Cassiltoun
Housing Association

GARDEN CARE POLICY

Date Approved	Proposed Review Date
September 2023	September 2026
Chair Person/Office Bearers Signature:	

CASSILTOUN HOUSING ASSOCIATION LIMITED
CASTLEMILK STABLES, 59 MACHRIE ROAD, GLASGOW G45 OAZ

Cassiltoun is a registered Scottish Charity no 035544
& Registered Property Factor no PF0015

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1. INTRODUCTION

Cassiltoun Housing Association's Garden Care Policy is designed to offer assistance to those individual households where there are no able-bodied occupants capable of cutting grass or trimming their hedges during the growing season. The Association understands the importance to tenants and the wider community of well-maintained and attractive gardens and we wish to support tenants who experience physical challenges maintaining their garden.

In preparing this policy, the Association has incorporated provisions of the following: -

- Housing (Scotland) Act 2001;
- The Housing (Scotland) Act 2010
- The Scottish Social Housing Charter in particular: -

Charter Outcome 6 – Estate Management, Anti-Social Behaviour, Neighbour Nuisance and Tenancy Disputes – "*tenants and other customers live in well maintained neighbourhoods where they feel safe".*

Charter Outcome 11 – Tenancy Sustainment – "*tenants get the information they need on how to obtain support to remain in their home; and ensure suitable support is available including services provided directly by the landlord and by other organisations."*

Where the Association has provided a tenant with a property which has a garden, it is the occupiers' responsibility to ensure that the garden area is maintained and in a good condition and that your grassed areas are cut regularly. The requirement for a tenant to cut their grass and hedging is a condition of the Scottish Secure Tenancy Agreement. However, the Association's Allocation Policy states that medical cases are given a priority for ground floor accommodation. Therefore, there will always be situations where some tenants are unable to carry out the terms of their Tenancy Agreement, namely to maintain both back and front gardens for which they are responsible. It is the tenant's responsibility to apply to the Association for inclusion in the Garden Care Scheme and to reapply on an annual basis.

2. AIMS

- To introduce a policy which will formalise the Association's approach to estate maintenance for tenants with conditions likely to impair their ability to maintain their garden.

- To introduce a fair and consistent approach to all tenants applying for help with garden maintenance.

- To monitor costs of providing a garden care scheme.

3. AGREEMENT

The Association wishes to support tenants to adhere to the conditions of their tenancy agreement. However, it is not the Association's intention that the scheme should be available to all tenants only those who are unable to maintain their gardens due to age, physical or mental impairment. In order to be eligible for the garden care scheme the tenant would have to apply completing the application form at appendix 1 and fulfil the following criteria : -

3.1 Produce evidence of means tested benefit identifying age and/or medical condition likely to limit tenant's responsibility to maintain garden.

3.2 Produce evidence of any medication currently being prescribed.

3.2 There should be no other household member aged 16 years or over as listed in Tenancy Agreement who have no physical or mental impairment and therefore able to carry out garden maintenance.

3.3 Due to the high volume of requests for this service, all recipients of the service are required to complete a new application form (appendix 1) each year and provide the supporting evidence required to determine that the applicant qualifies (still qualifies) for this service. Once assessed the applicant will be informed whether they have been included in the Garden Care Scheme for that year.

3.4 The list will be updated annually and as required when tenants on the scheme leave the property or when new or existing tenants are identified as having a need for the scheme.

4. EQUAL OPPORTUNITIES STATEMENT

11.1 We recognise our pro-active role in valuing and promoting diversity, fairness, social justice and equality of opportunity by adopting and promoting fair policies and procedures. We will check this policy and associated procedures regularly for their equal opportunity implications, taking appropriate action to address inequalities likely to result or resulting from implementation of the policy and procedures. We are committed to providing fair and equal treatment to all applicants and tenants and will not discriminate against any on the grounds of race, colour, ethnic or national origin, religion, age, gender sex, sexual orientation, marital status, family circumstances, employment status or physical ability.

11.2 An Equality Impact Assessment (EIA) has been carried out when preparing this policy. In line with good practice the completed EIA will be published alongside this policy.

11.3 We do not see this policy as having any direct impact upon the protected characteristics contained within the Equality Act 2010.

5.0 PROCESSING INFORMATION – GENERAL DATA PROTECTION REGULATIONS

5.1 Cassiltoun Housing Association will process information and data received in accordance with its policies and procedures relating to General Data protection Regulations and all customers and service users will be issued with a Fair Processing Notice.

5.2 All members of staff will be made aware of their responsibilities in relation to General Data Protection Regulations and will be trained in the process the Association has introduced to ensure compliance with GDPR.

6.0 POLICY REVIEW

6.1 This policy will be formally reviewed every three years in consultation with staff and customers to ensure the aims of the policy are being met or sooner if legislation changes.

6.2 The date of the next Policy review is September 2026.

Cassiltoun Housing Association

Garden Care Scheme Application Form

How to Complete this Form

Part A – Fill in your full name, date of birth, age, address and telephone number, and if appropriate those of the joint applicant. List the name(s), date of birth, age and relationship to you (e.g. son, daughter) of all other residents within the household.

Part B – Please complete in respect of the service you require.

Part C – Briefly state the reasons why you and/or a household member are unable to tend your garden and if appropriate the joint applicant.

Part D – Please list your and/or household member's medications and benefits and if appropriate that of the joint applicant.

Part E - The declaration must be signed by both the applicant and where applicable the joint applicant.

PART A

Please place an **X** in the appropriate box

Sole Application ☐ Joint Application ☐

Relationship of Joint Applicant (e.g. husband, wife etc.) _____

Main Applicant Details

Mrs/Mr/Ms _____

Date of Birth _____ Age _____

Address _____

_____

_____

Telephone number (1) _____

Telephone number (2) _____

Joint Applicant Details

Mrs/Mr/Ms _____

Date of Birth _____ Age _____

E—mail Address _____

Please complete the following section in respect of every other person who is resident within your house:-

Name	Date Of Birth	Age	Relationship

PART B

ABOUT MY GARDEN

Please place an X in the appropriate box for the service(s) you require.

Grass cutting/Strimming ☐ Hedge Trimming ☐

PART C

MAIN APPLICANT DECLARATION

The reason(s) I am unable to maintain my garden are as follows:-

_____

_____

_____

_____

JOINT APPLICANT DECLARATION

The reason(s) I am unable to maintain my garden are as follows:-

_____

_____

_____

_____

PART D

MAIN APPLICANT MEDICATION AND BENEFITS

_____

JOINT APPLICATION MEDICATION AND BENEFITS

_____

Please provide documentation which verifies the above reasons in order for your application to be assessed correctly.

EVIDENCE PROVIDED? - Tick as appropriate YES ☐ NO ☐

PART E

DECLARATION

I declare that the information that I have provided are correct and that all residents in the house are unable to maintain the garden by reason of infirmity or disability.

I accept that Cassiltoun Housing Association will not be held liable for any damage caused to garden ornaments or similar due to us providing this service. I have read and understood the Garden Care Policy.

I agree that Cassiltoun Housing Association may make the necessary enquiries to verify the information provided on this application.

MAIN APPLICANT SIGNATURE _____ DATE _____

JOINT APPLICANT SIGNATURE _____ DATE _____

For Office Use Only	
Tenancy Reference number	
Rent Account Balance	
Family Composition Checked	
Medical Evidence Checked	
Application approved/refused	