hoarding develops over years, and it may be considered a safeguarding concern at the point where the person with care and support needs can no longer control their behaviour, so they cannot protect themselves from the high risk of harm to the themselves or others.

## 07 What else can you offer?

- For recurrent falls – consider referral to Falls Clinic
- For Hoarding Clutter Index Rating 4 onwards, offer referral for a fire risk assessment and consider any additional risks from emollient products if prescribed:  
[Norfolk Fire and Rescue Service](#)  
[Suffolk fire and rescue service](#)
- If [Hoarding Disorder](#) suspected, consider referral to mental health
- Signpost the person to local and national charities  
[Hoarding Disorders UK](#), [MIND](#), [Lofty Heights \(Suffolk\)](#)

## 06 Being part of multi-agency working

You, or others in your practice, might be asked to:

- Attend or support planning meetings
- Support associated health / mental health needs
- Share or have information shared with you, so everyone around that person understands the concerns, is up to date, has all relevant information to recognise the risks and can take action where needed

## 02 Identifying a need - how might the patient present in primary care?

- Recurrent falls and injuries - are they tripping over clutter at home?
- Recurrent skin infections or ulceration where hygiene may be compromised
- Poorly controlled diabetes (particularly where aggravated by alcohol)
- Erratic medication compliance – how they are caring for themselves?
- Communication from concerned friends/ relatives/ other professionals
- Evidence of hoarding on home visits
- Co-morbidities e.g, OCD, depression, ADHD

## 03 Risk assessment

It is important that when you first identify self-neglect and/ or hoarding that you gather enough information to inform a risk assessment about the immediate safety of the person and any others who may be affected.

Please consider using **clutter image rating index** to assess risk selecting which image most closely resembles the amount of clutter:

- Low level (level 1-3 green)
- Medium (level 4-6 amber)
- High (level 7-9 red)

[Hoarding Disorders UK Clutter Image Scale](#)

Please see next page for an example of the Clutter Image rating index



## 05 Think Family

Are there any other vulnerable/ at risk adults or children living at the property? Are there informal or young carers that need recognition / support?

## 04 Mental Capacity

Where there is a concern that a person may be unable to make decisions in relation to self-neglect and / or hoarding because of a cognitive impairment of some kind, a mental capacity assessment (MCA) should be completed in relation to each specific decision. As part of any MCA assessment, you need to think about what the relevant information' might be; this is the information the person making the decision needs to be able to understand / retain / use / weigh in making a decision. Please consider if there is any impairment of executive capacity and seek advice if unsure.

[Mental Capacity Act - Social care and support guide - NHS](#)

SNOMED codes  
Hoarding - 248025009  
Self-Neglect - 248054003

Low	Moderate	High
Clutter score image rating 1-3	Clutter score image rating 4-6	Clutter score image rating 7-9
All entrances and exits, stairways, roof space and windows accessible.	Only major exit is blocked.	Limited access to the property due to extreme clutter.
All utilities (gas, water, electricity) functional and maintained.	Some utilities are not fully functional/safe.	Utility Services not connected or functioning properly.
Garden is accessible, tidy, and maintained.	Garden is not accessible due to clutter or is not maintained.	Garden is not accessible and extensively overgrown.
No excessive clutter, all rooms can be safely used for their intended purpose.	Clutter impacting on the use of the rooms for their intended purpose.	Clutter is obstructing the living spaces and is preventing the use of the rooms for their intended purpose.
Property is clean with no unpleasant odours.	Offensive odour in the property.	Excessive odour in the property, may also be evident from the outside.
No concerns over vermin.	Some concerns over vermin.	Heavy vermin infestation.



### When to raise a safeguarding concern?

- If you assess self-neglect, where there is a risk of serious harm then you should offer a safeguarding referral to the relevant local authority. Please ensure that you have established that the adult:
  1. Has care and support needs from a physical or mental impairment (whether or not the authority is meeting any of those needs) and
  2. As a result of their care and support needs, is unable to protect themselves from self-neglect.

- If you are concerned that children in the property may be experiencing harm as a result of the hoarding and/or self-neglect, please consider referral to children's services:

Norfolk- [Raise a concern for a child](#)

Norfolk- [Raise a concern for an adult](#)

Suffolk - [Raise a concern for an adult or child](#)

If there is imminent risk of harm, call 999

#### Additional resources

[Self-Neglect & Hoarding - Suffolk Safeguarding Partnership](#)

[Self-neglect and hoarding | Norfolk Safeguarding Adults Board](#)

[Hoarding Disorder | NHS](#)

[Self-Neglect NHS](#)