


Address: _____ Town: _____ Date: _____

COLLABORATIVE ACTION PLAN AND AGREEMENT

The intent of this agreement is to collaboratively develop and implement a mutually reasonable plan for resolution consisting of clear goals and objectives. All goals must be **Specific, Measurable, Attainable, Relevant, and Time-bound**.



Instructions: Goal options provided on this agreement are correlated with targets on the Uniform Inspection Checklist (UIC) and the UIC - Quick Reference
 Complete the UIC - Quick Reference at initial home assessment.
 Use the result of the UIC - Quick Reference assessment to determine and prioritize goals below.

 This form is intended for digital use. Many cells contain tips and/or drop-down menu options that will activate once a cell is selected. If completing manually, refer to digital copy for assistance.

Disclaimer: The Collaborative Agreement is not a legal document and is not legally binding without court involvement.

Team Member Information Team members should include only those who have an absolute & active role in process & outcome. Auxiliary support may benefit from being kept informed of progress without need to be listed here.

	Agency / Primary Contact	Role	Phone Number	Email Address
1		RESIDENT		
2				
3				
4				
5				
6				

 **RESIDENT GOAL**  1. If you woke up tomorrow & your home was just as you wanted it to be, how would your life be different?
 Ask the following questions: 2. What do you want to be able to do that you are currently unable to due to the clutter?

1	
2	

Agreement Goals		If more goals are necessary, consider a phased approach.		Progress Tracking	
		Time Frame for Completion	Estimated End Date	Projected Start Date	Projected End Date
		Instructions: Select goal from UIC - Quick Reference initially completed at residence. List goals in order of importance. Use space below goal for goal detail. (front door only, path in bdrm)		Start Date	End Date
				Projected Start Date	Projected End Date
1	Details			Start Date	End Date
				Projected Start Date	Projected End Date
2	Details			Start Date	End Date
				Projected Start Date	Projected End Date
3	Details			Start Date	End Date
				Projected Start Date	Projected End Date
4	Details			Start Date	End Date
				Projected Start Date	Projected End Date
5	Details			Start Date	End Date
				Projected Start Date	Projected End Date
6	Details			Start Date	End Date
				Projected Start Date	Projected End Date
7	Details			Start Date	End Date
				Projected Start Date	Projected End Date
8	Details			Start Date	End Date

Plan Narrative

Prepared by: _____

Purpose of narrative is to clearly identify roles & responsibilities of all team members & clarify plan expectations not noted above.

The goal of this Collaborative Agreement is to assist the resident in achieving and maintaining a safe and functional home. In order to best support the achievement of the above listed goals in a reasonable and timely manner the following plan will be put into place. Team member roles and responsibilities are as follows:

Team Member Name	Role / Agency	Responsibility
	RESIDENT	agrees to be present, allow team members in for scheduled visits, participate fully, work with team in mutual effort to reach goals, work to maintain progress.

Please read the following statement thoroughly.

In addition, all team members agree to put forth a good faith effort to locate and secure funding for services as necessary. All team members understand that lack of funding may lead to the inability to reach stated goals. All team members agree to put forth a good faith effort to locate and secure long-term services and support(s) intended to continue beyond the end date of this agreement to help reduce the rate of recidivism. (Ex: in home support services, housekeeping, heavy chore, counseling, group treatment, etc.) All team members agree to utilize agreed upon assessment and inspection tools (see below) in order to ensure uniform reporting and communication. *(Required individual agency documentation will be handled by that agency's team representative separate from the Collaborative Agreement and team responsibility.)* All team members agree to open, timely, and responsive communication. All team members, including the resident, understand that failure to fulfill their roles as agreed upon above may jeopardize the resident's ability to meet stated goals and as a result may jeopardize their housing. Team meetings will be called on an as-needed basis to assess progress towards goals and address issues that may emerge. In the event issues of maintaining the safe and sanitary condition of the home arise, the team agrees to allow a minimum of two weeks to resolve such issues before a team meeting is convened to re-evaluate this agreement. Current dates on the Priority Scale reflect an initial goal of completion. A contingency of a few months is built into the time frame to accommodate for issues such as securing funding, service implementation time, re-assessments, goal adjustments, and new issues that may emerge. Goals and dates are subject to change based on each inspection result, including the initial inspection. All team members will be notified of any proposed date changes and will meet if necessary to discuss such changes. All concerns and scheduling issues will be directed to the team leader.

Additional Information:

Assessment / Inspection Tools Purpose of Tools: Keep team member communication & reporting consistent.

Tool / Document Name	Purpose for Use
Uniform Inspection Checklist - Quick Reference ©	Initial Assessment
Uniform Inspection Checklist - Hoarding and Excessive	Establish a Baseline
Uniform Inspection Checklist - Hoarding and Excessive	Monitor Progress

Inspection Agreement Purpose of Inspection Agreement is to establish scheduling and process guideline

Once the Collaborative Action Plan and Agreement has been developed, an initial inspection should be scheduled. The initial inspection, using the UIC - Full Version, is to establish a baseline for measuring future progress.

Proposed Initial Inspection Date:

Once the initial inspection has been completed, inspections will be scheduled as follows:

Initially every: <input type="text"/>	for a period of <input type="text"/>	<i>(Note: It is not necessary to complete all 3 options given. This will vary on a case by case basis.)</i>
followed by every: <input type="text"/>	for a period of <input type="text"/>	
followed by every: <input type="text"/>	for a period of <input type="text"/>	

The following team members will be present at every inspection:

<input type="text"/>	<input type="text"/>	<input type="text"/>
RESIDENT	<i>Representative of Involved Inspection</i>	<i>Additional Team Member</i>

All inspections will utilize the UIC - Hoarding/Excessive Clutter full version to monitor & measure progress. All inspections dates will be provided to the resident with a minimum of 7 days advance notice.

Signatures  Please read Collaborative Action Plan and Agreement **thoroughly** before signing.

Name	Role / Agency	Signature	Date
	RESIDENT		

***** It is not necessary for all team members to sign the same signature page. *****

Each team member can print out and sign their copy of the Collaborative Action Plan and Agreement. Once you have signed this Collaborative Agreement, please return the signature page to the Team Leader via email or fax. It is **ESSENTIAL TO THE RESOLUTION PROCESS** that **ALL** team member's signatures are on file with the Team Leader as early as possible. Delays or missing signatures may be interpreted as lack of team coherence and may have an adverse affect on the success of the Collaborative Agreement.

<input type="text"/>	<input type="text"/>	<input type="text"/>
Team Leader	Fax Number	email address