Housing Services

Vulnerable Residents Policy

If you think a resident is in immediate danger, please call 999.

Otherwise, if you think a resident is experiencing abuse or neglect, please email safeguarding@lewisham.gov.uk, phone Adult Social Care on 020 8314 7777, or phone Children's Social Care on 020 8314 6660.

Contents

1. Purpose

1.1. This policy's overall objective is to ensure that vulnerable residents receive the services and support they need to sustain their tenancy. This policy sets out the actions Lewisham Council's Housing Services will take to accommodate and support residents who are vulnerable.

1.2. As vulnerable residents interact with every part of the Housing service, supporting vulnerable residents requires every part of the service to work together. Every staff member is responsible for familiarising themselves with, and following, this policy.

1.3. For ease of use, this policy groups support for vulnerable residents into four categories, which track the customer journey:

- **Recognising** when residents are vulnerable (including where we are not directly informed, and where we are informed by a third party).
- **Recording** details of a resident's vulnerability, such that they only have to tell us once.
- **Responding** to a resident's vulnerability. This includes formal 'Reasonable Adjustments', as well as following communication preferences, making referrals to outside agencies, and other responsive adaptations to services.
- **Reporting** statistics on how vulnerabilities are changing over time to our governance bodies, to identify how vulnerabilities are changing and where gaps in support exist.

1.4. We know that service failures often impact vulnerable residents more severely. We are also clear that service failures are unacceptable for any household (for example, excessive waits

for repairs). Improving support for our vulnerable residents is therefore inseparable from our broader improvement journey.

1.5. In order to deliver for our residents with support needs and vulnerabilities, we must proactively challenge the dual stigma that persists against social housing residents and people with disabilities. We will endeavour to use person-centred language and will always treat residents with politeness and courtesy.

2. Context and Scope

Context

2.1. The Social Housing sector has experienced significant reforms following the tragic cases of Grenfell Tower and the death of Awaab Ishak. A significant proportion of these reforms have focused on improving Social Landlords' relationship with their tenants, and the support we offer to vulnerable residents.

2.2. Our Housing Services have focused on improving these areas, as well as broader service delivery objectives, as part of our improvement journey following the insourcing of Lewisham Homes.

2.3. This policy review has incorporated observations and recommendations made by the Ombudsman in their Special Investigation report regarding our support for vulnerable residents.

Scope

2.4. This policy applies to Lewisham Council's Landlord function. This encompasses general needs tenants, leaseholders, and tenants of our Independent Living schemes.

2.5. Some vulnerabilities may create entitlements under the Care Act or other safeguarding legislation. For clarity, while this policy will touch on safeguarding where relevant, safeguarding within the council's housing services is covered separately.

3. Recognising Vulnerability

3.1. We can recognise that a resident has a vulnerability when they tell us, we are told by a third party, or we recognise concerns ourselves.

3.2. A resident's vulnerability can be identified at any stage of the resident journey. The below table illustrates the different ways we identify when a resident is vulnerable.

Pre-Tenancy	**Housing Register Application**	Residents submit vulnerability information at application stage, including: • Household composition. • Reasons for wanting to move. • Income, employment and welfare information. • Current housing conditions (including overcrowding, damp and mould), etc. • Support needs. • Disability status and access requirements. • Carer status. • Past convictions. • Veteran status.

	Housing Needs	Homeless assessments include assessments of 'Priority Need'. This is a separate legal term but is often coterminous with vulnerability.
	Social Care	Households on the Housing Register will often have involvement with Adults or Children's Social Care, who will record vulnerability information separately.
During Tenancy	**Sign Up**	RAG risk assessment completed for vulnerabilities at signup. Includes questions on previous housing, financial circumstances, age, disability, health, ASB, Domestic Abuse, substance misuse, furniture poverty.
	Welcome Visit	Occurs 4-6 weeks following the start of the tenancy and are usually carried out in person. Identifies any issues with ASB, arrears, repairs, furniture, etc.
	Proactive outreach	Periodic data collection programmes, e.g. our 'Home Checks' project.
	Self-Identification	Residents volunteering information about their vulnerabilities (e.g. to a Call Centre officer in relation to a repairs case).
	Staff Identification	Staff display 'professional curiosity' and will ask questions and record information where a vulnerability is suspected. (e.g. a Repairs Operative visiting a house and recognising signs of hoarding).
	Third Party Identification	Professionals (e.g. support workers), advocates, friends, family, or neighbours may raise concerns about a vulnerable resident with us.
	Automated Flags	Tenancy Sustainment flags are raised automatically on our computer system if a resident meets 3 or more risk triggers (e.g. a recorded disability, large rent credits, etc).

3.3. As discussed in section 1, every staff member is responsible for implementing this policy and should practice ‘professional curiosity’ where they suspect that a resident may be suffering from a vulnerability.

3.4. Staff who have regular contact with residents will receive specialised training, which will support them to identify signs of vulnerability. These signs of vulnerability may include:

- A resident having a large debit or credit on their rent account, potentially indicating financial difficulties or financial abuse;
- Self-neglect or poor property condition;
- Not reporting repairs, granting access to our operatives, and / or our staff finding it challenging to contact the resident;
- High frequency of contact with our services, potentially indicating mental health challenges or loneliness;
- Reports of anti-social behaviour that may be linked to mental health challenges.

4. Recording Vulnerabilities

4.1. Disclosing a vulnerability can be a challenging and intensely emotional experience. Being required to repeatedly disclose details of a vulnerability can cause significant distress and erode resident trust in our services. Our aims when recording vulnerability are to:

- Record relevant information in enough detail that it can be acted on where necessary in future;

- Record information in the right places, so that future staff are aware of it when interacting with a client, and;
- Comply with data protection guidance and legislation.

4.2. Vulnerability information is recorded on our Housing Management System (HMS) as a 'Visual Alert'. Information about communication preferences is also recorded separately on a resident's HMS profile. Visual Alerts and Communications Preferences should both be treated as core vulnerability information.

4.3. Any staff member who has regular contact with residents will have the ability to record visual alerts and communications preferences on the residents account, rather than being required to pass this information to another team.

4.4. Where a vulnerability or communication preference has been identified, this should be fully recorded on HMS by the staff member who identified the vulnerability. For Visual Alerts, staff should select a pre-filled category and input the details of a resident's vulnerability in the Visual Alert notes.

4.5. Any email concerning a resident should be fully copied onto a resident's case notes, so that any other staff member assisting the resident is fully aware of the resident's circumstances.

4.6. We are continually reviewing our Knowledge and Information Management processes to improve our resident services. This includes work to more closely integrate our Homeless and Housing Register systems with HMS.

5. Responding to Vulnerabilities

5.1. As noted in section 1, supporting vulnerable residents is not solely the responsibility of any one team. All staff members have a role to play in responding to resident vulnerabilities.

Overall Service Delivery

5.2. Many incidents which severely impact vulnerable residents are rooted in service failures which would be unacceptable for any household, whether vulnerable or not (e.g. extended delays to repair work).

5.3. Some service failures can also make residents vulnerable where they were not before (e.g. asthma developed as a result of mould exposure).

5.4. For this reason, delivering for our vulnerable residents is tightly linked to improving our overall service delivery.

Communications Preferences

5.5. Respecting residents' preferences for how we contact them is one of the easiest ways to support them. It may not always be immediately obvious to staff how important the mode of communication we use is for a resident's wellbeing.

5.6. Where we are aware of a resident's communications preferences, these will be strictly adhered to. We will only use a communication type that residents have specified that they would prefer us not to use if the matter is urgent (e.g. arrears placing a tenancy at risk) and attempts to contact the resident using their preferred methods have been unsuccessful.

5.7. Any existing processes which involve contacting residents (individually or in bulk), which do not respect resident's communications preferences, should be reviewed.

5.8. Where we are aware that a resident requires written communication in large text or braille, this will be recorded and adhered to in a similar fashion. These requirements will be handled under our Reasonable Adjustments Policy.

5.9. Where staff believe that a resident requires additional support to understand their situation (e.g. if a resident has certain learning difficulties), staff will work collaboratively with the resident and any support services the resident is involved with to explain their situation, their rights and responsibilities, and the consequences of action or inaction on their part.

Example Communications Needs

- Residents with dyslexia are likely to struggle with written communication.
- Residents with autism or learning disabilities are sometimes upset or distressed by phone calls.
- Residents experiencing Domestic Abuse may use a hidden mobile phone, and being called may place them in direct risk of harm.

Translation and Interpretation Needs

5.10. Where we are aware that a resident prefers to communicate with us in another language, we will arrange translation services. These can be provided both over the phone, in written communication, and face to face.

5.11. Similarly, if a person requires sign language interpretation services for a face-to-face meeting, this can be arranged.

Advocates

5.12. Many vulnerable residents will request that an advocate communicate with our services on their behalf. Advocates may be the resident's professional support workers, friends, family members, or carers.

5.13. The use of advocates can reduce the barriers to accessing support many vulnerable residents experience and should be welcomed. To comply with data protection requirements, residents must provide consent to an advocate communicating with us on their behalf.

5.14. In some cases, advocates have historically experienced these data protection requirements as a barrier to communication. This can occur when staff do not appropriately record these consents on HMS, or when staff are unaware where to find the consent information on HMS.

5.15. Staff will always record third party consents on HMS and check these consents when someone contacts us on behalf of a resident. In line with our GDPR duties, staff will never disclose resident information without confirming that such consent exists.

Service Triage

5.16. In many cases, an issue in a person's home (such as an outstanding repair) may be more likely to impact a resident's wellbeing or security as a result of their vulnerability.

5.17. Within the Repairs Service, this prioritisation is governed by our Repairs Policy and Damp and Mould Policy, and Awaab's Law legislation. Under Awaab's Law, social landlords must:

- Investigate and undertake safety work for emergency hazards within **24 hours;**
- Investigate potential 'significant hazards' within **10 working days**;
- After investigation, produce a written summary of findings within **3 working days;**
- Undertake relevant safety work for 'significant hazards' within **5 working days** of the investigation concluding; and within **12 weeks** for any other hazard.

5.18. When considering a resident's vulnerability during triage, the service will utilise HHSRS and Government guidance on health risks in housing, information we hold about resident's vulnerability and age, and any information we have received from third parties such as registered healthcare providers, social workers, or schools.

5.19. Other services managing casework will take a similar approach of prioritising cases where our records indicate that a vulnerability may exacerbate a resident's situation.

Referrals and Partnership Working

5.20. Where they are involved with a resident, we will work with partner services and organisations to provide a co-ordinated approach through service level agreements and information sharing protocols.

5.21. Our staff will attend and arrange professionals' meetings (for example, MARAC Domestic Abuse meetings) as appropriate.

5.22. Where we believe that a resident may benefit from support provided by an external agency *(for example, a food bank, support charity, or advocacy organisation)*, our staff will signpost the resident to the organisation *(or, in some cases, refer them directly)*.

Income and Financial Challenges

5.23. Unfortunately, low income and financial problems are common among residents in social housing. Debt, welfare sanctions and caps, and cost of living challenges can create and exacerbate resident vulnerabilities. In many cases, a resident's situation would be most helped by improvements in their financial situation.

5.24. Our in-house Welfare and Benefits team will work with residents to maximise their income, including through supporting applications for Council Tax discounts, Social Tariffs on utilities, and providing budgeting advice.

5.25. Our staff are also able to refer residents to services such as StepChange (which supports people facing debt challenges), GambleAware (for residents facing gambling problems), and the Lewisham and Bromley Credit Union.

Staff Culture and Conduct

5.26. Our staff will always treat residents with respect, dignity and empathy. Staff will not suggest that a resident's vulnerability is illegitimate or disclosed with ulterior motives.

5.27. Staff will recognise that vulnerability may affect communication, behaviour, and engagement with our services.

5.28. We recognise that, where they occur, service failures can severely impact resident wellbeing, reduce levels of trust, and impair communication between the service and the resident. Staff are advised to distinguish between frustration expressed at the council / a specific situation, and targeted abuse at individual staff members[1].

5.29. All information entered into HMS, including Visual Alerts and staff safety flags, should always be factual, respectful, and avoid opinion or judgements. Staff must consistently and objectively record case notes when they have interacted with a resident and must not allow personal opinion to influence the regularity or contents of case notes.

5.30. In line with the Competence and Conduct Standard, which requires social landlords to have a Code of Conduct for housing staff, Lewisham Council will establish a Code of Conduct. All staff are expected to adhere to this, and compliance will be considered as part of staff appraisal processes.

Cuckooing

5.31. We work together with anyone who has been a victim of cuckooing and give them the support they need to make sure they stay safe.

[1] *See the Unacceptable Behaviour Policy statement for more details.*

5.32. The support we can offer includes changing locks, arranging welfare checks, seeking injunctions against the people cuckooing the property, and supporting residents who are at risk of harm to move home in an emergency.

Hoarding

5.33. Hoarding can significantly interfere with a household's everyday life (for example, leaving residents unable to wash, cook, or access rooms in their house). It can cause significant distress, create hygiene / pest control problems, and create fire risks for the household and neighbouring properties.

5.34. People experiencing hoarding often worry that if they approach us for support, their tenancy will be at risk. While we may need to take legal action in some circumstances (*usually where someone has refused support, it has been unsuccessful, or the risk is serious or immediate*), this is a last resort, and we will always work with residents where possible.

5.35. Some of the things we can do to help include:

- Carrying out individual fire safety inspections, identifying risks and putting in protective measures, like additional fire detection;
- Engaging with agencies who are already working with residents in alignment with our self-neglect and hoarding multi-agency policy, practice guidance and toolkit;
- Signposting or referring the resident to statutory organisations such as social care, who may be able to offer peer support, cognitive behavioural therapy, emotional support, counselling, a health care or domiciliary care package, and decluttering support;
- Assistance with moving home;
- Property adaptations to meet care needs or health and safety risks (such as fire risks);
- Working with the resident's family members or friends (with their consent);
- In some circumstances, we may arrange a full or partial clearance of a property, with a resident's consent. Residents will be recharged the cost of clearance.

Fire Safety and Evacuation Planning

5.36. Where a resident is identified as having a vulnerability that may impact their ability to safely evacuate a building in the event of a fire, Lewisham Council will undertake a Person-Centred Fire Risk Assessment (PCFRA)[2].

5.37. This process will assess a resident's ability to recognise and respond to a fire alarm, assess their ability to evacuate independently or with assistance, identify and implement reasonable and proportionate measures to mitigate risk, and record outcomes within our Housing Management System and Building Safety systems.

5.38. Referrals for PCFRAs will be made immediately upon identification of relevant vulnerabilities.

5.39. For residents living in Higher-Risk Buildings (HRBs), we are required to use vulnerability information to comply with our statutory duties under the Building Safety Act 2022. Our Building Safety Team will therefore have access to Vulnerability data where relevant to ensure compliance with these duties. This includes duties to:

- Use vulnerability information to inform Building Safety Risk Assessments;
- Support the development and maintenance of the building's Safety Case Report,
- Ensure risks to vulnerable residents are identified, assessed, and controlled;
- Maintain accurate and up-to-date information within the Golden Thread.

[2] In line with the Fire Safety (Residential Evacuation Plans) (England) Regulations 2025

5.40. Where a vulnerability creates or contributes to a potential building safety risk (for example hoarding, mobility impairment, or inability to evacuate), staff must escalate the case to the Building Safety Team in line with internal procedures. Such referrals will be treated as priority and will be tracked to resolution.

5.41. Vulnerability information must be recorded in a consistent and structured format to ensure it can be used effectively by relevant internal services, including Building Safety and Fire Safety teams. This supports compliance with Golden Thread requirements under the Building Safety Act 2022. Vulnerability information contained within a Person-Centred Fire Risk Assessment (PCFRA) will only be shared externally with the London Fire Brigade where the resident has provided explicit consent. This consent is formally recorded within the PCFRA, which the resident signs to confirm their agreement to this information sharing.

6. Responses addressed in other policies

Reasonable Adjustments

6.1. This policy outlines the general approach we take in responding to resident vulnerabilities. We recognise our legal duty under the Equality Act 2010 to remove barriers that may place disabled people at a disadvantage.

6.2. A reasonable adjustment is a change to, or provision of, our usual services or ways of working to reduce barriers that disabled people may face in accessing them. These adjustments relate to how services are delivered or accessed. Some residents identified as vulnerable under this policy may require a Reasonable Adjustment.

6.3. Details of reasonable adjustments, including how they are identified, recorded, and requested are set out in our Reasonable Adjustments Policy.

Domestic Abuse

6.4. Lewisham Council condemns all forms of domestic abuse. We believe everyone has the right to personal safety and to be free from abuse.

6.5. Where staff suspect that an individual is experiencing Domestic Abuse, they should refer the case to our Domestic Abuse Support Officer.

6.6. Our approach to Domestic Abuse is set out in our Domestic Abuse Policy.

Housing Allocations

6.7. Our Housing Allocations policy sets out who is eligible for social housing in Lewisham, and the priority they will receive.

6.8. Some Priority Bands within the Allocations Policy may overlap with vulnerability as defined in this policy (for example, ‘Medical priority’). However, for the avoidance of doubt, a resident being treated as vulnerable under this policy will not in itself have any bearing on that resident’s priority banding.

7. Reporting and Governance

Monitoring Vulnerability

7.1. Information on resident vulnerabilities will be continually gathered as set out above. From time to time, we may conduct exercises focused on improving our records on resident vulnerability (for example, our Home Checks program).

7.2. Data on Visual Alerts, broken down by category, will be reported to Housing's Directorate Management Team on a regular basis.

7.3. Visual Alert time series data, supported by information provided by internal Social Care partners and third parties (where available), will be continually reviewed to identify emerging patterns of vulnerability, training needs, and gaps in support provision.

7.4. When inputting a Visual Alert, staff will set a review date for the information, which will be updated on the next resident contact. This will ensure vulnerability data remains up to date and accurate.

Building Safety Regulator Assurance

7.5. In addition to monitoring trends, the council will monitor the number of residents identified as requiring evacuation support, the number and timeliness of PCFRAs completed, the implementation of risk mitigation measures, and outstanding high-risk cases.

7.6. This information will support assurance to the Building Safety Regulator.

Staff Conduct and Appraisals

7.7. Staff appraisals will take into account the Housing Code of Conduct once implemented. This will reinforce expectations around behaviour and accountability, ensuring that staff engagement with residents aligns with the standards set out in the policy. Any concerns relating to staff conduct will be addressed through established processes, applied consistently and proportionately.

Communication and Complaints

7.8. This policy will be available on our website, and available for staff on our internal shared site. It will be supported by a Vulnerable Residents Action Plan, and a Vulnerable Residents Procedure.

7.9. An Easy Read version of this policy will also be provided.

7.10. Complaints regarding the application or handling of this policy will be managed in line with our Housing Complaints Policy.

8. Related Documents

8.1. Related documents which support and complement this policy include (but are not limited to):

- Domestic Abuse Policy Statement
- Allocations Policy
- Damp and Mould Policy
- Independent Living Policy
- Reasonable Adjustment Policy
- Aids and Adaptations Policy
- Antisocial Behaviour Policy
- Debt Management Policy

9. Legislation and Regulation

9.1. Associated legislation and regulation includes:

- The Fire Safety (Residential Evacuation Plans) (England) Regulations 2025

- Equality Act 2010
- Data Protection Act 2018
- Housing Act 1985
- The Mental Capacity Act 2005
- Care Act 2014
- RSH Tenancy Standard
- RSH Transparency, Influence and Accountability Standard

10. Reviewing this Policy

10.1. Amendments to this policy not reflecting a major change of policy may be made by the Executive Director for Housing in consultation with the Director of Law and Corporate Governance. Such changes will be reported to Members annually.

Replaces: Vulnerable Residents Policy (February 2024) *Updated following the scheduled review to reflect learning from the Housing Ombudsman's Special Investigation Report on Lewisham Council and the Ombudsman's Spotlight Report 'Attitudes, Respect and Rights: Relationship of Equals'*	
Date approved: 01/07/2026	**Effective date:** 14/07/2026
Next review: July 2028	
Approved by: Mayor and Cabinet	
Policy owner: Director of Housing, Resident Engagement and Services	

APPENDIX 1 – GLOSSARY

Advocate – Any person who a resident asks to communicate with us on their behalf. Advocates may be professionals or friends / family of the resident.

Communications Preference – The way a resident prefers us to contact them (e.g. text, email, phone call).

Cuckooing - Cuckooing is when criminals take over someone's home to use it as a base for crime. The victim's home may be used for dealing drugs, storing weapons, sex work, or other illegal activities. By using the victim's home, the criminal hopes they can avoid the police. Victims of cuckooing are usually vulnerable people.

HMS – Housing Management System. The Council's computer system which handles resident information for our social housing tenants and leaseholders.

Hoarding - Where someone acquires an excessive number of items and stores them in a chaotic manner, usually resulting in unmanageable amounts of clutter.

Leaseholders – People who own properties in Council buildings.

PCFRA – Acronym for Person Centred Fire Risk Assessment. A PCFRA will include the risks relating to the relevant resident arising from their compromised ability to evacuate without assistance in the event of a fire, and any other risks to the resident as regards the building (in light of their cognitive or physical impairment).

Reasonable Adjustment – Formal changes made or requested to our usual practices or the delivery of housing services, to reduce the disadvantage that disabled people may face in accessing them.

Visual Alert – Our internal record of a resident's vulnerability on HMS. Contains a headline category and associated notes.

Vulnerability - A condition, disability, or personal characteristic affecting someone. Without support or intervention, this condition may place the person at risk of abuse, neglect, reduced wellbeing, or at risk of losing their tenancy. Vulnerabilities may be temporary or permanent and can change over time.