

Testimony of the Connecticut Association of Directors of Health
Testimony in Support of Senate Bill 18, An Act Establishing a Taskforce to Study Hoarding
To the Distinguished Co-Chairs and Members of the Public Health Committee
February 19, 2015

Hoarding as a public health issue has been a challenge for local health departments and districts for some time. As awareness of the issue has increased, so has the call for action to provide assistance addressing hoarding cases. A multi-disciplinary effort is needed to effectively address this issue. Local health department personnel are often brought into the situation when hoarding becomes a public problem. When the extent or nature of the hoarding poses a health and safety risk to others, including animals, local health departments and their partners must act to address the conditions and mitigate the risk. However, this must be balanced by the need to protect the rights of the individual to live how they choose as long as it is not a hazard to their health or the health of the community. Local health departments/districts must communicate, collaborate and coordinate resources with their partners in hoarding situations to be able to effectively address the conditions that result and mitigate future recurrences.

Communication is the Key

The initial complaint for a hoarding situation can come from many sources. Categorizing complaints as “hoarding” can be a challenge for local health departments because the public health code does not address “hoarding” as something that can be cited. Most often, there are conditions that stem from the activity that violate the health code or local ordinances allowing public health professionals to act. It is the existence of these conditions that usually precipitate a call to a local health department.

Depending upon the situation, the initial complaint may come to one of many agencies including fire, police, animal control, human services departments or local health agencies. It has been recognized that regardless of the receiving agency, the complaint must be investigated to determine if conditions exist that require action on the part of governmental public health entities. Communication between agencies is critical to ensure that a comprehensive approach is applied to the situation. Many local health agencies have had cases involving multiple community partners, each addressing their individual scope of service without being able to solve all the issues that exist because of limitations to their authority. In the case of hoarding situations, identifying response agencies in the community prior to a complaint and discussing individual agency roles can be very effective in ensuring that appropriate communication occurs.

Determining the type of response in cases where life safety hazards exist or nuisance situations occur is also important. Emergency situations may require local health departments to respond immediately to the property and investigate if conditions exist that need to be addressed through the public health code and local ordinances. These situations may require that several violation notices from various agencies are expedited due to the nature of the emergency. In these instances, communication between agencies may be easier because of direct contact between agencies at the time of the emergency. Nuisance situations may be more fragmented from a communication standpoint because individual agencies may respond separately without interaction at the property.

Collaboration between agencies can result in better long term outcomes.

Hoarding is recognized as a disorder that can cause multiple outcomes under the purview of various agencies, making collaboration critical to ensuring all aspects of the situation are being evaluated and addressed appropriately. Once an agency is in receipt of a hoarding complaint, information should be shared with all agencies within the community that have a responsibility to investigate and respond if necessary. This way, the situation can be addressed in a comprehensive and timely manner. One way to ensure that agencies are

collaborating would be to schedule regular meetings to discuss the status of known hoarding cases within the community and how to address future cases. Comprehensive case management for hoarding cases is important to ensuring that appropriate and available resources are available for each individual situation.

Coordination of resources can be a critical factor for success.

Just as each responding agency has unique jurisdictional responsibility, they also may have distinct resources to support the mitigation of hoarding conditions. Understanding what resources are available to other agencies allows local health departments to make appropriate referrals. In other instances, by utilizing a combination of resources, all components of a hoarding case can be addressed to ensure the resident's safety.

Hoarding situations are complex in nature, and the type of housing unit can impact the agency's approach. Hoarding cases may occur in urban or rural settings, single-family or multi-family dwellings, that may be rentals or owner-occupied.

All of these issues point to the need for local public health subject matter expertise and representation on any legislative task force established to investigate coordinated responses to hoarding situations. **CADH requests that at least three positions on the task force be public health professionals: One Director of Health from an urban health department/district, one Director of Health from a rural health department/district and one environmental health professional experienced in investigating hoarding complaints.**

CADH is a nonprofit organization comprised of Connecticut's 74 local health departments and districts. Local health directors are the statutory agents of the Commissioner of Public Health and are critical providers of essential public health services at the local level in Connecticut. Thank you for your consideration.