

Kane County Hoarding Task Force

First Responder Guide

Information and Resources-Updated October 2019

First Responder Guide for Mental Health and Hoarding

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First Responder Guide for Mental Health and Hoarding

This is a general guide designed to assist first responders when dealing with a possible hoarding and/or mental health disorder. **Consult your department policy prior to using this guide.** This guide was prepared by the Kane County Hoarding Task Force. It is presented with the understanding that the Kane County Hoarding Task Force is not engaged in rendering legal, accounting, or other professional service, other than crime prevention education.

This guide can be changed to meet your department's policy and specific needs. On page 11 your department should supply a list of nearby hospitals including the treatment options they provide. On page 12 your department should supply a list of nearby resources that can be used by first responders and offered to clients as needed. An example list is provided and can be deleted prior to releasing the guide to your department.

Things to remember prior to arriving at a mental health call:

Most first responders are not trained social workers, doctors, or psychiatrists.
Subjects need to be provided with local resources in order to obtain proper counseling and treatment.

A hoarding problem cannot be solved immediately and requires a multi-faceted approach which only starts with a first responder. As a first responder, you are expected to recognize if there is an immediate threat or need. If the threat is not immediate, your task is to gather information and write a report that will help start the process in solving the problem. The first responder is often the person who coordinates or connects services to ensure everyone is working from the same problem solving blueprint.

Hoarding can be the result of a mental health disorder or brain disease or disorder such as dementia. Hoarding does not happen overnight. The problem may have been developing over many years.

As with any other type of call, be certain before taking any action in respect to the individual's rights, and the American's with Disability Act.



This is only a general hoarding checklist guide:

- ☐ Blocked access or exit to any door or window due to clutter
- ☐ Clutter that impedes or prevents movement in and around residence
- ☐ Clutter that prevents any part of the inside or outside of a dwelling to be used for its intended purpose. (i.e. bathtub filled with clutter)
- ☐ Trash and garbage inside or outside not inside garbage cans and/or older than last garbage pickup date
- ☐ Signs of rodent/insect infestation or factors associated with health concerns
- ☐ Visible severe damage to stairs, ceilings, floors, or walls
- ☐ Animals that are not being cared for
- ☐ Non-functional appliances / Non-accessible appliances
- ☐ Combustible materials stored close to an ignition source (stove, heater vents, electric heaters, furnace, gas cans, fireplaces)
- ☐ Absence of working smoke detectors
- ☐ Gas cans or other noxious materials, stored in a residence, of which fumes become a potential hazard
- ☐ Absence of running water, heat, and/or electricity
- ☐ Furniture that is not able to be used due to clutter
- ☐ Items stacked on top of each other without reason
- ☐ Property outside of residence untaken care of
- ☐ Too little space at the ceiling level to meet fire code
- ☐ Non-functional or damaged electrical outlets
- ☐ Clutter or fuel fire hazards near heat sources



Help Now Available for Compulsive Hoarding and Acquiring

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



* For instructions on using this innovative, full color, Clutter Image Rating (CIR) assessment, please consult *Compulsive Hoarding and Acquiring Therapist Guide* now available from Oxford University Press.

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EXAMPLE: Hoarding Report: code dept. sample

Report Number: _____ Date initial contact was made: _____

Person making initial contact: _____

Phone number of person making the initial contact: _____

Referred to: _____

Date referred to Code Enforcement or Agency: _____

Phone number of person or agency referred to: _____

Name of client: _____ Male/Female

Is Property rental: Yes / No If yes, owner/phone number: _____

Address of client: _____

Phone number of client: _____ Age of client: _____

Name of nearest friend/relative/POA: _____

Phone number of nearest friend/relative/POA: _____

Address of nearest friend/relative: _____

Did entrance to residence occur: Yes/No Pets inside home: Yes/No

Are basic needs being met: Yes/No If not, explain: _____

Is there use of the bathroom facilities (toilet, sink, tub, and shower): Yes/No

Is there access to running water: Yes/No Is the gas and the electricity on: Yes/No

Are there children in the home: Yes/No

If so, how many and what are their ages: _____

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What is the child's/children's condition (check one): _____

Is there a spouse or other adults living in the home: Yes/No

How many other adults: _____ What are their ages: _____

What is the spouse's/other adult's condition: _____

What is the client's attitude: _____

Is client mobile: Yes/No

Are there physical issues: Yes/No

Are there known or suspected mental health issues: Yes/No

If so explain: _____

Does the client receive mental health, dementia, Veteran's, religious based or Department of Aging services? Yes/No

If so, what agencies? _____

Description of Hoarding: (presence of human or animal waste, rodents, insects, rotting food, exits blocked, is there an extraordinary amount of combustibles, are adjacent properties at risk, etc.)

Initial Hoarding Severity Rating: Severe ☐ Moderate ☐ Mild ☐

Pictures Taken: Yes/No. Where are they available?: _____

Make sure to engage the person in conversation. Take statements from the client. Get an explanation as to why the problem exists. Document any statements or explanations made.



Officer Safety!

Consider that a home where there may be hoarding of things may be a crime scene or hazmat scene and proper PPE should be worn. An animal hoarding scene should be considered a hazmat scene until proven otherwise or mitigated by trained professionals.

Is immediate psychiatric hospitalization necessary? (Refer to Flow chart on page 8)

(405 ILCS 5/Ch. III Art. VI heading)

ARTICLE VI. EMERGENCY ADMISSION BY CERTIFICATION

(405 ILCS 5/3-600) (from Ch. 91 1/2, par. 3-600)

Sec. 3-600. A person 18 years of age or older who is subject to involuntary admission on an inpatient basis and in need of immediate hospitalization may be admitted to a mental health facility pursuant to this Article.

(Source: P.A. 96-1399, eff. 7-29-10; 96-1453, eff. 8-20-10.)

(405 ILCS 5/3-601) (from Ch. 91 1/2, par. 3-601)

Sec. 3-601. Involuntary admission; petition.

(a) When a person is asserted to be subject to involuntary admission on an inpatient basis and in such a condition that immediate hospitalization is necessary for the protection of such person or others from physical harm, any person 18 years of age or older may present a petition to the facility director of a mental health facility in the county where the respondent resides or is present. The petition may be prepared by the facility director of the facility.

(b) The petition shall include all of the following:

1. A detailed statement of the reason for the assertion that the respondent is subject to involuntary admission on an inpatient basis, including the signs and symptoms of a mental illness and a description of any acts, threats, or other behavior or pattern of behavior supporting the assertion and the time and place of their occurrence.

2. The name and address of the spouse, parent, guardian, substitute decision maker, if any, and close relative, or if none, the name and address of any known friend of the respondent whom the petitioner has reason to believe may know or have any of the other names and addresses. If the petitioner is unable to supply any such names and addresses, the petitioner shall state that diligent inquiry was made to learn this information and specify the steps taken.

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3. The petitioner's relationship to the respondent and a statement as to whether the petitioner has legal or financial interest in the matter or is involved in litigation with the respondent. If the petitioner has a legal or financial interest in the matter or is involved in litigation with the respondent, a statement of why the petitioner believes it would not be practicable or possible for someone else to be the petitioner.

4. The names, addresses and phone numbers of the witnesses by which the facts asserted may be proved.

(c) Knowingly making a material false statement in the petition is a Class A misdemeanor.

(405 ILCS 5/3-606) (from Ch. 91 1/2, par. 3-606)

Sec. 3-606. A peace officer may take a person into custody and transport him to a mental health facility when the peace officer has reasonable grounds to believe that the person is subject to involuntary admission on an inpatient basis and in need of immediate hospitalization to protect such person or others from physical harm. Upon arrival at the facility, the peace officer may complete the petition under Section 3-601. If the petition is not completed by the peace officer transporting the person, the transporting officer's name, badge number, and employer shall be included in the petition as a potential witness as provided in Section 3-601 of this Chapter.

Only a Peace Officer has the authority to detain a person involuntarily and use reasonable force as necessary to protect and and transport/have transported said person, ,to a mental health facility for said evaluation.

Use this link to access the Petition for Involuntary Admission:

<https://www.dhs.state.il.us/onenetlibrary/12/documents/Forms/IL462-2005.pdf>

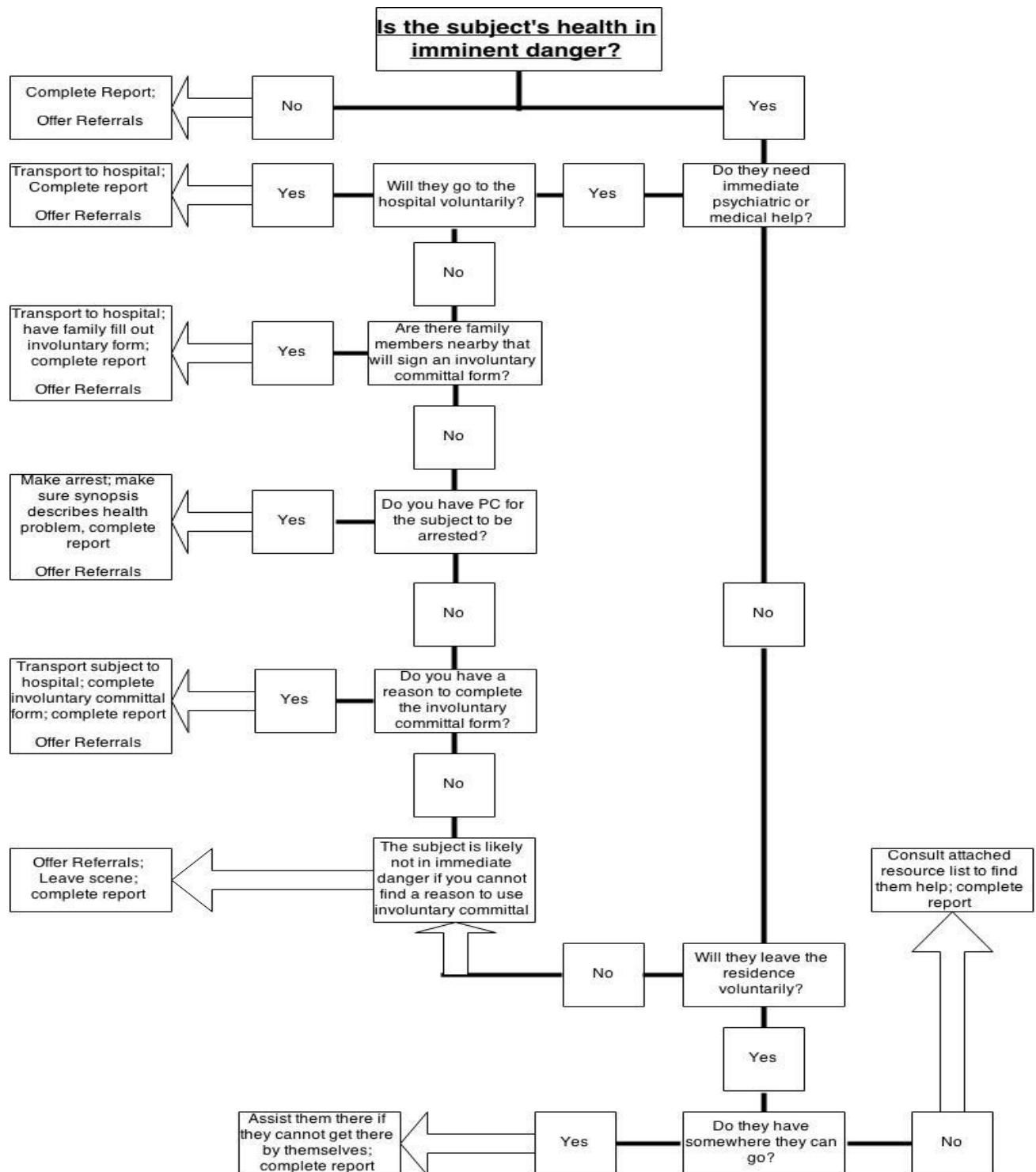
Statement 5 must apply for all petitions in order for a Petition for Involuntary Admission to be valid. Statements 1, 2, 3 or 4 must apply, but NOT ALL are required.

1. a person with mental illness who: because of his or her illness is reasonably expected, unless treated on an inpatient basis, to engage in conduct placing such person or another in physical harm or in reasonable expectation of being physically harmed;



2. a person with mental illness who: because of his or her illness is unable to provide for his or her basic physical needs so as to guard himself or herself from serious harm without the assistance of family or others, unless treated on an inpatient basis;
3. a person with mental illness who: refuses treatment or is not adhering adequately to prescribed treatment; because of the nature of his or her illness is unable to understand his or her need for treatment; and if not treated on an inpatient basis, is reasonably expected based on his or her behavioral history, to suffer mental or emotional deterioration and is reasonably expected, after such deterioration, to meet the criteria of either paragraph one or paragraph two above.
4. an individual who: is developmentally disabled and unless treated on an in-patient basis is reasonably expected to inflict serious physical harm upon himself or herself or others in the near future, and/or
5. in need of immediate hospitalization for the prevention of such harm.





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Is an arrest an option?

- A person may be arrested based on probable cause and transported or noticed as per departmental orders. If mental health, dementia, or a brain disorder may be present and involved an officer may refer the case to the TAC (Treatment Alternative Courts) through the State's Attorney's Office.
- A person in need of immediate hospitalization or evaluation via a petition may be brought to the local providing hospital and, dependent upon the type of charge, issued a Notice to Appear versus full custodial arrest.
- **A judge can order an emergency psychological evaluation, i.e. Judicial Petition for Involuntary Admission-** A Peace Officer may present directly to the judiciary. Any petitioner may seek the assistance of the State's Attorney's Office to complete and present a JPIA. Please give the assistant state's attorney enough information for factual findings to present to the court. If you are seeking a warrant the investigating officer should follow their departmental procedure for obtaining either a criminal or administrative warrant. A criminal warrant issues for violations of criminal statute and are administered by the State's Attorney's Office. An administrative warrant is for violations of city ordinances i.e. housing and standards or fire code violations. They are administered by the presiding municipality. The officer may go to the court to testify in front of the judge or, if the officer is not able to go to court, all information must be found in the synopsis, if this is allowed by your local court.
 1. A judge can issue a bond amount and a psychological evaluation as a condition of the bond. A subject may be held based upon a valid Judicial or Involuntary Petition for Involuntary Admission but may not be held solely on a judicial order for an evaluation by the County Diagnostic Center.
 2. If a judge orders a psychological evaluation, the investigating officer should follow up a day or two later by contacting the Kane County Diagnostic Center (KCDC) and advise them of your case. KCDC will be completing the recommendations to the court based on your report, the information that you provided to KCDC when you call them, and the evaluation.

If the issue is not described with specificity within the charging documents, or the petition narrative, the judge may dismiss charges and may not issue a petition or diagnostic order.



INSURANCE:

What is their medical insurance coverage? This may be relevant for voluntary admission to many hospitals but is not required information for Judicial or Involuntary admissions and evaluations. *Those with Medicaid and State Managed Care are eligible for in home evaluations by SASS (Screening Assessment and Support Services) if there is no immediate physical health concern requiring medical clearance. This is the same evaluation they will receive in an emergency department.*

- Medicaid or Public Aid
- Medicare or Private Insurance
- Military Veteran Insurance

Area Hospitals and Psychiatric Treatment facilities (not all inclusive)

- Alexian Brothers in Elk Grove accepts all insurance and ages for psychiatric needs.
- Alexian Brother Behavioral Health Centralized Call Center
- Alexian Brothers Behavioral Health Hospital
- Alexian Brothers Medical Center
- Delnor / Northwestern Medical Group Hospital in Geneva
- Amita Mercy Hospital in Aurora
- Streamwood Behavioral in Streamwood (focus on minors)
- Sherman Hospital in Elgin will transfer petitions to Alexian Brothers.
- St. Alexis Hospital in Hoffman Estates can't accept Medicaid insurance from subjects under 65 years of age.
- St. Joseph Hospital has limited psychiatric beds, but will transfer referrals as needed.
- VA Clinic in Elgin and Hines VA in Hines, IL

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RESOURCES

Hoarding: Kane County Hoarding Task Force:

Web: <https://www.kchoarding.org/>

Facebook: <https://www.facebook.com/KCHoarding/>

Kane County Health Department: <http://kanehealth.com/Pages/Behavioral-Health.aspx>

MENTAL HEALTH/DISABILITIES

Ecker Center for Mental Health

Address: 1845 Grandstand Place, Elgin, IL 60123

Phone number: 847-695-0484 x329

Ecker Center for Mental Health Psychiatric Emergency Program (PEP)

Sherman Hospital Emergency Department

Address: 1425 North Randall Rd, Elgin, IL 60123

Phone number: 847-888-2211

NAMI (National Alliance for Mental Illness)

KDK (Southern Kane, Kendall and DeKalb): 630-896-6264

North (mid-northern Kane): 847-410-9719

Family Services Association of Elgin (aka SASS):

1140 N McLean Blvd # I, Elgin, IL 60123 Illinois CARES Line: 800-345-9049

Association for Individual Development (AID) – Behavioral Health Services

Address: 1230 North Highland Avenue Aurora, IL 60506

Phone number: 630-966-9393 (24/7 Crisis Line of The Fox Valley)

SENIOR SERVICES/ADULT PROTECTIVE SERVICES (APS)

Senior Services Associates Inc. – Elgin Office (Northern Kane County)

Address: 101 South Grove Avenue, Elgin, IL 60120

Phone number: 847-741-0404

Senior Services Associates Inc. – Aurora Office (Central and Southern Kane County)

Address: 211 Plum Street, Aurora, IL 60506

Phone number: (630) 897-4035

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VETERAN SERVICES

VA Hines Crisis Line: 1-800-273-8255, Press #1

LEGAL SERVICES

Prairie State Legal Services- Kane, DeKalb, & Kendall Counties (Fox Valley Office)

Address: 1024 West Main Street, Saint Charles, IL 60174

Phone number: 800-942-4612

Administer Justice

Address: 1750 Grandstand Place Suite 17, Elgin, IL 60123

Phone number: 847-844-1100

FAMILY & CHILDREN SERVICES

Illinois Department of Children and Family Services (DCFS)

Phone number: 1-800-252-2873

ANIMAL RESOURCES

Kane County Animal Control

Address: 460 Keslinger Road

Geneva, IL 60134

Phone number: 630-232-3555

Anderson Animal Shelter

Address: 1000 South La Fox, South Elgin

Phone number: 847-697-2880

The Barn on Baseline

Address: 16173 Baseline Road, #7612

Genoa, IL 60135

Phone number: 815-784-5924

ITEM REMOVAL

The Junk Removal Dudes - 815-757-9696

1-800-Got Junk

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