DAMP, MOULD

AND CONDENSATION POLICY

Health first • root-cause repair • respectful resident support

PURPOSE

To ensure every report or sign of damp and mould receives prompt, risk-led action that protects health, identifies and remedies underlying causes, and prevents recurrence without blaming residents.

Document owner	Applies to	Review
NEWPOINT Housing Group	Residents, workers, contractors, landlords and delivery partners	At least annually and after material change

1. Commitment, scope and principles

Damp and mould are potential health hazards, not cosmetic issues. NEWPOINT will take reports seriously, act with urgency and sensitivity, coordinate the responsible parties and keep residents informed until the hazard and its cause are addressed.

Principle	NEWPOINT standard
Health first	Triage potential harm, household vulnerability and immediate safety before routine repair priority.
No blame	Do not use assumptions about lifestyle or housekeeping to dismiss, delay or close a report.
Root cause	Investigate moisture source, building condition, heating and ventilation as a connected system.
Prompt control	Remove or isolate immediate exposure while permanent works are arranged.
Clear ownership	Identify NEWPOINT, landlord, council, prime partner and contractor responsibilities.
Aftercare	Check work, monitor recurrence and reopen promptly where the problem persists.

ONE REPORT OPENS ONE COORDINATED CASE

The resident should not complete separate mould, repair, vulnerability and complaint forms. Create one CRM case linked to inspection, works, communication and review actions.

2. Health risks and higher-risk circumstances

Damp and mould can affect physical and mental health. Risk depends on the extent, duration and location of exposure, the underlying hazard and the individual household. Visible area alone must not be used as the only measure of seriousness.

Factor	Examples requiring heightened attention
Health	Respiratory disease, asthma, allergies, immune suppression or reported worsening symptoms.
Age / development	Babies, children and older people may be more susceptible to harm.
Pregnancy / disability	Pregnancy, mobility limits, sensory needs or difficulty carrying out protective actions.
Location	Sleeping areas, children's rooms, living spaces or mould close to the face or bedding.
Extent / recurrence	Widespread, dense, hidden, repeatedly returning or affecting multiple rooms.
Water / building event	Active leak, flooding, sewage, saturated materials, structural defect or unsafe electrics.
Housing circumstances	Inability to heat the home, overcrowding, temporary placement or lack of usable rooms.

DO NOT ASK FOR MEDICAL PROOF BEFORE ACTING

Record reported health impact and use it in triage. Emergency advice or specialist escalation must not wait for a diagnosis, letter or completed form.

3. Reporting and proactive identification

Route	Required response
Resident report	Accept by any normal contact channel and acknowledge as a damp/mould case.
Worker or contractor sees signs	Record and report them even if the visit was for another purpose.
Council / partner referral	Confirm receipt, resident contact route, authority and any statutory or contractual clock.
Inspection / viewing	Photograph with permission, record location and assess whether occupancy is safe.
Repair history / data	Identify repeated leaks, cold spots, previous treatment and addresses with recurring cases.
Neighbouring / communal issue	Consider shared roofs, pipes, drainage, external fabric and adjacent properties.
No access / lost contact	Use the agreed accessible route, assess risk and coordinate safe escalation rather than automatic closure.

Information to capture

- Where and when first noticed; change over time; odour; water ingress; heating/ventilation; health impact; affected rooms and immediate needs.
- Existing photographs may help triage but must not replace inspection where one is needed.

REPORTING MUST BE EASY

Do not require the resident to identify the type or cause of damp. NEWPOINT and competent professionals are responsible for diagnosis and coordination.

4. Triage and immediate response

Priority signal	Action now
Immediate danger	Use emergency services where appropriate; isolate electricity/water risk and arrange emergency attendance.
Significant health risk	Escalate for urgent competent investigation and safety work under the applicable legal/contractual timeframe.
Active leak / saturation	Stop or contain the source, make safe, assess drying and inspect connected areas.
Severe / extensive mould	Assess safe use of rooms, professional cleaning/removal and need for temporary arrangements.
Vulnerable household	Apply adjustments, health-first prioritisation and partner/safeguarding coordination where relevant.
Moderate / localised report	Arrange timely investigation and interim advice without treating it as cosmetic.
Uncertain risk	Use the safer priority and seek technical or management review; do not downgrade by default.

STATUTORY CLOCKS MUST BE IDENTIFIED

Awaab's Law applies directly to social landlords and qualifying hazards. NEWPOINT must confirm whether the council or registered provider holds the duty, preserve the awareness date and coordinate to the stricter applicable statutory or contractual timescale.

5. Investigation and diagnosis

Inspection area	What to examine
Moisture source	Roof, rainwater goods, walls, damp-proofing, plumbing, drainage, flooding and leaks.
Ventilation	Extract fans, vents, windows, air paths, door undercuts, controls and evidence of function.
Heating / insulation	System operation, affordability concerns, cold surfaces, thermal bridging and insulation gaps.
Internal condition	Location, extent, pattern, material damage, furnishings and signs of hidden growth.
External / adjacent	Ground levels, pointing, render, roofline, neighbouring leaks and communal systems.
History	Previous reports, repairs, treatments, recurring rooms, seasonal pattern and contractor outcomes.
Household impact	Health reports, rooms unavailable, children, disability and any immediate support needed.

Competence and evidence

- Use a competent person with equipment and expertise proportionate to complexity; escalate ambiguous or recurring cases.
- Record findings, photographs, moisture observations, diagnosis, limitations, actions and responsible owner.

MOULD WASH IS NOT A DIAGNOSIS

Cleaning may reduce immediate exposure, but it does not close the case unless the moisture source is understood, necessary works are completed and recurrence is monitored.

6. Causes and response pathways

Likely pathway	Response
Penetrating damp	Repair external fabric, roof, openings or rainwater system; dry and reinstate affected materials.
Plumbing / traumatic damp	Stop leak, check hidden spread, dry safely and repair damaged finishes or components.
Rising / ground moisture	Obtain specialist diagnosis; address ground levels, barriers or fabric defects as appropriate.
Condensation / cold surfaces	Check heating, insulation, ventilation and affordability together; remedy property deficiencies.
Inadequate extraction	Repair, clean, replace or upgrade ventilation and explain controls accessibly.
Thermal bridge / insulation gap	Assess building fabric and implement competent remedial design rather than repeated surface treatment.
Mixed / uncertain cause	Use further monitoring or specialist survey and retain one accountable case owner.

BEHAVIOUR IS NEVER THE WHOLE DIAGNOSIS

Residents can be supported with practical steps, but advice must not substitute for repair, ventilation, insulation, heating or building work for which a landlord or provider is responsible.

7. Interim controls and resident support

Need	Possible interim action
Reduce exposure	Safe professional removal, isolate affected area or move sleeping arrangements where practicable.
Active moisture	Emergency repair, containment, drying equipment and safe electrical checks.
Loss of room / facilities	Coordinate temporary facilities, alternative space or accommodation decision with the authorised partner.
Heating affordability	Signpost energy, benefits or hardship support without making support a condition of repair.
Belongings affected	Record impact and explain claims, complaint or partner routes without promising liability.
Communication barrier	Use the recorded adjustment, named contact, clear visit plan and written summary.
Health concern	Encourage appropriate health advice and share minimum necessary information with consent or lawful authority.

INTERIM DOES NOT MEAN FINISHED

Temporary cleaning, heaters, dehumidifiers or advice must have an owner, end date and permanent-work plan. Equipment use and running costs must be considered.

8. Remedial works and property coordination

Stage	Control
Scope	Translate diagnosis into specific source repair, removal, drying, reinstatement and prevention tasks.
Authority	Confirm who approves and pays under the lease, management agreement, council contract or ownership duties.
Resident plan	Give accessible notice, sequence, duration, access needs, disruption and contact owner.
Safe work	Use competent contractors, suitable containment/PPE, protect occupants and avoid unsafe chemical use.
Variations	Escalate newly exposed defects promptly; do not close the original case while responsibility is debated.
Completion	Inspect the source repair and affected area, retain evidence and explain any remaining drying period.
Dispute / delay	Use management and partner escalation; give the resident updates and interim safety measures.

NEWPOINT OWNS COORDINATION WITHIN ITS ROLE

Where the landlord, council or prime partner authorises the work, NEWPOINT will track the case and communicate. It will not promise structural work, decant or legal outcomes outside its authority.

9. Communication and resident care

Moment	What to communicate
Acknowledgement	Case reference, immediate advice, current priority and next contact.
Before inspection	Purpose, attendee, access needs, approximate duration and what will be examined.
After inspection	Findings in plain language, uncertainty, interim controls and next actions.
Works arranged	Scope, contractor, timing, disruption, preparation and who to contact.
Delay	Reason, remaining risk, interim protection and revised update date before the resident chases.
Completion	What was repaired, any drying/monitoring period and how to report recurrence.
Closure	Evidence of resolution, resident feedback and complaint/review route.

Language standard

- Avoid 'lifestyle', 'just condensation', 'resident-caused' or instructions implying blame before a competent investigation.
- Be honest about findings while distinguishing facts, possible contributing conditions and unresolved causes.

LISTEN TO THE IMPACT

A respectful response includes the loss of rooms, damaged possessions, health anxiety, repeated visits and the burden of chasing—not only the technical repair.

10. Access, vulnerability and safeguarding

Situation	NEWPOINT approach
Reasonable adjustment	Adapt contact, appointment, format, worker briefing and access process.
Resident cannot prepare area	Explore practical support and safe alternatives; do not cancel essential investigation automatically.
Children / adult at risk	Consider linked safeguarding duties and coordinate without using safeguarding to replace repair action.
Domestic abuse / safe contact	Protect address, attendance and communication details; follow the dedicated policy.
No access	Confirm agreed adjustment was followed, reassess health risk and use proportionate partner/legal routes.
Temporary accommodation need	Escalate suitability and authorised placement decision; do not promise a move.
Complex household	Agree one lead, minimum necessary sharing and who updates the resident.

THE MOST VULNERABLE MUST NOT WAIT LONGEST

Difficulty engaging, communication barriers or complex needs increase the need for coordinated support; they are not reasons to downgrade or close a hazard case.

11. Completion, monitoring and recurrence

Check	Evidence required
Source controlled	Repair or intervention addresses the diagnosed moisture pathway.
Affected area treated	Contaminated material is safely cleaned, removed or reinstated as appropriate.
Drying complete / managed	Moisture has reduced or a documented monitored drying plan remains active.
Systems work	Heating and ventilation controls operate and are understood by the resident.
Resident outcome	Affected rooms are usable, outstanding impact is recorded and the resident has a return route.
Review	Follow-up timing reflects severity, season, drying period and recurrence risk.
Reopen	Any recurrence, ongoing odour, staining, moisture or health concern triggers reassessment, not another isolated wash.

DO NOT CLOSE ON CONTRACTOR ATTENDANCE

A job marked complete is not evidence the hazard is resolved. Case closure requires an outcome check, relevant records and a clear recurrence route.

12. Complaints, escalation and legal boundaries

Issue	Response
Dissatisfaction	Recognise and offer the Complaints and Service Resolution Policy without delaying repair action.
Repeated report	Review full history, previous diagnosis, works and communication; consider independent technical review.
Landlord / partner delay	Escalate under contract and governance routes while maintaining interim protection and updates.
Environmental health / regulator	Cooperate lawfully, preserve records and coordinate the authorised response.
Awaab's Law	Do not claim NEWPOINT is the statutory social landlord unless it is; support the duty-holder and meet any delegated obligation.
Fitness / disrepair claim	Notify appropriate landlord, insurer or legal lead; preserve evidence and continue necessary safety work.
Compensation / loss	Explain the correct complaint, insurance or legal route without admitting or denying liability outside authority.

A COMPLAINT NEVER STOPS THE REPAIR

Complaint, legal, insurance and technical processes may run together. Immediate hazard control and resident communication continue throughout.

13. Governance, data and prevention

Control	Assurance
Case oversight	Open, overdue, severe, recurring and vulnerable-household cases reviewed by management.
Property intelligence	Identify repeat addresses, blocks, components, contractors and seasonal patterns.
Contractor quality	Measure diagnosis quality, first-time resolution, recalls, communication and completion evidence.
Partner performance	Track approval delays, responsibility disputes and missed statutory/contractual milestones.
Resident experience	Review chasing, access failures, complaints, adjustments and closure feedback.
Prevention	Feed learning into planned maintenance, ventilation, insulation, roofs, drainage and acquisition standards.
Reporting	Use accurate denominators and explain scope; do not conceal unresolved cases through job-code closure.

LEARN ACROSS THE PORTFOLIO

A recurring defect is not only an individual repair. Use case data to inspect similar properties and prevent harm before another resident reports it.

14. Quick-reference response card

Situation	Action now
Health symptoms / vulnerable household	Use heightened priority, immediate safety advice and competent escalation.
Active leak / electrical risk	Stop or isolate source, make safe and arrange emergency response.
Widespread or bedroom mould	Assess exposure and usable rooms; arrange urgent inspection and interim control.
Small localised area	Acknowledge, inspect proportionately and investigate cause; do not dismiss.
Resident sends photographs	Use for triage, preserve them and arrange inspection where needed.
Contractor proposes mould wash only	Require diagnosis, source action and follow-up plan before closure.
Partner disputes responsibility	Escalate ownership while NEWPOINT maintains resident updates and interim safety.
Problem returns	Reopen the same history, review failed diagnosis/work and consider specialist input.

Four checks before closure

- Has the moisture source been identified and addressed?
- Is the affected area safe and usable, with drying managed?
- Has the resident received a clear outcome and recurrence route?
- Is a follow-up date or preventive action required?

HEALTH FIRST, CAUSE FIXED, OUTCOME CHECKED

These three conditions define a complete damp and mould response.

15. Document control and authoritative sources

Version	Date	Owner	Review
1.0	August 2026	NEWPOINT Housing Group	August 2027 or earlier trigger

Authoritative framework

- **GOV.UK - Damp and mould health risks for rented housing providers**
  https://www.gov.uk/government/publications/damp-and-mould-understanding-and-addressing-the-health-risks-for-rented-housing-providers
- **GOV.UK - Awaab's Law guidance for social landlords**
  https://www.gov.uk/government/publications/awaabs-law-guidance-for-social-landlords/awaabs-law-guidance-for-social-landlords-timeframes-for-repairs-in-the-social-rented-sector
- **GOV.UK - HHSRS guidance collection**
  https://www.gov.uk/government/collections/housing-health-and-safety-rating-system-hhsrs-guidance
- **GOV.UK - HHSRS tenant guide**
  https://www.gov.uk/government/publications/housing-health-and-safety-rating-system-hhsrs-tenant-guide/tenant-guide-to-the-housing-health-and-safety-rating-system-hhsrs
- **Housing Ombudsman - Damp and mould Spotlight report**
  https://www.housing-ombudsman.org.uk/reports/spotlight-reports/damp-and-mould/
- **Legislation.gov.uk - Landlord and Tenant Act 1985**
  https://www.legislation.gov.uk/ukpga/1985/70/contents

CONTROL NOTE

Before formal adoption, define emergency, significant-hazard and routine response standards for every operating model; identify the statutory landlord and Awaab's Law duty-holder; map council, landlord and prime-partner escalation; appoint competent survey and contractor resources; configure CRM awareness dates, vulnerability, actions and follow-ups; agree decant and out-of-hours authority; and obtain current legal, technical and health-and-safety review.