

Damp, Condensation and Mould Risk Assessment

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| TENANT NAME: | |
| TENANT ADDRESS: | |
| TENANT CONTACT NO: | |
| TRIAGE DATE: | |
| Property type - for information | |
| · Semi-Detached House | |
| · Bungalow | |
| · Flat - Sheltered Scheme | |
| · Flat | |
| Number of bedrooms - for information | |
| · None | |
| · One | |
| · Two | |
| · Three or more | |
| DAMP, CONDENSATION and MOULD - Details | |
| Which rooms have been affected by the DCM? | |
| Bathroom Only | |
| Kitchen Only | |
| Habitable Rooms (Bedroom/Living Room) | |
| Kitchen, Bathroom and habitable rooms | |
| All rooms | |
| Size and location of DCM | |
| Around the tiles and or grouting in kitchen OR bathroom, or other non habitable spaces (cupboards, wardrobes) | |
| Around the window frames and or sills in one room, or other non habitable spaces (cupboards, wardrobes) | |
| Around the tiles and or grouting in kitchen AND bathroom | |
| Around the window frames and or sills in more than 1 room | |
| One wall or ceiling in kitchen / bathroom | |
| One wall or ceiling in living room | |
| More than one wall or ceiling in reception rooms | |
| One wall or ceiling in bedroom | |
| More than one wall or ceiling in bedroom | |
| Multiple rooms - wall ceilings and floor | |
| What is the scale of the DCM? | |
| Describe the issues you have: | |
| | |
| VUNERABILITIES - Details | |
| How many people are living in the property? - for information | |
| · one | |
| · Two | |
| · Three | |
| · Four or more | |
| What are the ages of those living in the property? | |
| Is anyone living in the property under the age of 5 | |
| Is anyone living in the property over the age of 75 | |
| Is anyone living in the property pregnant | |
| Is anyone living in the property between 6 and 16 | |
| Is anyone living in the property between 65 and 74 | |
| Household all aged between 17 and 64 | |
| Does anyone in the property have any medical conditions - please list then score appropriately | |
| · Asthma | |
| · Immune Suppression diseases - cancer, HIV | |
| · An Underlying lung disease | |
| · Chronic respiratory disease – (e.g. COPD, Asbestosis) | |
| Any medical condition such as heart problems, stroke | |
| Minor medical conditions | |
| No medical conditions | |
| Does anyone in the property have any support needs - ask and score appropriately | |
| Living with mental illness conditions, especially autism, Asperger's, dementia, psychosis | |
| Older people who are not able to respond to some of the recommendations | |

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| Those with disabilities such as sight impairments, physical disabilities that could restrict any cleaning required | |
| No support needs | |
| Score mainly reds on vulnerability and the DCM is present in more than one room OR DCM present in large mass in one habitable room - EMERGENCY | |
| Score mainly reds/orange in vulnerability, but DCM in only one room OR score yellows and greens on vulnerability but DCM in multiple rooms - URGENT | |
| Score mainly yellows and greens in vulnerability and DCM in only one room OR score red in vulnerability but DCM limited to non-habitable space ie under cupboards or limited bathroom / kitchen windows - ROUTINE | |
| Score low on vulnerability DCM only present on tiles, grouting and window frames- MONITOR | |
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| Tenants assessed as scoring: | |
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| Outcome | |
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| Contractor passed information and timescales to inspect on: DATE | |
| | |
| Tenant informed of what happens next on: DATE | |
| | |
| Tenant informed by: | Phone |
| | Letter |
| | in person |