

### HOARDING PROCEDURE



### **MONITORING INFORMATION:**

POLICY/PROCEDURE/STRATEGY: HOARDING PROCEDURE

DATE APPROVED: AUGUST 2022 EXPIRY DATE: AUGUST 2025

OWNER: HEAD OF COMMUNITIES & ESTATES

APPROVAL ROUTE: EXECUTIVE MANAGEMENT TEAM

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## **Hoarding Procedure**

#### 1. Procedure

This approach works in tandem with Teign's Hoarding Management Policy

### 2. Statement of Intent

Teign will promote independent living and the right for all of its customers to make individual choices even when this requires tolerance of unconventional lifestyles or where people appear to act in ways that are against their best interests.

However, where customers display behaviours that pose a risk or have a detrimental impact on themselves or others around them, Teign will, in most cases, take a graded approach to intervention. In the case of hoarding issues this will involve:

### **Provision of support**

It is recognised amongst professionals that taking a multi approach to addressing hoarding has a greater chance of success, particularly given that reoccurrence of hoarding is high. Teign will first look to provide support from within its own resources.

This may include increased frequency of visits from Neighbourhood or Independent Living Advisers. This approach may also involve contact with known friends, relatives of customers or advocates for low level assistance, where it is appropriate to do so and with the consent of the tenant(s), unless exemptions apply.

When professionals doubt that a person has understanding of the impact their behaviour or circumstances are having on their wellbeing, or that of others, this should prompt a decision specific assessment of capacity in line with the Mental Capacity Act 2005. (see appendix 5)

Raising a safeguarding concern with the Local Authority should happen when all reasonable and proportionate attempts have been made to assess and engage the person in meeting their health and social care needs and despite support/intervention, the person continues to be unable to protect themselves resulting in an ongoing risk to their independence, health and welfare and/or that of others. Or where there is a critically high risk. (Adult Self Neglect and Hoarding Guidance **DSAP 2020)** 

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Referral to Local Authority Children's Safeguarding Teams should be considered if children are

residing with adults who are self neglecting, and the child is experiencing harm or there is a risk to

the child's welfare.

In the most extreme situations, where the individual presents such a risk to themselves and others,

and where it is suspected that a mental health condition exists, it may be appropriate to request

that a Mental Health Act Assessment is carried out by the appropriate mental health professional.

The appropriate person will be able to enter the home with a warrant under Section 135 of the

Mental Health Act and remove the individual for an assessment.

**Enabling approach** 

The enabling approach may include engaging specialist clearing and cleansing services to assist.

Referral

This may involve the use of outside agencies including but not exclusive of a

referral to General Practitioners (GP), Fire Services, relevant psychiatric

professionals, adult and or children's Social Services and Environmental

Health Officers. When circumstances are particularly pressing (trying to resolve gas access

issues, planned maintenance works and so on) there is a small budget provision to engage with

'decluttering specialists' or 'professionals in addressing hoarding in the home registered with the

Association of Professional Declutterer and Organisers UK'

**Enforcement** 

Where the above actions have failed to bring about appropriate improvements and only as a last

resort will Teign consider taking enforcement actions which may include legal action to recover

tenancies.

Teign will assess each case of hoarding from its customers on an individual basis and will respond

appropriately to the circumstances involved. Occasionally it may be necessary to take steps out of

sequence.

Teign is committed to working in partnership with multiple agencies to find lasting solutions to the

problems created by hoarding and where required case conferencing approaches will be adopted,

maintaining Data Protection Act/GDPR requirements at all times (unless exemptions around public

/personal safety apply).

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### 3. The Approach to Hoarding Management

- 3.1 In all identified hoarding cases the Head Start Advisers, Independent Living Advisers and Neighbourhood Service Advisers will ensure an objective, sensitive and non-judgemental approach is adopted. There will always be an assumption of mental capacity unless an assessment by a relevant psychiatric professional and diagnosis proves otherwise, in which case the use of qualified advocates must be considered.
- 3.2 A visit will be undertaken within five working days of receiving notification that there could be a hoarding issue. Prior to the visit staff are expected to check the housing management system to establish whether there have been any previous reports of hoarding tendencies.
- 3.3 There are tools in the appendices of this procedure to assist with the completing of an initial hoarding assessment. The clutter rating table and the initial assessment for will help to arrive at a conclusion.
- 3.4 Where necessary, and with the consent of the customer, we should update our computerised records to indicate that there is a hoarding tendency at the property - this will help anyone visiting the property to prepare ahead of the visit.
- 3.5 Following an initial visit to the property (or based on a report of the Neighbourhood Service Advisers/ Independent Living Advisers) a risk assessment will be undertaken to determine the best approach for dealing with the hoarding issue. See Appendix I which gives Clutter Image Ratings to help determine the severity of the issue.
- 3.6 The risk assessment will result in the development of an action plan with a realistic timescale for resolving the problem. This would normally follow the steps identified above but will depend on the severity of the problem and any threats it poses to the customer(s) concerned or their neighbours.
- 3.7 The action plan will, in all cases. be shared with the subject of the hoarding issue and any advocates that may be involved. The emphasis will always be on provision of support and 'action by consent' in the first instance, collaborating with the person(s) responsible for the hoarding and getting them to work through their own solutions to the problem.
- 3.8 Where the person(s) responsible for the hoarding fails to stick to plan or there is a sudden worsening of the situation, Teign may have to consider escalation to the next stage in the

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process, which may involve providing some form of enabling service including clearing /cleansing services.

- 3.9 Teign may choose to recharge the customer the costs of any clearing / cleansing works and each case will be considered on its merits. Teign may consider waiving reasonable recharge costs if the customer(s) lack mental capacity / is physically incapable of removing hoarded items or has no friends or advocates that could otherwise assist them.
- 3.10 Teign will ensure any clearing / cleansing of items from properties is carried out with due regard to the legal requirements of the Data Protection Act/GDPR and all relevant environmental legislation.
- 3.11 If customer(s) responsible for hoarding behaviour fail to respond to the above measures or Teign are forced to repeat these measures, referrals may be made to external agencies including General Practitioners, Social Services Departments and for enforcement issues -Environmental Health Officers (if this has not already been previously required).
- 3.12 Where this does occur Teign are likely to adopt a case conferencing approach between the multiple agencies concerned and will, where possible and appropriate, involve the subject of the hoarding concern in any discussions and subsequent revisions to the action plan.
- 3.13 Where all of the above measures have failed to bring about a satisfactory resolution to the hoarding issue and only as a last resort will Teign consider instigating legal action to bring the tenancy to an end.
- 3.14 In all hoarding cases that have some form of detrimental impact to adjoining neighbours, Teign will endeavour to keep those most affected informed of actions taken to resolve the issue, whilst maintaining confidentiality of the person(s) responsible.

### 4. Related Documents:

- Tenancy Agreement
- Safeguarding Policy
- **Complaints Policy**
- Anti-social Behaviour Policy
- Fire Safety Policy
- **Data Protection Policy**

### **HOARDING FLOW CHART**

Identifying the person - On visits or referrals

Screening assessment form - 1 month

Fire & rescue referral - 1 months

Clutter rating table - 1 month

Agree action plan - 1 month

Contact supporting agencies - 2 months

Disclaimer - prior to removal of items

Revist - 6 monthly

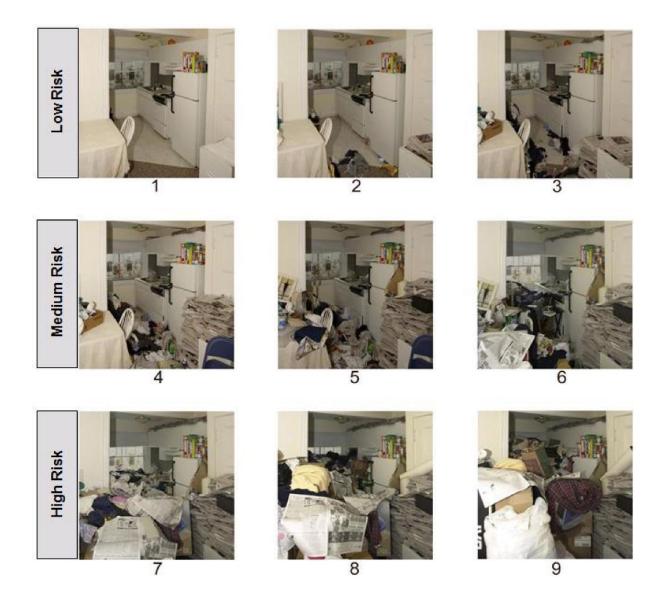
# **APPENDIX 1 – Hoarding screening assessment form**

| Reference<br>number                                   |                             | Name            |               |       |       |                              |
|---|-----------------------------|-----------------|---------------|-------|-------|------------------------------|
| Housing Office  |                             | Date            |               |       |       |                              |
| riousing Office                                       | Pe                          | rsonal inforn   | nation        |       |       |                              |
| Name of tenant  |                             |                 |               |       |       |                              |
| Age   |                             | Gender          |               |       |       |                              |
| Date of birth   |                             |                 |               | I     |       |                              |
| Address being   |                             |                 |               |       | Ho    | use                          |
| referred  |                             |                 |               |       | Fla   | t                            |
|   |                             |                 |               |       |       | ngalow                       |
|   | Please remember to          | •               | · · · · · ·   | if po | ssibl |                              |
| Disability  | ☐ Mobility Wheelchair user  | ☐ Impaii        |               |       |       | ☐ Mental Health              |
| □ None  | Stick user                  | Hearii<br>Sigh  |               |       |       | Dementia<br>Limited capacity |
| ☐ None  | Short distance              | Othe            |               |       |       | Any other diagnosis          |
| Language  |                             |                 |               |       |       |                              |
|   | Screening questio           |                 |               | Yes   | No    | Notes                        |
| Are items limiting property?                          | the free movement an        | d/or entrance   | e/exit to the |       |       |                              |
| Is the functionality of                               | of the bathroom/kitchen I   | imited?         |               |       |       |                              |
| Is the person living                                  | in one room?                |                 |               |       |       |                              |
| Are items spilling or                                 | ver into the garden?        |                 |               |       |       |                              |
|   | ver into the communal a     |                 |               |       |       |                              |
|   | n such a way that they a    |                 |               |       |       |                              |
|   | omplaints from the neigh    |                 |               |       |       |                              |
|   | roperties affected in any   | way?            |               |       |       |                              |
| Are there pest control issues?                        |                             |                 |               |       |       |                              |
| Are there any urger safety check?                     | nt health and safety issue  | es e.g. outstar | nding gas     |       |       |                              |
| Does this person ha                                   | ave a history of hoarding   | ?               |               |       |       |                              |
| Are there any agen                                    | cies already involved?      |                 |               |       |       |                              |
|   | ·                           | Person          | questions     |       |       |                              |
| Are there any room                                    | s that you cannot get int   | o?              |               |       |       |                              |
| Are your utilities/he                                 | ating disconnected?         |                 |               |       |       |                              |
| What are you using for heating?                       |                             |                 |               |       |       |                              |
| Do you have any urgent repairs which need to be done? |                             |                 |               |       |       |                              |
|   |                             |                 |               |       |       |                              |
| Have you suffered                                     | any trauma in the past i.e  | e. loss of fami | ly?           |       |       |                              |
|   | egular visitors to your pro |                 | •             |       |       |                              |
|   | upport in place from fami   | •               | •             |       |       |                              |
|   | t this is considered hoa    | rding and is h  | nazardous to  |       |       |                              |
| -   |                             |                 |               | •     |       |                              |

### **APPENDIX 2 - Clutter Rating table**

# All doors, stairway and windows accessible All utilities functional • No evidence or pests • Clutter obstructs some functions of key living area – looks untidy Safe and maintained sanitation conditions • Blocking of doors, some windows, possibly a major exit • Some utilities not being used e.g. shower now blocked/ disconnected • Light infestation of pests (e.g. bed bugs, lice, fleas, rats etc). • Cluttering obstructing functions of key living space, stairs, entrances and hallways • Evidence of non-maintained sanitation conditions (e.g. food preparation surfaces heavily soiled, lots of dirty dishes, obvious odours which irritate). • Evidence of burns to the carpet, clothing etc. • Whole rooms not accesible, exits blocked, windows not able to be • Utilities cut off (e.g.no heating, gas capped etc). Heavy infestations of pests (rats seen/heard/reported by neighbours, cockroaches, fleas etc). • Key living spaces not available for use, person living in one room • Evidence of urine/excrement in room, rotting food, very unsanitary conditions • Evidence of previous fire or burns in the carpet, clothing etc.

# APPENDIX 3 – Clutter Image Rating: Kitchen Suggested risk is shown at left hand side



Date Approved: August 2022 **Hoarding Procedure** Expiry Date: August 2025 APPENDIX 4 - How to identify a person with hoarding tendencies

It can often be difficult to identify a person with hoarding tendencies until the situation has become

so severe that it begins to affect surrounding properties. However it does not have to get to this

stage if certain criteria are adhered to. If the following questions can be answered with a 'yes', this

is often an indication that someone may need additional support.

Does the tenant live alone?

Often people who have hoarding tendencies live alone. This is not always the case however

statistics show that people are more likely to have hoarding tendencies if they live alone.

Is the tenant over 50?

Statistics show that people with hoarding tendencies are more likely to be over the age of

50; however this is not always the case.

Does the tenant have a lack of repairs raised?

Often people who have hoarding tendencies will not allow access to their homes. In

addition, as items build up, repairs go unnoticed and therefore unreported.

Does the tenant refuse access for home visits?

People with a tendency to hoard can feel embarrassed by the state of their home or can often feel

protective about their items that they are keeping therefore will not allow people to see the property

in case they are then asked to remove it.

Does the tenant have a disability or limited mental capacity?

Often people with a tendency to hoard have some sort of disability or a limited mental capacity

which means that they are either unable to keep on top of cleaning within their property or have a

very different view and feel that the property does not need cleaning as they are still able to

manoeuvre in some way, however difficult and limited this may be.

Have there been reports of any kind of infestation within the area?

Often people with a tendency to hoard will keep items which most people may consider to be

rubbish. Their properties can be unclean and this can draw the attention of vermin such as rats,

fleas and cockroaches. This can impact on the whole neighbourhood.

Have utilities been disconnected?

Quite often electrical and gas supplies will have been disconnected at the property.

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### Are there items spilling over into the garden area?

With severe hoarding, the property will be so over-stocked that the tenant will begin to store items in the garden.

### Are access/egress routes obstructed?

This is more relevant for less severe hoarding. Blocked exits are a good indication that hoarding may become a severe issue. Of course, this also depends on gaining access to the property.

### Are they living in one room?

Living in one room is often a strong indication of hoarding, or maybe a support issue. To aid with this identification the person will seem to be sleeping and cooking within the one room and, quite often also going to the toilet and storing the waste as there will be nowhere suitable to dispose of it.

### Does the property have an infestation of any kind?

Infestations can be rats, fleas, cockroaches or other unpleasant insects.

Use the form in appendix 1 to help identify a person with hoarding tendencies and to begin the process to assist the tenant.

### **APPENDIX 5 – Initial mental capacity screening form**

### **Record of Mental Capacity Screening**

It should be assumed that every person has the capacity to make decisions, unless they have been tested and found to lack capacity for a particular decision. Initial testing should be recorded on this form whenever there is doubt about a person's ability to make a particular decision, and where a decision is likely to have lasting consequences.

If you complete this form and undertake the tests of capacity listed below you are acting as a possible 'decision maker' with regard to the particular decision, on behalf of the named tenant/client.

The tests may need to be carried out over more than one occasion and once your initial assessment has been carried out you may wish to make a referral Adult social care or the Mental Health team to support you in this assessment.

| Tenant Name:  |                   | Property Ref:    |          |                |      |
|---|-------------------|------------------|----------|----------------|------|
| Completed by:   | Job title:        | <br>             | Date:    |                |      |
|   |                   |                  |          |                |      |
| Detail the specific decision to be r                                  | made              |                  |          |                |      |
| A   | of consoit.       |                  | Vac      | N <sub>0</sub> | NI/A |
| Assessment of the terror of the terror                                |                   |                  | Yes      | No             | N/A  |
| Is the tenant in comfortable surro                                    | • •               | 2                |          |                |      |
| reasonable time of day, at home, ca  Can the tenant understand inform |                   |                  |          |                |      |
| decision to be made?  | nation about t    | ne               |          |                |      |
| Can the tenant retain that informa                                    | ation in their r  | mind2            |          |                |      |
| Can the tenant use or weigh the                                       |                   |                  | <u> </u> |                |      |
| decision making process?  | at illiorillation | i as part or the |          |                |      |
| Can the tenant communicate the  | ir decision (e.   | a. bv            |          |                |      |
| talking, sign language etc.)?   | (0.,              | g. ~ )           |          |                |      |
| Does the tenant have an impairm                                       | ent of the mir    | d or brain       |          |                |      |
| (e.g. clinical diagnosis of dementia,                                 |                   |                  |          |                |      |
| Referrals and contacts  |                   |                  | Yes      | No             | Date |
| Referral to Mental Health   |                   |                  |          |                |      |
| Referral to Local Authority   |                   |                  |          |                |      |
| Referral to Devon & Somerset Fire                                     |                   |                  |          |                |      |
| & Rescue Service  |                   |                  |          |                |      |
| Requested Devon & Somerset Fire as a Teign Housing Property           | & Rescue to fl    | ag on the systen | n        |                |      |

# APPENDIX 6 - Fire & Rescue Service Referral form Devon (adapt for your region)

Referral form for partner agencies to refer to DCFRS

| Name of person making contact  |  |       |    |
|--|--|-------|----|
| Contact telephone number   |  |       |    |
| Date of request  |  |       |    |
| Agency Name  |  |       |    |
| Email  |  |       |    |
|  |  |       |    |
|  |  |       |    |
| SECTION 2 — CONTACT DETAILS O  | F INDIVIDUAL BEING REFERRED  |       |    |
| Title  |  |       |    |
| First Name   |  |       |    |
| Family name  |  |       |    |
| Address  |  |       |    |
| Postcode   |  |       |    |
| Telephone / mobile   |  |       |    |
| E-mail   |  |       |    |
| First language   |  |       |    |
| If necessary, please include 3rd   |  |       |    |
| person contact, e.g. carer / family.   |  |       |    |
| Preferred time to contact  | AM PM  |       |    |
| Please asterisk (*) your preferred meth  |  |       |    |
|  |  | Yes   | No |
| Is this a lone person or single paren  |  |       |    |
| Deep envene emelie inside the core   |  |       |    |
| Does anyone smoke inside the prop  |  |       |    |
| Does anyone have a mobility proble   | m?   |       |    |
| Does anyone have a mobility proble Does anyone suffer from a disability  | m?<br>or long term health condition?   |       |    |
| Does anyone have a mobility proble Does anyone suffer from a disability Does anyone light fires inappropriat   | m?<br>or long term health condition?<br>ely with matches and lighters?   |       |    |
| Does anyone have a mobility proble Does anyone suffer from a disability Does anyone light fires inappropriat Has the occupant had a fire within the  | m? or long term health condition? ely with matches and lighters? ne last 12 months?  |       |    |
| Does anyone have a mobility proble Does anyone suffer from a disability Does anyone light fires inappropriat Has the occupant had a fire within the access and exit routes free from   | m? or long term health condition? ely with matches and lighters? ne last 12 months? nobstruction?  |       |    |
| Does anyone have a mobility proble Does anyone suffer from a disability Does anyone light fires inappropriat Has the occupant had a fire within the access and exit routes free from Does the household have working s   | m? or long term health condition? ely with matches and lighters? ne last 12 months? nobstruction? moke alarms? (one on each level)   |       |    |
| Does anyone have a mobility proble Does anyone suffer from a disability Does anyone light fires inappropriat Has the occupant had a fire within the large access and exit routes free from large the household have working so you have any other concerns? E  | m?  or long term health condition? ely with matches and lighters? he last 12 months? hobstruction? moke alarms? (one on each level) hg. scorch or burn marks, cooking practices putting  |       |    |
| Does anyone have a mobility proble Does anyone suffer from a disability Does anyone light fires inappropriat Has the occupant had a fire within the Are access and exit routes free from Does the household have working so Do you have any other concerns? E them at risk, threat of arson etc. Please  | m?  or long term health condition? ely with matches and lighters? ne last 12 months? nobstruction? moke alarms? (one on each level) e.g. scorch or burn marks, cooking practices putting to inform us if there is any risk to NFRS employee's  |       |    |
| Does anyone have a mobility proble Does anyone suffer from a disability Does anyone light fires inappropriat Has the occupant had a fire within the large access and exit routes free from large the household have working so you have any other concerns? E  | m?  or long term health condition? ely with matches and lighters? ne last 12 months? nobstruction? moke alarms? (one on each level) e.g. scorch or burn marks, cooking practices putting to inform us if there is any risk to NFRS employee's  |       |    |
| Does anyone have a mobility proble Does anyone suffer from a disability Does anyone light fires inappropriat Has the occupant had a fire within the Are access and exit routes free from Does the household have working so Do you have any other concerns? E them at risk, threat of arson etc. Please  | m?  or long term health condition? ely with matches and lighters? ne last 12 months? nobstruction? moke alarms? (one on each level) e.g. scorch or burn marks, cooking practices putting to inform us if there is any risk to NFRS employee's  |       |    |
| Does anyone have a mobility proble Does anyone suffer from a disability Does anyone light fires inappropriat Has the occupant had a fire within the second s | m? or long term health condition? ely with matches and lighters? ne last 12 months? obstruction? moke alarms? (one on each level) .g. scorch or burn marks, cooking practices putting e inform us if there is any risk to NFRS employee's tions.   | own [ |    |
| Does anyone have a mobility proble Does anyone suffer from a disability Does anyone light fires inappropriat Has the occupant had a fire within the Are access and exit routes free from Does the household have working so Do you have any other concerns? E them at risk, threat of arson etc. Please e.g. violent behaviour or medical conditions.  SECTION 4 — PROPERTY TYPE   | m?  or long term health condition? ely with matches and lighters? ne last 12 months? nobstruction? moke alarms? (one on each level) ng. scorch or burn marks, cooking practices putting en inform us if there is any risk to NFRS employee's tions.  Terrace Bungalow Flat Caravan Not known                   | own [ |    |
| Does anyone have a mobility proble Does anyone suffer from a disability Does anyone light fires inappropriat Has the occupant had a fire within the last  | m?  or long term health condition? ely with matches and lighters? ne last 12 months? nobstruction? moke alarms? (one on each level) ng. scorch or burn marks, cooking practices putting en inform us if there is any risk to NFRS employee's tions.  Terrace Bungalow Flat Caravan Not known                   |       |    |
| Does anyone have a mobility proble Does anyone suffer from a disability Does anyone light fires inappropriat Has the occupant had a fire within the last the l | m?  or long term health condition? ely with matches and lighters? he last 12 months? hobstruction? moke alarms? (one on each level) h.g. scorch or burn marks, cooking practices putting the inform us if there is any risk to NFRS employee's elitions.  Terrace Bungalow Flat Caravan Not know Rented Rented |       |    |
| Does anyone have a mobility proble Does anyone suffer from a disability Does anyone light fires inappropriat Has the occupant had a fire within the last  | m?  or long term health condition? ely with matches and lighters? he last 12 months? hobstruction? moke alarms? (one on each level) h.g. scorch or burn marks, cooking practices putting the inform us if there is any risk to NFRS employee's elitions.  Terrace Bungalow Flat Caravan Not know Rented Rented |       |    |

Please note we are unable to contact individuals without their consent.

# **APPENDIX 7 – Action plan form**

| Name of tenant(s):          |  |
|-----------------------------|--|
| Address:                    |  |
|                             |  |
|                             |  |
| Name of NSA/ILA:            |  |
| Date of initial assessment: |  |

| Ad   | ctions agreed | Date agreed           | Complete  |
|--|---------------|-----------------------|-----------|
| - Clear access from the front door to the living room -k bags for disposal |               | 01/06/2014            | No<br>Yes |
| Tenant signature   | Mr. Bloggs    | Property Review Dates |           |
| NSA/ILA signature  | Mr. Smith     | 03/06/14              | 17/06/14  |

| Ac                | ctions agreed | Date agreed | Complete    |
|-------------------|---------------|-------------|-------------|
|                   |               |             |             |
|                   |               |             |             |
|                   |               |             |             |
| Tenant signature  |               | Property R  | eview Dates |
| NSA/ILA signature |               |             |             |

| A                 | ctions agreed | Date a | agreed                | Complete |
|-------------------|---------------|--------|-----------------------|----------|
|                   |               |        |                       |          |
|                   |               |        |                       |          |
|                   |               |        |                       |          |
| Tenant signature  |               | Pro    | Property Review Dates |          |
| NSA/ILA signature |               |        |                       |          |

| Actions agreed    |  | Date agreed | Complete     |
|-------------------|--|-------------|--------------|
|                   |  |             |              |
|                   |  |             |              |
| Tenant signature  |  | Property    | Review Dates |
| NSA/ILA signature |  |             |              |

| Actions agreed    |  | Date agreed | Complete    |
|-------------------|--|-------------|-------------|
|                   |  |             |             |
|                   |  |             |             |
|                   |  |             |             |
| Tenant signature  |  | Property R  | eview Dates |
| NSA/ILA signature |  |             |             |

| Actions agreed    | Date agreed | Complete    |  |
|-------------------|-------------|-------------|--|
|                   |             |             |  |
|                   |             |             |  |
|                   |             |             |  |
| Tenant signature  | Property R  | eview Dates |  |
| NSA/ILA signature |             |             |  |

| Actions agreed    | Date agreed | Complete    |  |
|-------------------|-------------|-------------|--|
|                   |             |             |  |
|                   |             |             |  |
|                   |             |             |  |
|                   |             |             |  |
| Tenant signature  | Property R  | eview Dates |  |
| NSA/ILA signature |             |             |  |

| Act               | ions agreed | Date agreed           | Complete |
|-------------------|-------------|-----------------------|----------|
|                   |             |                       |          |
|                   |             |                       |          |
|                   |             |                       |          |
| Tenant signature  |             | Property Review Dates |          |
| NSA/ILA signature |             |                       |          |

# Appendix 8 – Contact List Devon

| Organisation                                      | Appropriate Team/Person   | Contact Detail   | Who we are   |
|---|---|--|--|
| Devon &<br>Somerset Fire<br>and Rescue<br>Service | Community Safety<br>Team  | Monday to Friday, 9:00 –<br>17:00<br>Call Freephone<br>0800 05 02 999<br>Text<br>078 00 00 2476                                  | We provide advice<br>about staying safe in<br>your home and to see<br>if you are eligible for a<br>home safety visit                 |
| Adult Social<br>Care                              | Care Direct   | 0345 155 1007<br>or 0845 155 1007  | Information and help<br>for older people, adults<br>at risk, and their carers  |
| Children &<br>Young<br>families                   | Action For<br>Children  | Newton Abbot<br>01 626 354657<br>Totnes<br>01 803 847626<br>Exeter<br>01392 277205   | We help each child<br>have the best start in<br>life   |
| Environmental<br>Health                           | Environmental<br>Health &<br>Wellbeing  | Teignbridge District<br>Council<br>01 626 361101<br>Exeter City Council<br>01 392 277888<br>Totnes Town Council<br>01 803 864324 | We improve the standards of safety and repair in homes   |
| Pest Control                                      | Environmental<br>Health &<br>Wellbeing  | Teignbridge District<br>Council<br>01 626 361101<br>Exeter City Council<br>01 392 277888<br>Totnes Town Council<br>01 803 864324 | We improve the quality of life and prevent the transmission of diseases by controlling the number of rats, mice and some insect pest |
| Social<br>Services                                |   |  | We oversee Social Care Services for children and young people  |
| Police  | Devon & Cornwall Police   | 999 Emergency<br>101 non-emergency   | We protect people and uphold the law   |
| Mental Health                                     | Newton Abbot Community Mental Health Team Totnes Community Mental Health Team Exeter Community Mental Health Team | Tel: 01392 388201  Tel: 01803 866225  Tel: 01392 208900  | We promote good<br>mental health and<br>wellbeing  |

### **APPENDIX 9 – Disclaimer Letter**

Name:

I (*insert name*) have agreed to the removal of the property identified below and I have been advised that the property will be disposed of by dumping or otherwise.

I understand that Teign Housing accepts no responsibility for lost or damaged personal property of any kind in this process. Teign Housing will facilitate the disposal of the identified property on the basis that you have given express consent and you have satisfied yourself with the list or identification of the property attached.

Signed:

Date:

| Witness:   | Signed: | Date: |  |  |
|--|---------|-------|--|--|
|  |         |       |  |  |
| List of Property:  |         |       |  |  |
| A full list of my un-deposited property is below. This list should be updated for anything brought in or taken away during my stay with the Trust. |         |       |  |  |
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