## Highlight Report No. 2 18th January 2023

Period Covered: 8 December 2023 to 18 January 2024

## **Executive summary:**

- 1. Of the 32 individual recommendations, 6 are complete on time, 21 are underway with estimated percentage completion shown below, and 5 are yet to start (and were not expected to have started at this stage).
- 2. The Target Date for Recommendation 17 has been extended at the request of the Head of Finnace, as Lead Officer.
- 3. Specialist Leads for Fire Safety and Building safety are in full operation and specifically and both have already proved invaluable with their technical and regulatory expertise to review and update existing Fire Risk Assessments.
- 4. A Project Manager has been appointed and will start towards the end of January.
- 5. Training now completed for SLT / Cabinet and Asset Compliance Committee.
- 6. Pennington have produced a proposal for data validation and work is underway this month.
- 7. The Regulator of Social Housing will meet with the Council on 19<sup>th</sup> January.
- 8. The Risk Register has been updated, no change to existing risks but two additional risks around refresher training and financial risk have been added.
- 9. The Compliance Action Team is scheduled to meet each month to look back at matters arising from Compliance Board and to plan documents needed for the next meeting of the Board.
- 10. The next meeting of the Compliance Board is on 14<sup>th</sup> February.

## **Compliance Roadmap – Cross Cutting Recommendations**

Programme: The current estimated date to achieve full compliance with the Action Plan is 31 October 2024

Key Deliverables	Priority	Target Date	Revised Target Date	Lead Officer	(Previous report in brackets)	Completion Date	Status	Notes
Recommendation 1 – Governance and assurance structure:	Critical	09.11.23	09.11.23	DK	100%	09.11.23	Complete	Compliance Board and Asset Compliance Committee

Recommendation 2 – Compliance awareness session:	High	22.12.23	22.12.23	DK	100% (90%)	21.12.23	On track	Course completed for SLT & Cabinet on the 29.11.2023.  Course completed for the Asset Compliance Committee – 21  December 2023
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:  Legal and regulatory obligations, now and in the future  Your overall objectives for property compliance, building safety and resident safety.  What actions need to be delivered to achieve these objectives.  How you will demonstrate that these actions are deliverable.	High	30.06.24	30.06.24	SP	15% (10%)		On track	Pennington Consultants quoted to assist and advise in policy development.  Fire Safety policy (including strategy) developed, through consultation and ready for sign-off.  Both Fire Safety lead and Building Safety lead are tasked with developing a building safety strategy and Pennington engaged to assist in this process
Recommendation 4 – Fire Safety Group:  Broaden the scope of the existing Fire Safety Group to have full oversight of all legal fire and building safety requirements.	High	09.11.23	09.11.23	LB	100%	19.10.23	Complete	Terms of Reference Drafted.  Draft TOR circulated for comment.  Discussed and agreed TOR at Fire Safety Group 19/10/23.  Saved on Teams channel for R04

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.  Recommendation 5 – Data Validation:  Undertake a data validation exercise that is coordinated across all compliance areas to gain assurance around all property assets, compliance programmes and records:  Download the full asset list from your parent management system into a data validation workbook.  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.  Record evidence-based reasons for properties not required on each programme.  Validate a sample of compliance records to ensure they are valid and in date.  Quantify compliance gaps to develop a plan to resolve them.	Critical	30.06.24	30.06.24	SH	30% (10%)	On Track	This action is underway with a clearer view on relevant data sets. Meeting 29/11/23 - Established as a weekly meeting. Agreed methods for tracking actions, progress, and timeline for delivery. Initial 'catch all' query presented and discussed. Agreed a sufficient foundation for quantifying properties and associated areas of Compliance. This is now the temporary base, (ahead of formalised published reports) for reporting current position with opportunity for further development to cross validate with other possible data points, (supported by actions in other recommendations)  Looking into viability of Database Functions to simplify the query for reporting and exploring report output options.  All the above is available for review in detail on dedicated TEAMS channel for this recommendation.  Pennington to provide criteria for data validation to achieve compliance received 30/11. Internal project meeting on 6/12 to review and comment ready for response required by 13/12  First project initiation meeting completed on 05/01/24 with Pennington.
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18m+) and the smoke and carbon								
monoxide alarm programmes.								
Follow the above exercise with								
regular, documented validation to								
ensure asset and compliance data								
remains up to date.								
Recommendation 6 – Active H								
configuration:								Attribute configuration underway and supporting
comguration.					30%			Recommendation 5 data validation.
		20.06.24	20.00.24	611			0 -	Recommendation 5 data validation.
Configure Active H to record the	High	30.06.24	30.06.24	SH	(0%)		On Track	
correct compliance programme data								
and provide appropriate reporting								
outputs.								
Recommendation 7 – Managing								Existing FRA actions now all in centralised spreadsheet. Ability to
follow-up actions:								prioritise in relation to property, severity, department etc.
								Completed actions to be updated in spreadsheet, with completion
Implement a process for tracking all								date added. Comments to be added to outstanding actions.
actions deriving from each of your					10%			
compliance programmes. You should	High	31.10.24	31.10.24	SH			On Track	Work already undertaken with ICT on development of the
consider and agree: the platform for		02.20.2	02.20.2	<b>.</b>	(10%)		011 11 don	Contractor Web Portal over the last 12 months which supports this
recording actions, where the process								Recommendation. The work done to-date is currently in TEST
can be automated, allocation, quality								·
								pending Acceptance Testing.
checks, evidence of completion and								
reporting.								
Recommendation 8 – Changes to asset								Not started as dependent on <u>progress</u> with Recommendation 5
and programme lists:								and medium priority. Target date to start 01/02/2024
Formalise and document the process								
for adding, removing or making								
changes to properties on Active H,							Not	
including who has authority to do so.	Medium	31.03.24	31.03.24	SH	0%		Started	
3								
Ensure there is a clear audit trail of								
uploading and setting attributes against								
each property and quality assurance								
checks to ensure each property is on								
the correct compliance programme.								

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).	Critical	31.12.23	31.12.23	SP	100%	27.11.23	Complete	Charles Hahn appointed as Operational Lead for Fire Safety – started 27.11.23
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 communications with 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	Critical	30.11.23	30.11.23	SP	100%	07.12.23	Complete	Richard Barratt appointed Building Safety Lead – started 07.12.23
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	High	31.10.24	31.10.24	SH	40% (25%)		On Track	Progress on this action is also detailed as part of Recommendation 5.  Various output options being considered with work being done on simplifying and providing a consistent foundation to queries with database functions.  Possible need to extend due date if opportunities to develop reports beyond Recommendation scope present themselves.  15/01 - Compliance Dashboard Report and Summary have been updated substantially since last Highlight report. Snapshots

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 presented in an easy to read format. Use our compliance scorecard examples as a benchmark for current best practice.								summaries now possible with conditional formatting of performance against historical snapshots.
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).	High	31/01/24	31.01.24	SP	100% (5%)	16.11.24	Complete	Facilitated session held on 16th January 2024, led by the specialist Fire and Building Safety leads. Gap analysis identified and responsibility for providing / updating policies, KPIs, contractor competencies etc.
Recommendation 13 – Process maps & procedures:  Once the policies have been approved, develop standalone procedure	High	31.09.24	31.09.24	SP	0%		Not Started	Pennington Consultants quoted for consultancy. Links to Recommendation 12

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.							
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Recommendation 14 – Competence &							Still awaiting national Guidance on development of competence
Training matrix:							matrix. Not due until Spring 2024- some now emerging but work
Truming matrix.							continues based on Best Practice/external discussions.
Develop a training reativity and sife the							Required competency Levels created- subject to consultation (initial
Develop a training matrix to specify the							
training, competence and qualification							stages of this arranged)
requirements for all employees							
responsible for oversight and delivery							Competence Matrix skeleton created subject to consultation (initial
of compliance and building safety				510	55%		stages of this arranged)
programmes.	High	31.03.24	31.03.24	FJQ		In	
					(5%)	progress	Required training courses identified in most cases but two training
This will identify gaps and ensure					(3,5)		courses will need developing (one internal, one external)
training and competence is kept up to							Courses will need developing (one internal) one externally
date.							
Any gaps should be addressed by							
undertaking appropriate qualifications							
within appropriate timeframes.							
Recommendation 15 – Compliance and							
building safety refresher training:							
The Compliance Team should						<b>A.</b> .	
undertake refresher training that	Medium	30.6.24	30.6.24	SH	0%	Not	
covers all compliance areas to refresh						Started	
their knowledge and ensure they							
remain up to date with the latest							
· ·							
legislation and obligations.							

Recommendation 16 – Contract management:  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 changes to staff, and ensure evidence is provided.  Undertake regular, documented contractor competency checks (at least annually).  Migrate data and records from contractors' systems to Active H to reestablish full control, ownership and accountability of all compliance programme data to ensure programmes are driven by WDC.	Medium	31.03.24	31.03.24	SH	0%	Not Started	Will develop with Fire and Building Safety Leads to develop a framework for contractor performance meetings with standardised document format.  Expected to be on target
Recommendation 17 – 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 internal auditor has the required levels of competence and knowledge of legal, regulatory and best practice compliance obligations to provide a meaningful assurance report with appropriate assurance ratings.	Medium	30.01.24	29.02.24	AR	30% (30%)		Part 1 Response  The need for specific themed compliance audits (covering both Corporate and HRA properties) had already been identified and the strategic plan, which had been approved by the (then) Chair of the Audit and Standards Committee in April 2023, includes audits against 6 of the 7 identified areas (Fire Safety Compliance (2023/24), Asbestos Management and Legionella Management (both 24/25), Lifts and Lifting Equipment, and Gas and Electrical Safety (both 25/26)). The one area that does not have a specific audit is building safety — we have an audit of Fire Safety and Prevention Contracts included in this year as well, but in the (draft) brief, there is specific reference to the fact that Pennington's are doing work in the area of Building Safety Cases, so these were omitted from the scope of the audit, with assurance to be placed on their work.  The planned audits set out above will again be included in the strategic plan for 2024/25 onwards (assuming that no revisions are

							agreed as part of the discussions with individual service areas), with the new plan being reported to Audit and Standards in March (date TBC).  The scope of the audits will be agreed at the start of each audit, with assurance being taken from any extra work undertaken by external bodies on these seven areas (see part 2), with any actions identified by them being followed up to ensure that non-compliance with legislation is being addressed.  (Nb - It should be noted that we were not asked for our plans as part of the review, just copies of specific reports undertaken within the last two years and, as with the current Fire Safety and Prevention Contracts audit, there may have been other reports that touched on areas of compliance.)  Target Date — 1 April (for Strategic Plan to be approved by A&S). Dates for specific compliance audits contained within response. Audit plan is in draft stage currently.  Part 2 Response  Specific support will be commissioned (Audit with steer by assets), with the required level of specialist technical expertise and knowledge of legal regulatory and best practice compliance obligations to provide
							legal regulatory and best practice compliance obligations to provide the necessary assurance across all 7 compliance areas. This will form part of the evidence base from which Internal Audit can complete their specific themed compliance audits (as addressed in part 1) and be reflected within the assurance reports from which assurance ratings are provided.  Target date revised to reflect start of Tender exercise – not full
							completion of task. Delay due to staff absences.
Recommendation 18 – External audit:							Work with Fire and Building Safety Leads to develop processes and to develop third party auditing. Procurement information being
Implement 100 per cent desktop checks of compliance records to provide assurance that certification has been	High	31.05.24	31.05.24	SP	25% (10%)	In progress	collated with a view to contractor selection via a suitable framework.
completed correctly (for example, nine- point check of gas safety records) and							

follow-up works are actioned within an appropriate timeframe.  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.							
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.	Medium	30.06.24	30.06.24	NC	20%	In Progress	A survey has been developed which will be issued to all housing tenants end December/early January.  The results of this will be used to inform the Strategy.  The results will also be used as a basis for identifying hard to reach groups and how to consistently reach them.  Regular comms with tenants starting with their newsletter issued in December, which will feature an article about the audit and the action plan.
Recommendation 20 – Gas and heating safety:  Implement checks to ensure tenants are receiving LGSRs within 28 days of the service.	High	30.06.24	30.06.24	SH	5% (5%)	In Progress	Meeting on 10/10 to review existing no access process, existing policy and procedure.  2009 policy and procedure identified, walk through of existing HPM (ActiveH Case Processing) for Gas Safety No Access.  Meeting on 14/11 identify required updates to Process Mapping, follow up meeting to be arranged January 2024

Display LGSRs in communal areas of buildings served by a communal boiler.  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 process.  Managing remedial actions.  New tenant checks to ensure they arrange turn on and test visits.  Checks on properties that are not currently connected to the gas mains networks.  Compliance with Dangerous Substances and Explosive Atmosphere Regulations 2002 through risk assessments (where necessary).							
Recommendation 21 – Electrical safety:  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.  Ensure the following items are addressed as part of policy, procedure and process map development:	High	31.10.24	31.10.24	SH	10% (10%)	In Progress	232 properties have now been identified (05/12) as recorded not having an in-date certificate in the housing database, (ActiveH). We are establishing with the Contractor whether data exists and are already completed before raising planned programme of works to rectify.  In addition, we have 109 (05/12) missing EICR's from new builds according to ActiveH – Lead Officer to liaise with Housing Development and whether they can provide or obtain from the Developer.  Attribute updated in ActiveH to accommodate new data, (assisting with Recommendation 5, 6, 11 and General Recommendation 7).

End-to-end access process. Managing remedial actions.  Ensuring Active H captures reinspection dates less than five years (as recommended by the competent person)  Recommendation 22 – Fire safety:							Additional person engaged and trained to carry out fire door checks - fixed term to June 2024 and will be reviewed.
Complete all outstanding fire risk assessments (FRAs) in line with the fire risk assessor's recommended reassessment frequency.  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 (post inspections, certification, before/after photographs, etc.).  Ensure you can demonstrate compliance with the Fire Safety (England) Regulations 2022, including undertaking fire door checks.  Consider undertaking Type 3 FRAs to all properties as this provides a more detailed understanding by assessing a sample of homes within each block.  Ensure the following items are addressed as part of policy, procedure and process map development:	Critical	31.04.24	31.04.24	SP	10% (10%)	In Progress	Fire safety lead appointed and joining a review of existing FRA (including accuracy and appropriateness) and recommended actions which, if confirmed, have been put into an appropriate monitoring platform (point 2)  New Fire Risk Assessments for all medium/high rise properties commissioned by Housing.  Housing site staff carry out daily inspections of high rise and weekly of medium rise.  Fire Safety Lead, Building Safety Lead and Health & Safety Manager developing policy, procedure, and process map plus new Fire Safety (and building safety) Policy/ Strategy (see recommendation 3)- which includes recommendation to undertake type 4 FRAs and consideration of all other points recommended.

Management and reporting of periodic checks on fire safety equipment.							
Housing management issues that							
impact on fire safety, such as hoarding							
and allocations.							
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							
Recommendation 23 – Asbestos							
Management:							
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.							
Ensure the following items are	Medium	31.10.24	31.10.24	SH	0%	Not	
addressed as part of policy, procedure						Started	
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.							

Recommendation 24 – Water Hygiene:							New Contractor is currently reviewing existing Risk Assessments
Undertake all outstanding legionella risk assessments.							
Ensure written schemes of control are documented to provide guidance on how to manage and monitor the risks identified within the legionella risk assessments.							
Ensure the following items are addressed as part of policy, procedure and process map development:	Medium	30.06.24	30.06.24	SH	5%	In	
Establish Responsible Person and Deputy Responsible Person roles (ensuring they are appropriately qualified).					(5%)	Progress	
Managing water hygiene in domestic properties – adopting a practical and proportionate approach.							
Managing water hygiene void properties (considering the void standard, removing high risk installations, system flushing, replacing shower heads, etc.)							
Recommendation 25 – Lift Safety:							ActiveH up to date. New attribute created and populated with information from Contractor.
Review all thorough examination remedial actions and ensure they are completed.	High	31.03.24	31.03.24	SH	60%	In Progress	We will finalise reporting and publishing of reports from ActiveH. We will be meeting with Contractor to discuss how we 'push' works to them, how its completed and data returned to ActiveH with automation.

Ensure the following items are addressed as part of policy, procedure and process map development:  Establish a formal process for notifying the compliance team of new domestic lifts installations.  Managing remedial action							Building Safety Lead involvement with Corporate Insurance Officer
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	Critical	31.03.24	31.03.24	SP	95% (95%)	In Progress	Seven higher-risk buildings registered with the Building Safety Regulator.  An identified outcome of the data validation process to confirm final numbers to be registered.
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.	High	31.03.24	31.03.24	SP	10% (10%)	In Progress	
Recommendation 3 – Golden thread:	High	31.03.24	31.03.24	SP	10%	In Progress	Linked to Recommendation 2, above and will form part of the Building Safety Cases.

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.  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.	High	31.07.24	31.07.24	FJQ	50% (50%)		Existing owned software has been adjusted to incorporate the mandatory reporting as far as is presently specified. More details to be announced by HMG in 2024
Recommendation 5 – Residents' engagement strategies:  Develop building specific residents' engagement strategies for your higherrisk 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.	High	March 2024	March 2024	SP	15% (10%)		Lead officer to engage with Landlord Services Manager
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	High	March 2024	March 2024	GL	50% (25%)	On Track	There is an agreed timetable for adoption of a new complaints policy and procedure which is as follows:  • Draft Cabinet approved by Chief Exec/Deputy & Head of Service, Programme Director for Climate Change, Finance, Legal Services & Procurement (when considered appropriate), Section 151 Officer, Monitoring Officer 9/1/2024.  • Revisions and Final Draft for 11 January 2024

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>Publish SLT Agenda 15 Jan 2024</li> <li>Chief Exec / Section 151 Officer / Monitoring Officer / Programme Director for Climate Change to meet to discuss reports and advise author of any changes; and PH to provide comments by this time. 16/01/2024</li> <li>SLT agree final policy 18 Jan 2024</li> <li>The draft report to be sent to Committee Services by 10am. Committee Services produce &amp; send draft agenda to Chief Exec, Monitoring Officer, Programme Director for Climate Change &amp; Cabinet &amp; Group Leaders 18/01/2024.</li> <li>Chief Exec/Monitoring Officer/Programme Director for Climate Change/Cabinet briefing followed by an LCG meeting to approve reports and feedback to author. 22/01/2024</li> <li>Final Report to Committee Services by 10:00am 25/01/2024</li> <li>Despatch of Agenda 29/01/2024</li> <li>Date of Overview &amp; Scrutiny Committee 06/02/2024</li> <li>Date of Cabinet meeting 08/02/2024</li> <li>To date we are on track with that delivery timeline.</li> <li>A new officer is being appointed for taking responsibility for complaints across the Council which the post is due to be advertised this week.</li> </ul>
Recommendation 7 – Measuring performance:  Develop performance measures and assurance reporting, in line with the above, to enable effective oversight to ensure building safety obligations are being achieved.	Medium	30.04.24	30.04.24	SH	10%	In Progres	Progress on this action is also detailed as part of Recommendation 5.  Various output options being considered with work being done on simplifying and providing a consistent foundation to queries with database functions.  Possible need to extend due date if opportunities to develop reports beyond Recommendation scope present themselves.