# Warwick District Council – Compliance Roadmap Action Plan:



Action Plan Leads	
Cabinet:	Cllr Paul Wightman, Cabinet Member for Housing
Executive Team:	Chris Elliott, CEO & Darren Knight, Deputy CEO
Strategy Lead:	Steve Partner, Head of Neighbourhood and Assets

**External assurance:** Letrice Thomas, Pennington Choices

Priority*					
Critical:	Immediate	Status Key			
High:	Within three months	Off target	Initiated	Completed	Not commenced
Medium:	Within six months				

Initials:	Name:	Job Title:
CE	Chris Elliot	Chief Executive
DK	Darren Knight	Deputy Chief Executive
SP	Steve Partner	Head of Neighbourhood and Assets
LB	Lisa Barker	Head of Housing Health and Communities
FJQ	Francis Quinn	Health and Safety and Premises Manager
SH	Simon Hodges	Compliance Manager
AR	Andrew Rollins	Head of Finance
GR	Graham Leach	Head of Governance and Monitoring Officer
RB	Richard Barr	Audit and Risk Manager
TD	Tracy Dolphin	Head of People and Communications
CR	Caroline Russell	Landlord Services Manager
PS	Paul Smith	Business Development and Change Manger
DL	Dominic Linton	Business Development and Change Officer
AM	Andy Moran	Principal Building Surveyor (Fire Safety and Climate Change)
AMo	Anna Monkton	Business Support Manager
NC	Nicki Curwood	Marketing and Communications Manager
RR	Rebecca Reading	Strategic Procurement and Creditors Manager

KW	/ Karen Weatherburn	Learning and Development O	fficer					
Report ref no.	Recommendation	Progress	Resources	Lead Officer	Support Officers	Priority	Target comp date	Status
3.2	Recommendation 1 – Governance and assurance structure: Establish an appropriate governance and assurance structure to provide effective oversight of compliance and building safety and clarify responsibilities, accountabilities, and formal approval processes.	<ul> <li>Draft governance and assurance structure created and checked with Pennington.</li> <li>Terms of reference drafted.</li> <li>Governance structure and ToR approved.</li> <li>Recruitment underway to appoint a scrutiny committee support officer.</li> <li>Specialist Cllr scrutiny training planned for December 2023 to support their role in the Governance framework.</li> <li>First meeting of the Compliance Board planned for December.</li> <li>External compliance training being arranged for Audit &amp; Scrutiny members before Christmas.</li> <li>CEO of Association of Retained Council Housing agreed to join compliance board.</li> <li>Tenant representative confirmed.</li> </ul>	<ul> <li>Administrative support for diary management and meeting minutes and papers.</li> <li>Additional scrutiny support officer to be funded.</li> <li>External training for Cllr scrutiny members - £975.00</li> <li>Pennington Consultants</li> </ul>	DK	GL LB	Critical	09.11.23	

3.2	Recommendation 2 – Compliance awareness	<ul> <li>External trainer has submitted training course proposal.</li> </ul>	Pennington Consultants	DK	SP	High	22.12.23	
	session: The Leadership Team and appropriate scrutiny panel / committee should undertake a compliance awareness session to fully understand the latest legal and regulatory obligations placed upon them, the common pitfalls to pay attention to and how to provide more effective oversight, scrutiny and challenge of compliance performance.	<ul> <li>Senior Officer and Cabinet delegates identified.</li> <li>Course outline approved.</li> <li>Purchase order raised.</li> <li>Course booked for SLT Cabinet on the 29.11.2023 - completed.</li> <li>Course planned before Christmas for the Asset Compliance Committee booked for the 21.12.2023</li> </ul>						
3.2	Recommendation 3 – Compliance and building safety strategy: Develop a standalone compliance and building safety strategy that: sets out your objectives, addresses the recommendations within this report and outlines how they will be achieved. Ensure that you are clear on:	<ul> <li>Pennington Consultants quoted to assist and advise in policy development.</li> <li>Fire Safety policy / strategy out for consultation.</li> </ul>	Pennington Consultants	SP	LB FQ SH CR	High	30/06/24	

	<ul> <li>Legal and regulatory obligations, now and in the future</li> <li>Your overall objectives for property compliance, building safety and resident safety.</li> <li>What actions need to be delivered to achieve these objectives.</li> <li>How you will demonstrate that these actions are deliverable.</li> </ul>						
3.2	<ul> <li>Recommendation 4 – Fire Safety Group:</li> <li>Broaden the scope of the existing Fire Safety Group to have full oversight of all legal fire and building safety requirements.</li> <li>Develop a term of reference for the group that ensures achieving the requirements of fire and building safety legislation and guidance is included as a standard agenda item.</li> </ul>	<ul> <li>Terms of Reference Drafted.</li> <li>Draft TOR circulated for comment.</li> <li>Discussed and agreed TOR at Fire Safety Group 19/10/23.</li> </ul>	LB	FJQ	High	09.11.23	
3.3			SH	PS	Critical	30.06.24	

Recommendation 5 – Data	• 17/10 Meeting held with PS,	Pennington Consultants	DL	
Validation:	DL and wider team to			
	commence discussions on			
Undertake a data validation	the specification of primary			
exercise that is coordinated	data search mechanism(s).			
across all compliance areas	Full Asset List already			
to gain assurance around all	available and v1.0 of a			
property assets, compliance	'Validation workbook' has			
programmes and records:	been created.			
1. Download the full asset	Order raised with     Departments Chaines			
list from your parent	Pennington Choices			
management system				
into a data validation				
workbook.				
2. Confirm which				
properties will or will				
not be subject to each				
compliance programme.				
All properties should be				
defaulted to require an				
inspection until it can				
be evidenced				
otherwise.				
3. Record evidence-based				
reasons for properties				
not required on each				
programme.				
P. 00.000000				
4. Validate a sample of				
compliance records to				
ensure they are valid				
and in date.				

	<ol> <li>Quantify compliance gaps to develop a plan to resolve them.</li> <li>Validation should include categorising buildings (11+ and 18m+) and the smoke and carbon monoxide alarm programmes.</li> <li>Follow the above exercise with regular, documented validation to ensure asset and compliance data remains up to date.</li> </ol>						
3.3	Recommendation 6 – Active H configuration: Configure Active H to record the correct compliance programme data and provide appropriate reporting outputs.	<ul> <li>17/10 Meeting held with PS, DL and wider team to commence discussions on the specification of primary data search mechanism(s).</li> </ul>	SH	PS DL	High	30.06.24	
3.3	Recommendation 7 – Managing follow-up actions: Implement a process for tracking all actions deriving from each of your compliance programmes. You should consider and	• Existing FRA actions now all in centralised spreadsheet. Ability to prioritise in relation to property, severity, department etc. Completed actions to be updated in spreadsheet, with completion date added.	SH	AM	High	31.10.24	

	agree: the platform for recording actions, where the process can be automated, allocation, quality checks, evidence of completion and reporting.	<ul> <li>Comments to be added to outstanding actions.</li> <li>Work already undertaken with ICT on development of the Contractor Web Portal over the last 12 months which supports this Recommendation. The work done to-date is currently in TEST pending Acceptance Testing.</li> </ul>					
3.3	Recommendation 8 – Changes to asset and programme lists:		SH	AM PS	Medium	31.03.24	
	Formalise and document the process for adding, removing or making changes						
	to properties on Active H, including who has authority to do so.						
	Ensure there is a clear audit trail of uploading and setting attributes against each property and quality						
	property and quality assurance checks to ensure each property is on the						

	correct compliance programme.							
3.4	Recommendation 9 – Operational lead for fire safety: Appoint an operational lead for fire safety to have oversight of all fire safety related programmes and performance (fire risk assessment programme and actions, Fire Safety (England) Regulations obligations, fire equipment servicing, and so on).	<ul> <li>Meeting with S151 regarding funding for additional resources</li> <li>Market testing for suitable candidates</li> <li>JD / Person specification being developed.</li> <li>Initial screening interviews held.</li> </ul>	Will require additional budgetary provision and highlighted with S151 officer	SP	TD FQ	Critical	31/12/23	
3.4	Recommendation 10 – Operational lead for building safety: Appoint an operational lead for building safety to support the strategic lead (Head of Neighbourhood and Assets) and take overall operational responsibility for day-to-day management of building safety risks in higher-risk buildings, and	<ul> <li>Meeting with S151 regarding funding for additional resources</li> <li>JD / Person specification being developed.</li> <li>Market testing for suitable candidates</li> <li>Initial screening interviews held</li> </ul>	Will require additional budgetary provision and highlighted with S151 officer	SP	TD FQ	Critical	30/11/23	

Appendix 2	
communications with residents of those buildings.	
Operational duties can be	

	residents of those buildings. Operational duties can be delegated, however the operational lead should have full oversight of all activities through a clear assurance and 'lines of defence' framework						
3.5	Recommendation 11 – Compliance reporting: Develop a standalone weekly compliance report that covers the big six compliance areas and addresses the items raised in the report (Section 3.5). This new report should also be used to provide monthly and quarterly summaries to the management and Leadership Team. Reporting should include follow-up actions: total number of actions, actions by risk/priority, actions completed in time and overdue, and supporting narrative to provide a status summary. Data should be driven from Active H and performance	<ul> <li>PS has been tasked with leading on establishing a live reporting environment e.g., get to a using Power BI</li> <li>Gas safety daily reporting completed. Work commenced on reporting for Lift safety and fire safety.</li> <li>SH 08/11 - Variations of this exist already and co- dependant work has already started as part of Recommendation 3.3.x</li> </ul>	SH	AM PS DL	High	31.10.24 Major work will be done in three months – the live/instant reporting will take longer.	

	presented in an easy to read format. Use our compliance scorecard examples as a benchmark for current best practice.						
3.6	Recommendation 12 – Policies: The Leadership Team and technical team members should attend a facilitated session to agree policy principles (obligations, inspection programmes, follow-up works, contractor competencies, KPIs, and so on). The output of this session will be used to draft seven separate policy documents which should be approved through your updated governance framework, subject to version control and reviewed every two years (or sooner, if there is a change in legislation, regulation or other approved guidance).		SP	LB CR SH PS	High	31/01/24	
3.6	Recommendation 13 – Process maps & procedures:	<ul> <li>Pennington Consultants quoted for assistance</li> </ul>	SP	SH AM CR	Medium	30/09/24	

	Once the policies have been approved, develop standalone procedure documents and process maps to support each of your policies. Your procedure documents should clearly outline how each of your service areas are delivered operationally. The process maps should visibly demonstrate the end- to-end process and areas of responsibility for all parties involved.						
3.7	Recommendation 14 – Competence & Training matrix: Develop a training matrix to specify the training, competence and qualification requirements for all employees responsible for oversight and delivery of compliance and building safety programmes. This will identify gaps and ensure training and competence is kept up to date.		SP	KW FJQ TD	High	31/03/24	

	Any gaps should be addressed by undertaking appropriate qualifications within appropriate timeframes.						
3.7	Recommendation 15 – Compliance and building safety refresher training: The Compliance Team should undertake refresher training that covers all compliance areas to refresh their knowledge and ensure they remain up to date with the latest legislation and obligations.		SH	KW	Medium	30.06.24	
3.8	<ul> <li>Recommendation 16 – Contract management:</li> <li>Ensure your regular contractor performance meetings include standard agendas, record minutes and monitor key performance indicators. Also incorporate checks of accreditations, insurances, competency, and any</li> </ul>	• Meeting booked with AM and Compliance Team Leader (wk. commencing 13/11) to examine existing meeting format/agendas, etc and establish standard templates for Contract Management recommendations going forward.	SH	АМ	Medium	31.03.24	

changes to staff, and							
ensure evidence is							
provided.							
data to ensure							
programmes are driven							
by WDC.							
ecommendation 17 –			AR	RB	Medium	30.01.24	
nternal audit:							
. Ensure that your							
-							
required levels of							
	<ul> <li>provided.</li> <li>Undertake regular, documented contractor competency checks (at least annually).</li> <li>Migrate data and records from contractors' systems to Active H to re-establish full control, ownership and accountability of all compliance programme data to ensure programmes are driven by WDC.</li> <li>Ensure that your internal audit regime reviews all seven compliance areas at least once every two years, and as a minimum, establishes whether WDC is compliant with its legal and regulatory obligations.</li> <li>Ensure that your</li> </ul>	ensure evidence is provided. Undertake regular, documented contractor competency checks (at least annually). Migrate data and records from contractors' systems to Active H to re-establish full control, ownership and accountability of all compliance programme data to ensure programmes are driven by WDC. ecommendation 17 – nternal audit: Ensure that your internal audit regime reviews all seven compliance areas at least once every two years, and as a minimum, establishes whether WDC is compliant with its legal and regulatory obligations.	ensure evidence is provided. Undertake regular, documented contractor competency checks (at least annually). Migrate data and records from contractors' systems to Active H to re-establish full control, ownership and accountability of all compliance programme data to ensure programmes are driven by WDC. ecommendation 17 – tternal audit: Ensure that your internal audit regime reviews all seven compliance areas at least once every two years, and as a minimum, establishes whether WDC is compliant with its legal and regulatory obligations. Ensure that your	ensure evidence is provided. Undertake regular, documented contractor competency checks (at least annually). Migrate data and records from contractors' systems to Active H to re-establish full control, ownership and accountability of all compliance programme data to ensure programmes are driven by WDC. ecommendation 17 – tternal audit: Ensure that your internal audit regime reviews all seven compliance areas at least once every two years, and as a minimum, establishes whether WDC is compliant with its legal and regulatory obligations. Ensure that your	ensure evidence is provided. Undertake regular, documented contractor competency checks (at least annually). Migrate data and records from contractors' systems to Active H to re-establish full control, ownership and accountability of all compliance programme data to ensure programmes are driven by WDC. Ensure that your internal audit: Ensure that your internal audit regime reviews all seven compliance areas at least once every two years, and as a minimum, establishes whether WDC is compliant with its legal and regulatory obligations. Ensure that your	ensure evidence is provided. Undertake regular, documented contractor competency checks (at least annually). Migrate data and records from contractors' systems to Active H to re-establish full control, ownership and accountability of all compliance programme data to ensure programmes are driven by WDC. ecommendation 17 – tternal audit: Ensure that your internal audit regime reviews all seven compliance areas at least once every two years, and as a minimum, establishes whether WDC is compliant with its legal and regulatory obligations.	ensure evidence is provided. Undertake regular, documented contractor competency checks (at least annually). Migrate data and records from contractors' systems to Active H to re-establish full control, ownership and accountability of all compliance programme data to ensure programmes are driven by WDC.ARRBMedium30.01.24Ecommendation 17 - ternal audit: ecompliance areas at least once every two years, and as a minimum, establishes whether WDC is compliance areas at legations. Ensure that yourRBMedium30.01.24

	regulatory and best practice compliance obligations to provide a meaningful assurance report with appropriate assurance ratings.						
3.9	<ul> <li>Recommendation 18 – External audit:</li> <li>Implement 100 per cent desktop checks of compliance records to provide assurance that certification has been completed correctly (for example, nine-point check of gas safety records) and follow-up works are actioned within an appropriate timeframe.</li> <li>Implement a third-party technical auditing regime across all compliance areas to undertake sample checks of contractors' field work and desktop reviews of compliance records. The auditor(s) should be competent and appropriately accredited.</li> </ul>		SP	RB RR SH	High	31/05/24	

3.10	Recommendation 19 – resident communications: Develop and implement a formal resident communications campaign to share key messages around resident health and safety across all areas of property compliance and building safety. This should include consideration of the legal fire and building safety requirements under the Fire Safety (England) Regulations 2022 and Building Safety Act 2022. Also consider how you intend to inform harder to reach groups, such as those without internet access, were English is not their first language, or those with disabilities and impairments.	<ul> <li>Initial activities to date:</li> <li>New webpage for further information and FAQs</li> <li>Tenant Building Safety Survey for end of November 2023</li> <li>Tenant newsletter December 2023</li> <li>Campaign scoping underway.</li> </ul>	NC	LB SH AM CR	Medium	30.06.24	
4.1	Recommendation 20 – Gas and heating safety:	<ul> <li>SH 08/11 - Meeting on 10/10 to review existing HPM</li> </ul>	SH	CR PS/DL	High	30.06.24	

1.       Implement checks to ensure tenants are receiving LGSRs within 28 days of the service.       procedure, 2009 policy and procedure identified, walk through of existing HPM (ActiveH Case Processing) for Gas Safety No Access.         2.       Display LGSRs in communal areas of buildings served by a communal boiler.       Further meeting scheduled for 14/11 to identify required updates to Process Mapping         3.       Ensure you can demonstrate compliance with the Smoke and Carbon Monoxide (Amendment) Regulations 2022       Further meeting scheduled for 14/11 to identify required updates to Process Mapping         4.       Ensure the following items are addressed as part of policy, procedure and process map development:       Processing for Gas Safety No Access.         •       End-to-end access process.       Managing remedial actions.       Processing for Gas Safety No Access.         •       New tenant checks to ensure they arrange turn on       Processing for Gas Safety No Access.       Processing for Gas Safety No Access.		Implement checks to	process ovisting policy and		1	
<ul> <li>receiving LGSRs within 28 days of the service.</li> <li>Display LGSRs in communal areas of buildings served by a communal boiler.</li> <li>Ensure you can demostrate compliance with the Smoke and Carbon Monoxide (Amendment) Regulations 2022</li> <li>Ensure the following items are addressed as part of policy, procedure and process map development:</li> <li>End-to-end access process.</li> <li>Managing remedial actions.</li> <li>New tenant checks to ensure they arrange turn on</li> </ul>	1.					
28 days of the service.       identified, walk through of existing HPM (ActiveH Case         2. Display LGSRs in communal areas of buildings served by a communal boiler.       • Further meeting Scheduled for 14/11 to identify required updates to Process Mapping         3. Ensure you can demonstrate compliance with the Smoke and Carbon Monoxide (Amendment) Regulations 2022       • Further meeting scheduled for 14/11 to identify required updates to Process Mapping         4. Ensure the following items are addressed as part of policy, procedure and process map development:       • End-to-end access process.         • Managing remedial actions.       • New tenant checks to ensure they arrange turn on			-			
2. Display LGSRs in communal areas of buildings served by a communal boiler.       existing HPM (ActiveH Case Processing) for Gas Safety No Access.         3. Ensure you can demonstrate compliance with the Smoke and Carbon Monoxide (Amendment) Regulations 2022       Further meeting scheduled in the Smoke and Carbon Monoxide (Amendment) Regulations 2022         4. Ensure the following items are addressed as part of policy, procedure and process map development:       End-to-end access process.         • End-to-end access process.       • Nanaging remedial actions.         • New tenant checks to ensure they arrange turn on       • New tenant checks						
2. Diplay LGSRs in communal areas of buildings served by a communal boiler.       Processing) for Gas Safety No Access.         3. Ensure you can demonstrate compliance with the Smoke and Carbon Monoxide (Amendment) Regulations 2022       Further meeting scheduled in the Smoke and Carbon Monoxide (Amendment) Regulations 2022         4. Ensure the following items are addressed as part of policy, procedure and process map development:       End-to-end access process.         • Managing remedial actions.       • New tenant checks to ensure they arrange turn on		28 days of the service.				
communal areas of buildings served by a communal boiler.       Access.         3. Ensure you can demonstrate compliance with the Smoke and Carbon Monoxide (Amendment) Regulations 2022       Further meeting scheduled         4. Ensure the following items are addressed as part of policy, procedure and process map development:       Image: Compliance with the structure and process map development:         • End-to-end access process.       • Managing remedial actions.         • New tenant checks to ensure they arrange turn on       • New tenant checks						
buildings served by a communal boiler.       • Further meeting scheduled for 14/11 to identify required updates to Process Mapping         3. Ensure you can demonstrate compliance with the Smoke and Carbon Monoxide (Amendment) Regulations 2022       • Ensure the following items are addressed as part of policy, procedure and process map development:       • End-to-end access or process.         • End-to-end access or process.       • Managing remedial actions.       • New tenant checks to ensure they arrange turn on	2.					
communal boller.       for 14/11 to identify required updates to Process Mapping         3. Ensure you can demonstrate compliance with the Smoke and Carbon Monoxide (Amendment) Regulations 2022       identify the Smoke and Carbon Monoxide (Amendment) Regulations 2022         4. Ensure the following items are addressed as part of policy, procedure and process map development:       identify the Smoke addressed as process.         • End-to-end access process.       • Managing remedial actions.         • New tenant checks to ensure they arrange turn on       • New tenant checks						
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3. Ensure you can demonstrate compliance with the Smoke and Carbon Monoxide (Amendment) Regulations 2022		communal boiler.				
demonstrate       compliance with the         Smoke and Carbon       Monoxide         (Amendment)       Regulations 2022         4. Ensure the following       items are addressed as         part of policy,       procedure and process         map development:       .         Managing remedial       actions.         New tenant checks       to ensure they         New tenant checks       to ensure they		-	updates to Process Mapping			
compliance with the Smoke and Carbon Monoxide (Amendment) Regulations 2022       A         4. Ensure the following items are addressed as part of policy, procedure and process map development:       A         • End-to-end access process.       • Managing remedial actions.       • New tenant checks to ensure they arrange turn on	3.	-				
Smoke and Carbon Monoxide (Amendment) Regulations 2022       Regulations 2022         4. Ensure the following items are addressed as part of policy, procedure and process map development:       Image: Construction of the second						
Monoxide (Amendment) Regulations 2022 4. Ensure the following items are addressed as part of policy, procedure and process map development: • End-to-end access process. • Managing remedial actions. • New tenant checks to ensure they arrange turn on						
(Amendment) Regulations 2022       Ensure the following items are addressed as part of policy, procedure and process map development:       Image: Comparison of the comparison of						
Regulations 2022   4. Ensure the following items are addressed as part of policy, procedure and process map development:   • End-to-end access process.   • Managing remedial actions.   • New tenant checks to ensure they arrange turn on						
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<ul> <li>items are addressed as part of policy, procedure and process map development:</li> <li>End-to-end access process.</li> <li>Managing remedial actions.</li> <li>New tenant checks to ensure they arrange turn on</li> </ul>		Regulations 2022				
<ul> <li>items are addressed as part of policy, procedure and process map development:</li> <li>End-to-end access process.</li> <li>Managing remedial actions.</li> <li>New tenant checks to ensure they arrange turn on</li> </ul>	1	Ensure the following				
part of policy,   procedure and process   map development:       • End-to-end access   process.   • Managing remedial   actions.   • New tenant checks   to ensure they   arrange turn on						
<ul> <li>procedure and process map development:</li> <li>End-to-end access process.</li> <li>Managing remedial actions.</li> <li>New tenant checks to ensure they arrange turn on</li> </ul>						
<ul> <li>map development:</li> <li>End-to-end access process.</li> <li>Managing remedial actions.</li> <li>New tenant checks to ensure they arrange turn on</li> </ul>						
<ul> <li>End-to-end access process.</li> <li>Managing remedial actions.</li> <li>New tenant checks to ensure they arrange turn on</li> </ul>						
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<ul> <li>New tenant checks to ensure they arrange turn on</li> </ul>						
to ensure they arrange turn on						
arrange turn on						
and test visits.		and test visits.				
Checks on						
properties that are						
not currently						
connected to the		-				
gas mains						
networks.		_				

	<ul> <li>Compliance with Dangerous Substances and Explosive Atmosphere Regulations 2002 through risk assessments (where necessary).</li> </ul>						
4.2	Recommendation 21 – Electrical safety:		SH	CR PS/DL	High	31.10.24	
	<ol> <li>Establish a catch-up programme to address the non-compliant properties that do not have a valid test certificate dated within the last five years.</li> <li>Ensure the following items are addressed as part of policy, procedure and process map development:</li> </ol>						
	<ul> <li>End-to-end access process. Managing remedial actions.</li> </ul>						
	<ul> <li>Ensuring Active H captures reinspection dates less than five years (as recommended by the competent person)</li> </ul>						

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4.3	Recommendation 22 – Fire safety: 1. Complete all outstanding fire risk assessments (FRAs) in line with the fire risk assessor's recommended reassessment frequency.	<ul> <li>Person engaged to carry out fire door checks</li> <li>Fire Safety team undergoing review of FRA and appropriate actions</li> <li>Housing site staff carry out daily inspections</li> <li>Point 2 has been completed</li> </ul>	SP	SH AM CR LB PS FJQ	Critical	31/01/24	
	<ol> <li>Extract all FRA actions into an appropriate monitoring platform to accurately track the completion of each action. Record who the actions have been allocated to, action priorities and timeframes, completion dates and supporting evidence (postinspections, certification, before/after photographs, etc.).</li> <li>Ensure you can demonstrate</li> </ol>						
	compliance with the Fire Safety (England) Regulations 2022, including undertaking fire door checks.						

Appendix 2	
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	4. Consider undertaking Type 3 FRAs to all properties as this provides a more detailed understanding						
	by assessing a sample of homes within each block.						
	<ol> <li>Ensure the following items are addressed as part of policy, procedure and process map development:</li> </ol>						
	<ul> <li>Management and reporting of periodic checks on fire safety equipment.</li> </ul>						
	<ul> <li>Housing management issues that impact on fire safety, such as hoarding and allocations.</li> </ul>						
	<ul> <li>Person centred fire risk assessments. Incident management, internal investigation and responding to property fires and near misses. Liaison with the local fire and rescue service</li> </ul>						
4.4	Recommendation 23 – Asbestos Management:		SH	CR PS/DL FJQ	Medium	31.10.24	

	1. Undertake all					
	outstanding					
	reinspection surveys on					
	your communal blocks					
	to ensure asbestos					
	containing materials are					
	being monitored and					
	managed appropriately.					
	Ensure this is followed					
	by a regular, risk-based					
	reinspection					
	programme, with the					
	frequency determined					
	in agreement with the					
	competent person.					
	2. Ensure the following					
	items are addressed as					
	part of policy,					
	procedure and process					
	map development:					
	Establish Appointed					
	Person and Deputy					
	Appointed Person roles					
	(ensuring they are					
	appropriately qualified).					
	Develop a fit for					
	purpose asbestos					
	management plan.					
	Use of priority     assessment scores and					
	material assessment					
	scores to determine the					
	risk of an asbestos item.					
4.5	Recommendation 24 –	SH	CR	Medium	30.06.2024	
4.3		л		weulum	50.00.2024	
	Water Hygiene:		PS/DL			

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	<ol> <li>Undertake all outstanding legionella risk assessments.</li> </ol>			
	2. Ensure written schemes of control are documented to provide guidance on how to manage and monitor the risks identified within the legionella risk assessments.			
	<ol> <li>Ensure the following items are addressed as part of policy, procedure and process map development:</li> </ol>			
	<ul> <li>Establish Responsible Person and Deputy Responsible Person roles (ensuring they are appropriately qualified).</li> </ul>			
	<ul> <li>Managing water hygiene in domestic properties – adopting a practical and proportionate approach.</li> </ul>			
	<ul> <li>Managing water hygiene void properties (considering the void standard, removing high risk installations, system</li> </ul>			

	flushing, replacing shower heads, etc.)						
4.6	<ul> <li>Recommendation 25 - Lift Safety:</li> <li>1. Review all thorough examination remedial actions and ensure they are completed.</li> <li>2. Ensure the following items are addressed as part of policy, procedure and process map development:</li> <li>Establish a formal process for notifying the compliance team of new domestic lifts installations.</li> <li>Managing remedial action</li> </ul>	<ul> <li>08.11 Ongoing dialogue with Contractor undertaking LOLER Inspections.</li> <li>08.11 Initial data extracted from Contractor web portal.</li> </ul>	SH	None	High	31.03.24	
5.2	Recommendation 1 – Building registration: Any higher-risk buildings identified following completion of the wider data validation exercise should be registered with the Building Safety Regulator	<ul> <li>Seven higher-risk buildings registered with the BSR.</li> <li>An identified outcome of the data validation process.</li> </ul>	SP	PS SH	Critical	31.03.24	

5.2	Recommendation 2 – Building safety cases and reports: Establish and implement an appropriate infrastructure around property and building safety compliance, which includes, an effective assurance framework, defining roles and responsibilities and implementing and documenting supporting policies and procedures. This will allow the safety case and safety case report development project to resume and will include documenting a safety management system and building risk assessment.	<ul> <li>Pennington commissioned to prepare draft building safety cases based on information being supplied.</li> <li>Daily safety inspections undertaken by housing teams on site</li> </ul>	Pennington Consultants	SP	LB CR AM	High	31.03.24	
5.2	Recommendation 3 – Golden thread:			SP	LB	High	31.03.24	
	Document the approach and commitment to delivering golden thread principles for all higher-risk buildings.							
	This should include what information will be held,							

	what systems will be used, how one version of the truth will be maintained, and how digital information will be accessed, managed and shared to support ongoing reviews of the safety case.							
5.2	Recommendation 4 – Mandatory occurrence reporting: Develop a mandatory occurrence reporting procedure that captures the principles of reporting and recording safety occurrences as intended by the Act.	<ul> <li>Work with AssessNet to add pilot to existing system- initial idea completed 10.10.23. Meeting externally 2.11.23</li> <li>Follow up meeting booked for 17.11.23</li> <li>External focus group to commence 01.24</li> </ul>	• Pennington Consultants quoted at £2,145.00	FIQ	N/A	High	31.07.24	
5.2	Recommendation 5 – Residents' engagement strategies: Develop building specific residents' engagement strategies for your higher-			SP	NC CR LB	High	March 2024	

	risk buildings that include, tenancy management arrangements, allocations, how residents will be involved in decision-making around building safety risks and how they can access safety information.						
5.2	Recommendation 6 – Complaints procedure: Either develop a separate complaints procedure or ensure the existing generic procedure is updated to ensure that WDC can satisfy itself that building safety issues have been resolved (for example, taking action to minimise the possibility of recurrence, ensuring there is no impact on the risk profile of the building or updating the building risk assessment and safety case).	<ul> <li>Draft policy out for consultation with senior officer</li> <li>Recruitment commenced for a corporate complaints manager</li> </ul>	GL	LB AMo	High	March 2024	
5.2	Recommendation 7 – Measuring performance:		SH	AM PS	Medium	30.04.24	

Develop performance				
measures and assurance				
reporting, in line with the				
above, to enable effective				
oversight to ensure building				
safety obligations are being				
achieved.				