

Cape Cod Hoarding Task Force General Meeting Minutes

October 9, 2014, Dennis Police Dep't Meeting Room

Erika Woods, BCDHE; Deborah Scavotto, Smooth Moving for Seniors; Lori Miranda, Dennis PD; Sherri McCullough, Brewster HD; Catriona Purdy, Falmouth Housing Authority; Cassie Coffin, Disaster Specialists; Joan Piontek, Rock Harbor Village; Lois Carr, Bourne COA; Morgan Clark, P-Town Health; Michael Smith, Medical Alarms USA; Karen Cadiera, Falmouth Human Services; Mary Cullity; VNA-Hospice; David Erickson, ESCC&I; Brooks Reinhold, Beacon Hospice; Maryanne Ryan; Orleans COA

- Erika welcomed group and introduced Ed Chase of Statewide Hoarding Task Force and MassHousing
- Ed announced the award of a \$2143 grant to CCHTF honoring Lee A Mannillo's memory and work on the task force.
- Ed talked about the number of applicants for the grant monies from around the state. (awarded \$30,000 to 13 different Task Forces) Difficult decision process, tried to spread the money around judiciously. Ed strives to continually offer a variety of training opportunities. Jesse and Ann Anderson key trainers. Some different criteria's offered for use of grant monies involved "Flash Mob" style sorting and discarding to targeting underserved populations like ages 50-64.
- Ed noted Lee's influence felt at the state level and willingness to share information and assist other emerging groups.
- Erika shared how our grant money will be used: development of more BIT (Buried in Treasures) support groups one on the upper cape and the lower cape. Money will be used to purchase books and training for new group leaders. Current operating BIT group on the mid cape will begin again with a new group on Oct 21 meeting on Tuesday 2 pm-4pm at the ESSC&I facility on route 134 in Dennis. Program runs 15 sessions over 20 weeks. Group looking for interested members, contact Erika or Denise.
- Karen from Falmouth wishes to head up a new BIT group in Falmouth.
- Erika introduces Richard Lennox, President from Disaster Specialist.
- Richard shared several stories from his experience. He noted difficult cases were no place for volunteers.
- Most of his cases are paid for from insurance funds and usually involve single family dwellings.
- Group questioned if he had a mental health expert on staff and suggested that that may be helpful.
- Richard felt that maybe 2% of his company's cases are hoarding cases, but that they are the most complicated and difficult.
- Group noted that DSM 5 Hoarding Disorder change should now make billing easier. May take some time. Need more clinicians.
- Follow up services with hoarders are critical and sorely missing in most cases. Building trust initially is vital to progress.

- Ed Chase offered that more training for clinicians will be forthcoming to prepare for billing in hoarding cases.
- Group noted that certifications are available from the Institute of Chronic Disorganization? Hoarding I and Hoarding II levels are offered and are relatively inexpensive online courses.
- Brewster Health (Sherrie) noted that they have benefitted from building collaborative relationships.
- Richard from Disaster Specialist noted that they do try to reach out to family members in difficult cases.
- Group noted that rental housing establishments would like business owners to share information. Can sometimes trigger legal help at times.
- All noted that a Housing Court on the cape would greatly assist in some cases, bill died, can be resurrected. Ed Chase to update our group.
- Erika thanked Richard for coming and opened discussion up to active hoarding cases that needed guidance.
- Orleans, Mary Cullity VNA Hospice, presented case that involved, structural/heating issues, rodent infestation, issues over home ownership, seriously ill home resident that wishes to remain in home. Insurance on home in question.
- Richard of Disaster Relief said that the Fair Plan in MA has to insure homes in MA. Sometimes insurance companies can take responsibility for home issues. It all depends on how issues of mold and rot are presented. Leverage is important.
- Group noted (Dave Erikson) that the Bank should be a key component. Presentation of case is important.
- Lori Miranda spoke of Dennis condemnation case that had a success story of action from a bank. Police chief of Dennis instrumental in getting bank cooperation.
- Lori noted that the Dept of Mental health has become very involved in the Dennis police logs and calls.
- Deborah SMFS noted that DMH will speak at our next general meeting and plan on attending our BIT training on OCT 28.
- A Falmouth hoarding case, Karen Cardiera of Human Services, 3 year plus in duration was introduced involving, mental health and alcohol abuse issues. Hoarded home, yard, and workplace environments. Home owner is young (ish) and lives in a tent with girlfriend on premises. Both are currently jobless. H2O, electricity, heat issues. Bank has not been helpful. It is estimated to be a \$30,000 clean up. Falmouth Health agents not helpful to other town concerned parties.
- Group noted complexity of case and suggested that Gosnold should be represented at our meetings. Alcohol abuse is a problem with hoarders too.
- Court appointed receivership can work in cases like this Brewster mentioned, town council should be involved in this Falmouth case.

- Falmouth noted that the Homes risk assessment done on the case showed the complexity and difficulty of the case. It was noted that the homeowner responded to requests of clearing the driveway from the Fire dept. "Hammer works with them"
- Group suggested spreading the word around the town related parties. Health agents are difficult, but noted that Board of Health has real power. It was recommended by group to document every interaction and use photographs.
- Erika thanked all attendees and closed meeting.
- Next general CCHTF meeting December 11, 9:30-11:30am at the Dennis Police Department.