

Coroner ME Hassell Senior Coroner Inner North London St Pancras Coroner's Court By email to: Homes and Neighbourhoods Islington Council Municipal Offices 222 Upper Street London N1 1XR

Our Ref: Your Ref:

1 August 2025

Dear Coroner Hassell

Re: London Borough of Islington response to the Regulation 28 Prevention of future death report (3 June 2025) into the death of Pellumb Olaj

Firstly, we would like to reiterate our deepest condolences, and those of the Council, to the family of Mr Olaj.

In order to provide a clear and substantive response to the PFD report, we consider that it will assist the Chief Coroner to set out some background, including a synopsis of some procedural matters at the hearing, as well as to explain evidence that could have been given, if so permitted, during the hearing.

Inquest hearing

Prior to the Inquest Islington Council asked if the Coroner was seeking a written statement from any Council officer, but was advised by the Coroner's Office that it was not required. The Coroner did not, therefore, have the benefit of detailed evidence in relation to local authority housing provision and/or housing management. Only oral evidence was therefore available at the hearing. However, the oral evidence permitted during the hearing was significantly and unexpectedly limited.

Representatives from Islington Council at the inquest hearing comprised three Islington Council officers (the Assistant Director for Housing Needs, the Assistant Director for Housing Management, and an Income Recovery Officer), and Counsel for Islington. All three Islington Council officers were listed in the witness list provided by the Coroner's Officer the day before the hearing. During the hearing, oral evidence was provided by two of the three Council Officers in attendance. However, the Coroner unanticipatedly decided not to call the third council officer, the Assistant Director for Housing Management, thereby significantly limiting the evidence provided. The Assistant Director for Housing Management, had she given oral evidence, would have been able to speak to the management changes (as further described below).

Islington Council only became an Interested Person at the start of the inquest hearing. It became evident at the outset of the hearing that there was an apparent assumption from the Coroner that Islington Council was an Interested Person. This assumption was corrected by Counsel for Islington, who was asked to immediately confirm whether Islington Council wished to become an Interested Person. Prior to that interaction, there was no previous indication that it would have been in any way appropriate for Islington Council to become an Interested Person.

Chronology

We have attached to this letter an appendix of documents. At pages 1 and 2 of the appendix appears a chronology of events which summarises pertinent details from prior to the offer of accommodation being made, until beyond Mr Olaj's death. At no point either around the time of the offer of accommodation being made, nor subsequently, were any concerns raised to Islington by anyone, including Mr Olaj's treating primary care physician, psychiatrist and specialist occupational therapist, about the location of his home on the 6th floor. Importantly, a review of its suitability could have been requested at any time in the years thereafter. As said by at the hearing, when she reviewed Mr Olaj in June 2022, he indicated that he was happy with his flat, and seeing his children.

Action taken since Mr Olaj's death

There are a number of procedural changes that Islington has implemented/is implementing. Some of these were already in progress prior to the death of Mr Olaj. Despite the impetus of these actions not being related to the death of Mr Olaj, the aims of the actions are such that they can be identified as addressing concerns arising out of his death. For other actions identified, the impetus behind the change was Mr Olaj's death.

Actions that were already in progress – for existing tenants

A re-organisation of the Housing Management Service.

The service redesign includes:

- i. A single point of contact for residents to raise concerns with a named and directly contactable housing officer. The aim is to ensure that the tenancy team is more accessible to residents.
- ii. Smaller patch sizes. Officers are to be allocated patch sizes of up to 600 properties per senior housing officer (reduced from up to 1,400). The aim is that this will enable more proactive and less reactive contact to residents with live issues. Additionally, it will allow for officers to be able to provide a more dedicated period to each of the tenants, building positive professional relations.
- iii. A strategy within the new structure for the named officer to complete effective tenancy audits, with all tenants and leaseholders (approximately 36,000 residents) being visited within three years. This will allow for vulnerable tenants to be identified, enabling appropriate support and referrals to be made. Prioritisation of audits is based on a number of data points

including known vulnerabilities. On the audit form itself, it is stated: "By completing this form, we can better understand the needs and concerns of our residents and take appropriate action to address any issues that may arise." A copy of the audit form appears at pages 3 – 20 of the appendix to this response.

The restructure report was completed on 7 August 2024 and updated on 23 September 2024. Tenancy audits commenced on 9 June 2025. Implementation of the new structure commences 4 August 2025.

It is anticipated that all of the above changes will work to improve the service for all residents. Existing tenants experiencing mental health and other challenges will be more easily identified and therefore supported appropriately.

Actions that were already in progress – for new tenants

A re-organisation of the Housing Needs Service.

It had been identified that the internal process from an applicant applying as homeless, through to being offered a secure tenancy, was fractured, due to the different teams involved. It was considered that this process could be made more streamlined, allowing for all the officers involved in the process to sit within one larger team. Accordingly, a number of functions delivered by officers within Housing Management (Targeted Duty Manager, Targeted Duty Team, Principal Tenancy Officer, and Targeted Duty Team Tenancy Officer), were shifted across to Housing Needs. Therefore, in practice, all the steps from applying as homeless through to the sign up of a new tenancy now fall within a single service. This allows for information regarding applicants, including any potential mental health or other needs, to be more easily shared throughout the process.

It is anticipated that the above organisational changes will work to improve the service for all new tenants. As the officers will now all be working within one service, it is expected that the needs of all new tenants, including those with mental health and other challenges, will be known to all officers engaged during the process, such that they can be taken into account throughout, including when an offer of accommodation is made. The re-organisation will also result in all the officers dealing with the case, from the initial date of application, through to the sign up of the new tenancy, having access to the same database.

The report establishing these organisational changes is dated 6 August 2024. Implementation of the new structure commenced on 1 April 2025 and concluded on 2 June 2025.

Actions that have been initiated since Mr Olaj's death - for existing tenants

Changes to IT systems.

Currently, the Housing Needs Service and the Housing Management Service use a single database with access to two modules that are inaccessible to one another. Prior to the inquest, it was identified that allowing access to the two modules for both services would ensure that information obtained by the Housing Needs Service during the homelessness application process

is more easily accessible to the Tenancy Management service. This change will allow for officers within the Housing Management service to access records developed during the application process. Once the change is implemented, officers within the Housing Management Service will be able to check the computer system to locate information about a tenant's medical history, such that there is a continued awareness of issues that were of previous and possibly ongoing concern.

This issue was first discussed with Islington Council's Digital Services team prior to the inquest. A meeting was subsequently arranged, which took place on 15 July 2025. The Digital Services team are now looking into how this request can be developed into reality. Whilst the implementation of this proposed change has yet to materialise, the issue had been identified and raised with Digital Services following the death of Mr Olai and prior to the inquest hearing.

Actions that have been initiated since Mr Olaj's death - for new tenants

i. New procedure for specialist psychiatric advice.

A new procedure has been identified and now implemented, regarding the requirement for specialist psychiatric evidence to be obtained where it becomes apparent during the homelessness application process that an applicant has a mental health condition and/or has previously attempted to end their life. This new procedure was identified and proposed wording discussed with the Legal Team on 7 May 2025. The procedure was subsequently finalised and implemented on 10 July 2025. Whilst implementation of the procedure postdates the inquest hearing, the identification of the procedure and an intention to implement such would have been explained at the hearing, should the opportunity have arisen. A copy of the finalised procedure appears at pages 21 – 22 of the appendix to this response.

ii. Amended internal form.

Amendments to an internal form have now been implemented. The form is used to gather information about a homeless applicant's needs and determine the type of housing to be offered to the individual to enable the Council to discharge its housing duty under the Housing Act.

The amendments made to the form are to explicitly highlight any medical needs encompassing either the physical and/or mental health needs of any person/s in the household that is to be rehoused. This information along with other information within the form is considered holistically by the housing officer before an offer of social housing is made to the individual.

Whilst the introduction of the amended form postdates the inquest hearing, identification of the changes planned were first discussed on 7 May 2025. This would have been explained at the hearing, should the opportunity have arisen. A copy of the amended form appears at pages 23 – 29 of the appendix to this response.

Conclusion

We trust that the information in this response provides some reassurance to the Chief Coroner that Islington Council does indeed take its responsibilities as a social landlord seriously and that

any mental health and other needs of new and existing tenants is considered when allocating accommodation and thereafter.

It does also seem prudent to highlight that the availability of Council accommodation is extremely limited, especially accommodation on the ground and first floor. Some applicants and tenants with physical disabilities may not be able to physically access accommodation that is above the ground floor and their needs must also be considered when suitable accommodation does become available.

The information and evidence set out in this response was available at the inquest hearing and would have been heard by way of oral evidence, had the opportunity been provided. It is somewhat unfortunate that there was no opportunity at the inquest hearing for any of this information to be shared. It is possible that, had it been provided, the matters of concern raised by the Coroner in the PFD report would have been addressed.

Yours sincerely

Assistant Director Housing Needs

Assistant Director Housing Management

APPENDIX TO ISLINGTON COUNCIL'S RESPONSE TO THE PREVENTION OF FUTURE DEATHS REPORT

CHRONOLOGY

Date	Narrative
2013	Mr Olai was initially a Joint tenant of Islington Council landlord.
7 July 2020	Following a relationship breakdown that included reports of domestic abuse, Mr Olaj made a homeless approach (supported by mental health services) to Islington Housing Aid Centre. A homelessness application form was accepted and assigned for enquiries.
9 July 2020	at the North Islington Rehab and Recovery Team (Specialist Occupational Therapist) was asked to complete a medical assessment form for Mr Olaj. A GP summary was also requested from his GP to ensure robust enquiries were made into his circumstances.
9 July 2020	The completed medical assessment was provided alongside a letter from Mr Olaj's psychiatrist detailing his psychiatric history. In response to the question "what type of accommodation do you feel you need" stated that Mr Olaj "has access to his children, he has parental responsibility and will need a 2 bedroom flat, so his children can visit and stay over". There was no mention of a requirement for a ground floor flat.
10 July 2020	The Medical Assessment Form and the clinic letter were referred to the Council's medical advisers at NowMedical who advised on housing needs.
10 July 2020	The Homelessness Application Form was completed by the housing officer assigned to Mr Olaj. The diagnosis of paranoid schizophrenia was recorded, together with details of his treatment (monthly injections). Details were also recorded about his mobility issues arising from a stroke suffered in 2014. The form also set out a Daily Living Assessment which recorded that Mr Olaj could communicate well.
13 July 2020	The Council's medical adviser recommended that Mr Olaj be housed on medical grounds. The medical advisor further advised that Mr Olaj's housing needs were for a "first floor maximum if un-lifted or any floor with a lift".
13 July 2020	A Personalised Housing Plan was co-produced with Mr Olaj. The plan recorded his medical issues, and advised that he needed self-contained accommodation, either a studio or one-bedroom flat that was affordable (Local Housing Allowance).
22 July 2020	3 weeks after Mr Olaj approached LBI, his case was agreed (as statutorily homeless) and he was nominated to view
27 July 2020	4 weeks after his initial homeless application. Mr Olai signed his tenancy agreement for the property at which was located on the 6th floor in a lifted building. No concerns were raised at this point or subsequently by Mr Olaj, or his treating primary care physician, psychiatrist or specialist occupational therapist, about the location of the accommodation on the 6th floor.

Date	Narrative
27 July 2020	A letter was sent to Mr Olaj confirming a telephone appointment for 27 August, the purpose of the call was stated to include addressing any concerns.
July 2020 – 29 October 2024	A number of interactions were made during this time between Mr Olaj and Islington, all regarding low level rent arrears. There is no record of any indication of any concerns being raised about the suitability of the accommodation during this period.
30 October 2024	Mr Olaj contacted the Income Recovery team (within Housing Management) in a state of confusion to complain about his GP. This was over 4 years after he moved to his property at Turnpike House. He was in arrears of less than £50.00 and no action was being taken against him due to his arrears. The officer who spoke to him provided oral evidence at the inquest hearing about the call.
30 October 2024	Following the call, the officer spoke to a manager and informed him of the call and that she had called the emergency services. That manager has now left LBI, but the case notes state that the manager contacted the tenancy and intensive teams, who confirmed that Mr Olaj was not known to them. The manager emailed a support worker to ask if they could engage with Mr Olaj, he also emailed two estate co-ordinators requesting the caretaker attend the property and he called Mr Olaj's next of kin.
30 October 2024	The officer who had taken the call from Mr Olaj received a call from the police whilst the police were at the property. The police confirmed that they would attend the officer's home; she was not informed of Mr Olaj's death until the police attended her home later that day.
30 October 2024	The death was also reported by the police to the Council's Community Safety Team on 30 October. The information was conveyed to the Director of Public Health on the same day.
1 November 2024	A letter was sent to residents of Turnpike House signposting them to support available which included a specialist local bereavement support service.
24 February 2025	An email was sent to the Coroner's PA from the Public Health team regarding this and 3 subsequent suicides. The email included the following: "We are alerting you to this situation in case it is of any value in your investigation of the deaths, and also to ask you to inform us if your investigation identifies any link [] Public Health are coordinating the borough's response to try and prevent further deaths by a similar means, and understanding any possible link between these cases would inform that work."
5 March 2025	A response was received from the Coroner requesting further details, which were provided on the same date. The Public Heath team have confirmed that they received no further communication from the Coroner's office.



Tenancy and Property Audit form

can better understand the needs and concerns of our residents and take appropriate action to address any issues that may arise This form is designed to help us monitor and maintain the safety, well-being, and property condition of our residents. By completing this form, we

areas where improvements are needed, or support is required condition of the property, the well-being of the residents, their health and safety needs, and any other relevant information that may help us identify We understand that residents have unique needs and circumstances, which is why this form covers a range of topics, including the physica

achieving this. We appreciate your participation in this process and thank you for your time. Our goal is to ensure that our residents are living in a safe and healthy environment, and we believe that regular check-ins are an important part of

protection/privacy-notice under Privacy Notices which can be found at https://www.islington.gov.uk/about-the-council/information-governance/data- monitoring and managing their tenancy. Their data will be processed in accordance with our Privacy Notice **Data processing**: Confirm with the tenant that the information collected will be used for the purposes of



Pre-Visit Checks to Consider

- Check housing system (NEC Housing) for any additional support needs, vulnerabilities, or safety considerations before the visit, input NEC information onto SharePoint form, for when you attend the property's onsite.
- Do you have a lone working device?
- Do you have shoe covering for entering the home?
- Current account balance, are there rent arrears on the account?

- Is there a signed Tenancy Agreement on NEC Enterprise?
- Is there a photo of the tenant(s) or copies of photo ID on NEC Enterprise
- Does the tenant require additional time to answer the door or have any support needs to be taken into consideration to make this a productive visit?

Pre-Visit System Checks	hecks		
Is there a signed tenancy agreement on the system?	☐ Yes	Is there a photo of the tenant(s) or copies of photo ID on the system?	□ Yes
Property			
Property Reference		Tenant's Address	
Number of Beds Recorded on		Rent Balance Arrears?	
NEC Housing		Rent Balance Arrears:	
Tenancy / Person / Intensive Notes, Flags (Interpreter, PVP, Vulnerabilities etc) Anything relevant to support you with the visit			

During visit

Date & Time of First Visit		Staff Completing this Form	
Date & Time of Second Visit			
Date & Time of Third Visit			
Was the door answered?	red? Yes		
	□ No		
Access Gained?	☐ Yes		
	No		
If access not gained, provide	☐ Abandonment	Legal or Procedural Issues	Jes
TeasyOT	☐ Belief that access is not required	ired Main/Joint tenant not home	me
	☐ Childcare or eldercare responsibilities	nsibilities Mental health issues	

If number of beds different to what we have recorded on NEC Housing, specify	If abandonment expected, explain why	Abandonment Suspected?	Lack of cl	☐ Housing Fraud	☐ Fear or anxiety	Embarrassment	☐ Distrust o	☐ Dispute w	Concerns
		Yes	Lack of clarity about the purpose	Fraud	nxiety	sment	Distrust of authorities or contractors	Dispute with the landlord or housing provider	Concerns about damage or disruption
				☐ Unfamiliar personnel	☐ Short notice	☐ Refused to Engage	☐ Practical or Logistical Reasons	☐ Pets	☐ No formal notice given

Name of Main or Joint Tenant Answering Door

First Name	
Last Name	

More detailed household information will be asked later in this form

Customer Verification

	Main Tenant	Joint Tenant	ant
Date moved to this address			
Is this the only place you live?	☐ Yes ☐ No	☐ Yes	□ No
If "No" provide more detail			
		_	

Communication

	Tenant		Joint Tenant	
Telephone				
Email				
Preferred contact method	☐ Telephone ☐ Email ☐ Letter ☐ Text☐ Home visit	☐ Text	☐ Telephone ☐ Email ☐ Letter ☐ Home visit	Text
Main language				
Preferred language				
Communication Needs	☐ Braille	Cd Sound Cd	☐ Braille	Sound Cd
	Easy Read	Паре	Easy Read	Паре
	☐ Interpreter	☐ Text Cd	☐ Interpreter	☐ Text Cd
	☐ Large Print	☐ Text Phone	☐ Large Print	Text Phone
	Require Face to Face Meeting		Require Face to Face Meeting	

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Diversity and inclusion

The personal information requested at this stage is optional. Tenants are not required to provide this information, but doing so will assist in making our services accessible and in planning to meet the needs of everyone.

	Tenant	Joint Tenant
Economic status		
Explain this question helps us see if there is any support that we can provide to maximise their income and welfare benefit entitlement		
Sexual orientation		
Ethnic group		
Nationality		
Religion		

Title Fi	First name	Middle name/s	Surname	Date of birth	Gender	Relationship to tenant	Physical or Assistive Mental Devices Vulnerability See apper See appendix A
						Main tenant	

Household details

	Title
	First n
	ame
	Middle
	Title First name Middle name/s Surname
	Surna
	me
	Date of birth
	Gender
	Relationship to tenant
	nship to
	Physical or Mental Vulnerability See appendi
	Physical or Mental Vulnerability See appendix A
	Assistive Devices See appendix B
	ndix B
 L	

person from household. Important: Are the details of the tenant correct on NEC Housing? If not, please follow normal procedure to add person to household or remove

Application to join household: https://www.islington.gov.uk/housing/council-tenant-services/your-tenancy/application-to-join-a-household



You may have recently been contacted by the Council about damp, condensation and mould but we would like to ask you some questions about your home and inspect the condition of the property.	eted by the Council aboun of the property.	it damp, condensat	tion and mould b	ut we v	vould like to	ask yo	₁u some questior	าร about
Has an inspection of the condition of the property been completed?	☐ Yes ☐ No							
If yes, when was the inspection? (MM/YYYY)								
Are there working smoke alarms on each floor of the	☐ Yes ☐ No							
<pre>property? If 'No', please provide more detail:</pre>								
Is there any damp and mould visible within the property	☐ Yes ☐ No							
If 'Yes', please provide more detail.								
Note to staff: Please take images of the issue where possible and upload to electronic form for referral to repairs.								
Which rooms have damp and mould?	Living Room	☐ Halls	Stairs		Landing		Kitchen	
	Bathroom	Bedroom	☐ Dining Room					
	_		-	-				

		Note to staff: Please take images of the issue where possible and upload to electronic form for referral to repairs.
	☐ Yes ☐ No	Are there any other issues or concerns about the conditions of the property? If 'Yes', describe below
https://tinyurl.com/asc-request-for-service	☐ Yes ☐ No If yes, please advise tenancy to self-refer using the link or QR code → If they require support using the form, please refer on their behalf.	Does anyone in the household require referral for aids and adaptations?

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Anti-Social Behaviour

	Would the resident like to report anti-social behaviour
If 'Yes', please advise tenant to report online via https://www.islington.gov.uk/community-safety/anti-social-behaviour or scan the QR code →	☐ Yes ☐ No
SILINGTON D	

Rent and financial support

This is to support the tenant with their arrears.

Does the tenant receive Universal Credit?	☐ Yes ☐ No
Is the tenant experiencing any other financial challenges? If 'Yes' provide more information.	☐ Yes ☐ No
Note to staff: This will be referred to income on the electronic form.	

Health and Wellbeing

Is the anyone in the household eligible for support or requires access to support? If 'Yes' please provide more detail below and add to action plan within this document.	☐ Yes ☐ No
Is the tenant registered with a GP? If 'Yes', please include their details:	☐ Yes ☐ No
Is the tenant a carer of someone who lives in the property?	☐ Yes ☐ No
If they are, have they had a carers' assessment.	☐ Yes ☐ No
Does tenant receive support from any other agency/service? If 'Yes', please complete the section below	☐ Yes ☐ No

		Name of agency
		Contact details
		Reason for support
	16	How often

16

Issue to resolve Planned actions Target date

Action Plan - Officer

Visit outcomes staff use only

Are the details collected on this form correct on NEC	☐ Yes
	□ No
Tenancy fraud suspected?	☐ Yes
	□ No
If "Yes", provide details of findings/actions	
Date & Time Visit Completed	

Appendix A: Vulnerability Categories

Vulnerability Group	Vulnerability
Has vulnerability but prefers not to say	Has vulnerability but prefers not to say
Physical Disabilities	Chronic Conditions
	Genetic Conditions
	Mobility Issue
	Other Physical Disability
Intellectual and Learning Disabilities	Dementia
	Genetic Cognitive Condition
	Learning Difficulty
	Neurodevelopmental Disorder
Psychiatric or Mental Health Conditions	Anxiety Disorder
	Hoarding Disorder
	Mood Disorder
	Personality Disorder
	Psychotic Disorder
	Substance Abuse
	Trauma and Stressor-related Disorder
Sensory Impairments	Hearing Condition
	Sensory Processing Disorder
	Visual Impairment

Adaptive Technology

- Computer Access Aids
- Digital Accessibility Tools
- Environmental Control Systems
- Smart Home DevicesSafety Monitoring Devices
- Voice Assistants

Cognitive Aids

- Digital Cognitive Support Tools
- Medication Management Aids
- Memory Aids
- Orientation Aids
- Safety and Alerting Aids
- Task Sequencing Aids

Communication Aids

- High-Tech AAC
- Low-Tech AAC

| Medical Devices

Oxygen Therapy Equipment

Cochlear Implants

Hearing Devices

Hearing AidHearing LoopsPersonal Amplifiers

Powered Medical Devices

Mobility Aids

- Cane
- Crutches
- Electric Scooter
- Orthotic Device
- Prosthetic Device
- Walker
- Wheelchair

Personal Care Aids

- Bathing/Showering Aids
- Dressing Aids
- Feeding Aids
- Skin Care/Pressure Relief
- Toileting Aids

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Visual Aids

- Braille Device
- Guide Dog
- Magnifiers
- White Cane



Procedure: Considerations prior to an offer of housing for applicants with a mental health condition

Date: 10 July 2025

Officers impacted by this procedure change:

- 1. Prevention and Relief team
- 2. Tenancy Support and Move on team

Background

- 1. This procedural note has been drafted following the tragic death of a social housing tenant who died by suicide in October 2024.
- 2. The tenant became known to the Housing Needs service following a homeless approach in July 2020. He was housed following his homeless approach into a social housing property by late July 2020. Prior to the offer of housing, the Council had received information about his health needs which primarily related to his mental health.
- 3. One of the reports received mentioned previous suicidal attempts. Medical advice was sought as to his housing needs as well as advice from a mental health specialist OT who supported him by completing the requisite forms.
- 4. The advice sought was from a general practitioner and not a psychiatrist. This meant that the offer of social housing did not account for his previous history of attempts to end his life.
- 5. The tenant was offered accommodation on the 6th floor of a council estate and remained living there until his passing in October 2024.
- 6. A coroner's inquest was held on 3 June 2025 and determined that his death might have been prevented if the council had taken greater account of the risks of harm given his poor mental health history. In light of the coroner's findings, this procedural note for all officers noted at the top of this page must be adhered to for all onward offers of housing for new tenants.

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Actions to be taken by housing officers

In the event that you receive an application (Part 7 application under the Housing Act 1996) and the applicant or third party has highlighted, or it otherwise becomes known during the application process, that they:

- 1. have a mental health condition and/or
- 2. made previous attempts to end their life

there are two potential courses of action to take.

The table below lists the two potential courses of action to take:

- i) Where an applicant has a named worker/advocate for their mental health needs
- ii) Where an applicant does not have a named worker/advocate for their mental health needs

i) Where an applicant has a named ii) Where an applicant does not have a named worker/advocate for mental health needs worker for mental health needs 1. You must seek medical advice from the 1. You must ask the named worker to complete a risk assessment before making an offer of Council's medical adviser. housing. 2. The advice sought from the Council's medical 2. If the risk assessment completed identifies adviser or other medical professional must be any concerns regarding suicide risk, the from one with psychiatric expertise. The advice advice sought from the Council's medical sought should pose an explicit question about adviser or other medical professional **must** the applicants onward housing need and the **be** from one with psychiatric expertise. The type of property required. advice sought should pose an explicit question about the applicants onward 3. Following receipt of the medical advice, a housing need and the type of property Suitability Assessment form that considers the required. medical advice must be completed before the offer of housing is made to the homeless 3. Following receipt of the medical advice, a applicant. Suitability Assessment form that considers the medical advice must be completed before the offer of housing is made to the homeless applicant.

Author: / AD Housing Needs

Date: 10 July 2025 (v.1) Review date: 9 July 2027



Accommodation

Suitability assessment checklist

The following issues must be considered prior to allocating a property to a homeless household.

1. Employment	A: Details/discussions with client	B: Officer notes
Is the applicant or any family member working?		
Who is your employer? (please provide full address of place of work)		
What is your weekly/ monthly income?		
Are you able to work from home, if so for now many days?		
What is the nature of their employment?		
What are the worker(s) current hours/shift patterns?		
Current travel time and cost?		
How far is the proposed accommodation from the place of work?		

Future travel time and cost (based on proposed new address)?		
2. Childcare	A: Details/discussions with client	B: Officer notes
Who provides current childcare and how far is it from current and proposed address?		
Availability of childcare in new area?		
Cost of current/future childcare?		

3. Caring responsibilities/or care received	A: Details/discussions with client	B: Officer notes
Does the client or any other family member have caring responsibilities or receive care?		
If yes, is this a formal or informal arrangement?		
Who do they care for/or Who cares for them and are they in receipt of carer's allowance?		
Is there anyone else who can care for this person or provide care to them (Investigate alternatives)?		
What specific duties does the carer perform and at what times of day?		

Distance of person cared for or providing care, from proposed new accommodation?	

4. Education	A: Details/discussions with client	B: Officer notes
Does the client or any member of the family attend formal education? School/College or University?		
What is the location of the school/college?		
What school years are the children in (key educational stages)?		
Do any of the children attend additional schooling – cultural, language or religious schools?		
How would the children travel to their current school from the new address?		
What is the availability of spaces in the new area (check with local education department)?		
Are you able to study from home or do you have to attend your place of study?		

5. Medical, professional support and safeguarding issues	A: Details/discussions with client	B: Officer notes
Does anybody in the household have any medical needs for which they are receiving specialist treatment?		
Is there anyone in the household who has been diagnosed with a physical or mental health condition? (yes or no)		
If someone in the household has been diagnosed with a physical or mental health condition, please state the name of condition.		
Where do they receive treatment/support?		
Distance of medical services from old and new property?		
Possibility for transfer to hospital in new area?		
Are there any child protection concerns? Please give details		
Are there any medical factors that need to be considered when allocating a settled		

home?	
Does any reasonable adjustments or additional support need to be provided to enable the household to settle in their new home?	

6. Family, social and community support issues	A: Details/discussions with client	B: Officer notes
Does the client and their family currently receive support from other family members in Islington or in other areas? Please give details		
Does the client and their family currently have social/ community links in Islington or in other areas? Please give details		
Do the clients or any members of their family currently attend a place of worship (please provide details)?		
Is the client or any members of their household at risk in any specific area?		

Income	Average monthly amount	Expenditure Mortgage payments including	Average monthly
Household wages		Mortgage payments including	
		protection	
		policy	
Maintenance/child support		Rent	
Company pension		Building and content insurance	
Student loan/grant		Council Tax	
Other income- please specify		Gas	
		Electricity	
		Water rates	
Benefits		TV license	
Income Support		Phone (Mobile, Landline, Internet)	
Jobseeker's Allowance		Travel	
Working Tax Credit		Groceries and other household costs	
Incapacity Benefit		Clothing and shoes	
Disability Living allowance/ personal		Prescriptions, dentist and opticians	
independence payment		costs	
DWP deductions/budgeting		After school clubs and children's	
loans/short term advance		activities	
Child Tax Credit		Childcare costs/ adult care costs	
Child Benefit		Pet costs	
Pension Credit		Debts and arrears	
Bereavement benefit		Rent/mortgage arrears	
Carers' allowance		Unpaid council tax	
Housing Benefit/Local Housing		Fuel debts	
allowance			
Council Tax support		Credit cards and loans	
Student loan/grant		Magistrates fines	
Other state benefits-please specify:		Child maintenance	
		Credit cards and loans	
Total monthly income		Total monthly expenditure	

Income and expenditure self-assessment form

Changes to welfare benefits and the introduction of the household cap have meant that housing costs may no longer be covered by housing benefit. In order for us to help you find a housing solution that is affordable for you it would help to have an estimate of your monthly household

I agree that the information contained in this checklist is correct and a true reflection of my current circumstances.

I understand that this information will be used by the council to source suitable accommodation for me and my household.

Name and signature of applicant:	Name and signature of Council Officer:
Name in Print:	Name on Print:

Signed:	Signed:
Date:	Date: