|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| When | Task | Action NeededTo be agreed at initial meeting | By WhomTST/ Referrer/ RPSH/ Client | Due date | Date Completed |
| **At sign up** | **Referral Agency or TST arrangements at Tenancy sign up** | Date of final referral agency or TST handover arranged *(NB this should be 2 months from Tenancy Start Date)* |  |  |  |
| Referral Agency/TST joint working arrangements agreed |  |  |  |
| Support Needs Indicator and Risk Assessment provided to TST Worker  |  |  |  |
|  |  | Confirmation that Gas & Electric safety certificates up-to-date |  |  |  |
| **At sign up/post sign up** | **Establish new HB claim** | HB/UC form completed |  |  |  |
| Partial HB calculation made (if appropriate) and given to tenant |  |  |  |
| HB/UC form handed in and receipt given |  |  |  |
| Information provided to HB/UC:* Proof of income
* Proof of ID
* Copy of tenancy
 |  |  |  |
|  |  |  |
|  |  |  |
| Other - please specify |  |  |  |
| **Post sign up** | **Establish new benefits claim** | Address of new benefits office identified  |  |  |  |
| Change of address given to new benefits office |  |  |  |
| Relevant forms completed |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **When** | Task | Action NeededTo be agreed at initial meeting | By WhomTST/ Referrer/ RPSH/ Client | Due date | Date Completed |
| **Post sign up** | Link in with services | GP |  |  |  |
| Service: |  |  |  |
| Service: |  |  |  |
| Service: |  |  |  |
| Service: |  |  |  |
| **Post sign up** | **Establish support needs and goals** | Draw up new Support PlanNB: This should take place within 4 weeks |  |  |  |
| **Post sign up** | **Ensure flat is equipped to move in** | Grants/ furniture application form completed, signed and sent |  |  |  |
| Applications made to other available funds (including CAT/PTP if available) |  |  |  |
| Visit to furniture store |  |  |  |
| Arrangements made to move tenant’s belongings (where applicable) |  |  |  |
| Any outstanding repairs arranged |  |  |  |
| Redecoration allowance agreed (if appropriate) |  |  |  |
| Heating and Hot Water system explained |  |  |  |
| Electricity meter readings provided |  |  |  |
| **When** | Task | Action NeededTo be agreed at initial meeting | By WhomTST/ Referrer/ RPSH/ Client | Due date | Date Completed |
| **Post sign up** | **Arrange Utilities Supply** | Key meter appointment made |  |  |  |
| Gas meter readings provided |  |  |  |
| Gas payment method arranged |  |  |  |
| Water payments arranged |  |  |  |
| Other – please specify |  |  |  |

Signed (TST worker): ……………………………………………….. Date: ……………………………………..

Signed (client): ………………………………………………………. Date: ……………………………………..