

Highlight Report No. 9

11th of September 2024

Period Covered: 9 July 2024 to 10 September 2024

Executive summary:

1. Of the 33 individual recommendations, 14 are complete on time and 19 are underway. All Recommendations have now begun. They are all tracking well.
2. As per the midpoint project review by Pennington Choices, some items that had been “Completed” have been changed to “In Progress”. These items are specifically Recommendation 5 (Data Validation), Building Safety Recommendation 5 (Resident Engagement Strategies), and Building Safety Recommendation 6 (Complaints Procedure). Updates can be found within each specific item.
3. Target date for Recommendation 5 (Data Validation), Building Safety Recommendation 2 (Building Safety Cases), Building Safety Recommendation 3 (Building Safety Cases) has been revised. This change does have an impact on the end date (31.10.24) of the project. Based on the work that needs to be completed for these recommendations, we are now looking to complete the project 31.03.25.
4. All recommendations are still being tracked in Monday.com.
5. Training was completed for completed for SLT / Cabinet and Asset Compliance Committee at the end of 2023. We are aware that there has been a change to the Asset Compliance Committee and will await to see if there are any additional changes due to the election in July 2024. We will then organise training for any new councillors.
6. The Risk Register has been reviewed and risks have been discussed and currently reflect progress of work. There has been no addition of new risks or change to existing risks.
7. The Compliance Project Team is meeting weekly to discuss all remaining actions and look back at matters arising from Compliance Board and to plan documents needed for the next meeting of the Board.
8. The next meeting of the Compliance Board will be on the second Wednesday in two months' time (13th November 2024).

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	Progress (Previous report in brackets)	Completion Date	Status	Notes
Recommendation 1 – Governance and assurance structure:	Critical	09.11.23	09.11.23	DK	100% (100%)	09.11.23	Complete	1.1) Compliance Board and Asset Compliance Committee
Recommendation 2 – Compliance awareness session:	High	22.12.23	22.12.23	DK	100% (90%)	21.12.23	Complete	2.1) Course completed for SLT & Cabinet on the 29.11.2023. 2.2) Course completed for the Asset Compliance Committee – 21 December 2023
<p>Recommendation 3 – Compliance and building safety strategy:</p> <p>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:</p> <p>Legal and regulatory obligations, now and in the future</p> <p>Your overall objectives for property compliance, building safety and resident safety.</p>	High	30.06.24	19.07.24	SP	100% (95%)	08.07.24	Complete	<p>3.1) Pennington Consultants quoted to assist and advise in policy development.</p> <p>3.2) Fire Safety policy (including strategy) developed, through consultation and ready for sign-off.</p> <p>3.3) Both Fire Safety lead and Building Safety lead are tasked with developing a building safety strategy and Pennington engaged to assist in this process. Workshop for this will be held on the 19th of March 2024.</p> <p>3.4) Workshop with Pennington was held on March 19th to begin the development of the strategy.</p> <p>3.5) Draft policy has been supplied for review. Amendments and comments from key team members is required by 11/04/2024.</p> <p>3.6) Target date revised to coincide with the last working day of the month and to consider internal approvals</p> <p>3.7) Strategy has been received from Pennington Choices. Reviewing to verify if EIA is required before going for final</p>

<p>What actions need to be delivered to achieve these objectives.</p> <p>How you will demonstrate that these actions are deliverable.</p>								<p>review prior to approval by Compliance Board and Asset Compliance Committee.</p> <p>3.8) Date has been changed to reflect minor changes requested by Asset Compliance Committee. These changes required information from the contractor, and once received the strategy can be signed.</p> <p>3.9) The action plan has been separated from the policy. The items that pertain to compliance will be tracked in a separate Monday board. The item relating to cladding is a much larger project that requires additional input and planning. Updates will be given to Compliance Board and Asset Compliance Committee separately on this item.</p> <p>4.0) The strategy will be sent for signature and should be completed by the 19.07.24.</p>
<p>Recommendation 4 – Fire Safety Group:</p> <p>Broaden the scope of the existing Fire Safety Group to have full oversight of all legal fire and building safety requirements.</p> <p>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.</p>	High	09.11.23	09.11.23	LB	100% (100%)	19.10.23	Complete	<p>4.1) Terms of Reference Drafted.</p> <p>4.2) Draft TOR circulated for comment.</p> <p>4.3) Discussed and agreed TOR at Fire Safety Group 19/10/23.</p> <p>4.4) Saved on Teams channel for R04</p>
<p>Recommendation 5 – Data Validation:</p> <p>Undertake a data validation exercise that is coordinated across all compliance areas to gain assurance around all</p>	Critical	30.06.24	31.03.25	SH	80% (100%)		In Progress	<p>Internal:</p> <p>5.1) Download full asset list – complete 03/11</p> <p>5.2) Create Validation Workbook – complete 03/11</p> <p>The database query is complete in that brings into the validation workbook all required data, however the query will</p>

<p>property assets, compliance programmes and records:</p> <p>Download the full asset list from your parent management system into a data validation workbook.</p> <p>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.</p> <p>Record evidence-based reasons for properties not required on each programme.</p> <p>Validate a sample of compliance records to ensure they are valid and in date.</p> <p>Quantify compliance gaps to develop a plan to resolve them.</p> <p>Validation should include categorising buildings (11+ and 18m+) and the smoke and carbon monoxide alarm programmes.</p>								<p>require ongoing finessing as we work on interdependent recommendations such as R6 and R11</p> <p>5.3) Confirm properties for each compliance area – complete 31/01</p> <p>The count or properties that are subject to a ‘compliance area’ is now accurate and complete with the output related to R11 (Compliance Reporting) now demonstrating the properties confirmed as On-Plan, Off-Plan or where Validation is still required. The validation exercise to confirm <u>status</u> within a ‘compliance area’ is ongoing.</p> <p>5.4) Evidence N/A properties – 75%</p> <p>We are now able to evidence N/A properties having created additional fields within ActiveH to determine this. This work is interdependent with R6 ActiveH Configuration and is driven by the validation exercise above.</p> <p>Currently working to validate, evidence and quantify remaining gaps identified in the reporting.</p> <p>5.5) External (Work with Pennington Choices for third party Data Validation and Assurance): Currently at Stage 3 of their Terms of Reference, Compliance Programme Data. Next meeting 08/02/2024 Data Review Meeting - Completed PC to provide worksheets for Pilot validation exercise by WDC by 09/02 PC to provide list of 300 Assets requiring inspection records to provided back to PC by 09/02 Above data requests to PC required by 18/02</p> <p>5.6) Data Validation output report provided by PC for WDC to review and provide amendments.</p> <p>5.7) Target delivery date has been changed to consider amendments to draft and time to produce final report but is ahead of original date.</p> <p>5.8) The data validation has been completed. Report from Pennington Choices has been received and accepted. Follow on recommendations have been revised and will be actioned.</p>
--	--	--	--	--	--	--	--	---

<p>Follow the above exercise with regular, documented validation to ensure asset and compliance data remains up to date.</p>							<p>These new recommendations will be actioned separately from this project to avoid creep. 5.9) After the mid-point review with Pennington Choices, they will not deem this item to be complete, prior to the follow-on actions from the report being complete. Therefore, this action has been changed to in progress. The new target date has been changed to reflect the work that needs to be completed.</p>
<p>Recommendation 6 – Active H configuration:</p> <p>Configure Active H to record the correct compliance programme data and provide appropriate reporting outputs.</p>	High	30.06.24	28.06.24	SH	100% (53%)	06.06.24 Complete	<p>6.1) Attribute configuration completed for Gas, CO2, EICR, AFD, FRA and LRA. Attribute for LOLER and Occurrences created. Asbestos still outstanding for review and configuration.</p> <p>6.2) Target date revised to coincide with the last working day of the month.</p> <p>6.3) Attributes for the big six have now been configured in ActiveH. These are being reviewed and monitored prior to being set as final.</p> <p>6.4) After review, we are confident that the configuration of ActiveH contains the correct data fields and has all that is required to report on Compliance confidently and competently. This though becomes a BUA item and will continue to be monitored and updated as required.</p>
<p>Recommendation 7 – Managing follow-up actions:</p> <p>Implement a process for tracking all actions deriving from each of your compliance programmes. You should consider and agree: the platform for recording actions, where the process can be automated, allocation, quality checks, evidence of completion and reporting.</p>	High	31.10.24	31.10.24	SH	88% (58%)	In Progress	<p>7.1) 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. Comments to be added to outstanding actions.</p> <p>7.2) 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 User Acceptance Testing, (UAT).</p> <p>7.3) 03/04/24 - The Compliance Manager and (BSL) have implemented a new process with the Heating and Electrical contractors to capture variations identified whilst the operatives are on site. This new process incorporates a financial threshold to ensure that financial controls are in place. The new process will also capture these additional works and record them against the original works order in ActiveH. This new process will be embedded in the new applicable policies.</p> <p>7.4) Gas and electric have a process in place and the follow up actions have been completed. All will be remedied as they appear going forward.</p>

								<p>7.5) The (BSL) and two members of the compliance team are meeting on the 13/06/24 with the appointed contractor (Norse) to discuss and agree a new process for monitoring (LRA) actions through to completion, post inspection and validation.</p> <p>7.6) The (BSL) and two members of the compliance team met with the appointed contractor and agreed a follow up process to complete actions recommended from the (LRS's) The associated follow up action prices are built up against the contract schedule of rates pricing system. The (BSL) also issued a draft (KPI) suite to Norse to monitor and manage completion dates, costs against the contract etc for debate and decision at the next review meeting scheduled for the 06/08/24.</p> <p>7.6.1) The (BSL) Has now scheduled these contract review meetings weekly to monitor and manage progress of the (LRA) actions. 23/08/24 - The contract Administrator issued further work orders to complete (LRA) actions. Awaiting a response from Norse on the (KPI) suite issued by the (BSL)</p> <p>7.7) Electric, Gas, and Lift follow up actions are now being managed through designated policies.</p> <p>7.8) 06/08/24 - The (BSL) and two members of the compliance team met with the contractor (Norse) Compliance team members will now issue a works order per building to the contractor to schedule and complete outstanding actions and align the completion dates with the (LRA) to confirm compliance for each building.</p> <p>7.8.1) 10/09/24 - Weekly review meetings and activities in progress.</p> <p>7.9) 12/09/24 - The (BSL) and compliance Team Leader met with the asbestos surveying consultant (Tersus) to discuss and agree a new process of managing and monitoring actions identified from surveys. These review meetings will now take place weekly.</p>
<p>Recommendation 8 – Changes to asset and programme lists:</p> <p>Formalise and document the process for adding, removing or making changes to properties on Active H, including who has authority to do so.</p>	Medium	31.03.24	30.09.24	SH	73% (64%)		In Progress	<p>8.1) First meeting held on Tuesday 6th February to discuss the creation of new assets in ActiveH, primarily new builds, market acquisitions.</p> <p>8.2) UAT also required on the browser-based Certificate Importer which will greatly assist in the handling of documents/certificates and creation of Attribute records in ActiveH.</p> <p>8.3) Target date has been revised due to work that is being completed on Recommendations 5 and 6.</p> <p>8.4) Updates have been made to ActiveH to recognise new builds pending status.</p>

<p>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.</p>								<p>8.5) Document to outline process and procedures have begun to be developed 8.6) The target date has changed due to illness within the team. Will have other team members work on documentation but require some time for handover.</p>
<p>Recommendation 9 – Operational lead for fire safety:</p> <p>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).</p>	Critical	31.12.23	31.12.23	SP	100% (100%)	27.11.23	Complete	<p>9.1) Charles Hahn appointed as Operational Lead for Fire Safety – started 27.11.23 9.2) On Monday 29/01/24 The Fire Safety Lead decided to pursue a new venture and resigned from his post at (WDC) 9.3) Interviews are taking place on the 7th and 9th of February 2024 with the view of appointing a new Fire Safety Lead. 9.4) Members will be updated at the next meeting. 9.5) Peter Colley appointed Fire Safety Lead – started 04.03.24</p>
<p>Recommendation 10 – Operational lead for building safety:</p> <p>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.</p> <p>Operational duties can be delegated; however, the</p>	Critical	30.11.23	30.11.23	SP	100% (100%)	07.12.23	Complete	<p>10.1) Richard Barratt appointed Building Safety Lead – started 07.12.23</p>

operational lead should have full oversight of all activities through a clear assurance and 'lines of defence' framework								
<p>Recommendation 11 – Compliance reporting:</p> <p>Develop a standalone weekly compliance report that covers the big six compliance areas and addresses the items raised in the report (Section 3.5).</p> <p>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.</p> <p>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.</p>	High	31.10.24	15.08.24	SH	100% (57%)		Complete	<p>11.1) Progress on this action is also detailed as part of Recommendation 5.</p> <p>11.2) 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.</p> <p>11.3) Compliance Dashboard Report and Summary have been updated substantially since last Highlight report. Snapshots summaries now possible with conditional formatting of performance against historical snapshots.</p> <p>11.4) Improvements on the Compliance Dashboard Report and Summary continue. Working towards monthly and quarterly updates.</p> <p>11.5) Upon review from Pennington Choices, they felt that this action was far more complete that we were showing. The dashboard contains the relevant details required and they would deem this item complete. Any other improvements, become business improvement and fall outside of the action item. This would fall outside the scope of the project, so will be taken up outside of this particular project.</p>
<p>Recommendation 12 – Policies</p> <p>The Leadership Team and technical team members should attend a facilitated</p>	High	31.01.24	02.08.24	SP	100% (85%)	06.08.24	Complete	<p>12.1) 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.</p>

<p>session to agree policy principles (obligations, inspection programmes, follow-up works, contractor competencies, KPIs, and so on).</p> <p>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).</p>								<p>12.2) For transparency, Pennington have indicated that they do not consider this recommendation to be complete as they were not invited to facilitate the session (at a cost to the Council). The session was facilitated by the Fire Safety Lead / Building Safety Lead and not Pennington. Discussions will be needed to resolve this issue with Pennington.</p> <p>12.3) Pennington will facilitate a workshop session on 16th April 2024 and provide the policies based on the feedback from this session.</p> <p>12.4) The target date for this item has changed to 14.06.24. The reason is that these dates were originally used if all the recommendations had begun in October. This change reflects the dates provided by Pennington.</p> <p>12.5) Workshop was held on April 16, 2024. Pennington is currently drafting the policies and reviewing the Fire Safety Policy. These will be circulated for WDC review and amendments in early May.</p> <p>12.6) Target date has been revised to consider internal approvals process (Board and Committee approvals).</p> <p>12.7) Draft policies have been provided for review and amendments have been returned.</p> <p>12.8) The revised target date has been amended to take into consideration Board and Committee approval of the policies.</p> <p>12.9) The completion percentage has changed because we revised the completion date but had not added the extra approval steps into the Monday board. This has now been done and is reflecting in the percentage completed.</p> <p>12.10) Policies have been reviewed and completed within the appropriate teams. They will be circulated to Compliance Board for approval on 10.07.24 and then to Asset Compliance Committee on 22.07.24. If approved by both Board and Committee, they will have final sign off by appropriate Officers.</p> <p>12.11) Some formatting to be resolved and final confirmation about resident engagement. Once confirmed, the policies will be approved as is or the due date will be changed to reflect additional timing.</p>
<p>Recommendation 13 – Process maps & procedures:</p> <p>Once the policies have been approved, develop standalone procedure documents and process</p>	High	31.09.24	30.09.24	SP	79% (57%)		In progress	<p>13.1) Pennington Consultants quoted for consultancy. Links to Recommendation 12.</p> <p>13.2) As soon as an individual policy is approved process mapping will commence.</p> <p>13.3) Pennington will also provide a ToR for this piece of work and will be updated accordingly.</p> <p>13.4) The target date for this item will be revised based in Pennington’s workload and once confirmed by their ToR.</p>

<p>maps to support each of your policies.</p> <p>Your procedure documents should clearly outline how each of your service areas are delivered operationally.</p> <p>The process maps should visibly demonstrate the end-to-end process and areas of responsibility for all parties involved.</p>								<p>13.5) Target date revised to coincide with the last working day of the month.</p> <p>13.6) Meeting took place on June 25, 2024 to fill in any remaining gaps in the process mapping. ToR have been received and at the moment, we should be on target to complete the recommendation within the timeframe.</p> <p>13.7) Draft process flows have been received. Currently being reviewed and any amendments will be returned to Pennington within the allotted time.</p> <p>13.8) Upon review, there were no immediate amendments to the process flows. This was confirmed to PC on 26.07.24. They will now be moving on with the procedure documents.</p> <p>13.9) Procedure documents have been received and are being reviewed for comments by WDC.</p>
<p>Recommendation 14 – Competence & Training matrix:</p> <p>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.</p> <p>This will identify gaps and ensure training and competence is kept up to date.</p> <p>Any gaps should be addressed by undertaking appropriate qualifications within appropriate timeframes.</p>	High	31.03.24	31.05.24	SP	100% (91%)	29.05.24	Complete	<p>14.1) Review of current staff training levels and competencies has been completed.</p> <p>14.2) An initial training matrix has been proposed. This will be reviewed.</p> <p>14.3) Target date has been changed to reflect the review that will need to be completed on the initial training matrix that has been produced.</p> <p>14.4) The matrix was presented in the last Compliance Board Committee. A discussion is scheduled with HR to understand how to best implement the matrix, update job descriptions where applicable, and ensure training is followed.</p> <p>14.5) Target date has been changed as FJQ has left and SP is replacing in the interim.</p> <p>14.6) Spreadsheet has been provided with training requirements per person and job title. This will be shared with HR and job descriptions will be updated accordingly. Training will be provided through a rota developed with HR.</p>

<p>Recommendation 15 – Compliance and building safety refresher training:</p> <p>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.</p>	Medium	30.06.24	31.07.24	SH	100% (89%)	04.06.24	Complete	<p>15.1) CORGI (Council for Registered Gas Installers) Offer compliance training across all compliance workstreams (Gas, Electrical, Asbestos, Water hygiene, lifts, Fire safety)</p> <p>15.2) CORGI Have been invited to present their training module to members of the compliance team on the 12th of February.</p> <p>15.3) The CORGI Training model is also supported by approved qualifications. A quotation to provide this training for all staff within the compliance team has been obtained for debate and decision.</p> <p>15.4) The compliance team are currently carrying out an assessment of the compliance courses offered by Corgi.</p> <p>15.5) The compliance team confirmed their choice of training offered by Corgi which was approved by Letrice Thomas from Pennington’s and Steve Partner, Head of Neighbourhood and Assets on the 19/03/24.</p> <p>15.5.1) Five members of Staff have chosen to take (Level 4 VRQ Diploma in Asset and Building Management Compliance)</p> <p>15.5.2) One staff member will take (Level 2 VRQ Award in Asset and Building Compliance Awareness)</p> <p>15.5.3) The Corgi training commence date is to be agreed shortly.</p> <p>15.5.4) The above training from Corgi will commence on the 16th of May for (Level 2) and the 4th of June 24 for (Level 4) These training costs were approved on the 10/04/24 by Darren Knight, Deputy Chief Executive.</p> <p>15.6) Target date has been changed to reflect the need to allow sufficient time for the staff members to begin training.</p> <p>15.7) ASCP (Association of Safety and Compliance Professionals) training is commencing on June 4, 2024</p> <p>15.8) Level 4 VRQ Diploma in Asset and Building Management Compliance: An induction day facilitated by ASCP (Association of Safety and Compliance Professionals) was held on the 4th of June 2024 with members of the compliance team covering the big 6 compliance areas. The course syllabus will be carried out and completed by individual self-assessment assignments and validated by ASCP on completion. Level 2 VRQ Award in Asset and Building Compliance Awareness: This course is a one-day seminar with an assessment covering the big 6 compliance area's. One member of the Compliance Team has completed this on May 21st, ahead of being enrolled on the next available opportunity to start the L4 VRQ Diploma.</p>
--	--------	----------	----------	----	---------------	----------	----------	--

<p>Recommendation 16 – Contract management:</p> <p>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.</p> <p>Undertake regular, documented contractor competency checks (at least annually).</p> <p>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.</p>	Medium	31.03.24	29.11.24	SH	80% (77%)		In Progress	<p>16.1) 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 Richard Barrett (BSL) has started work on this. Mainly around obtaining Contractor accreditations, insurances and competencies. Richard Southey (ICT) has also provided in proof-of-concept browser-based Contractor DMS connected to Contractor records in ActiveH. This requires review and UAT. 16.2) In progress and being developed by the (BSL)</p> <p>16.3) Discussions with all six compliance contractors have taken place and an overview of documents collected to date are detailed below.</p> <ul style="list-style-type: none"> > Insurance > Health and safety policies > Accreditations > Qualifications > Gas safe cards and validation against the gas safe register > Evidence of contractor personal working on the (WDC) contracts. <p>16.4) These documents are currently being validated and are stored in a central database which can be shared in the interim period with the compliance team.</p> <p>16.5) (ICT) Are creating a new contractor document folder within ActiveH to store these documents.</p> <p>16.6) Going forward, all contractors will have an annual compliance check carried out by members of the compliance team.</p>
---	--------	----------	----------	----	--------------	--	-------------	---

							<p>16.7) Discussions are in progress with the contractors who store certification on their own portal and will continue to agree a process of transferring these documents into ActiveH.</p> <p>16.8) ICT Have now developed and completed a contractor folder within ActiveH. The compliance team will now start to transfer each contractor set of documents collected by the (BSL) into the applicable folder.</p> <p>16.9) The (BSL) has instructed the asbestos surveying consultant to forward all new asbestos surveys to the compliance team. The compliance manager will shortly develop and implement a new attribute within ActiveH to post all new surveys against the applicable property.</p> <p>16.10) All asbestos surveys currently held on the asbestos Consultants portal will be transferred to (WDC) on or before the 12/04/24.</p> <p>All these surveys will then be transferred into ActiveH to the applicable property and accessible to all users. All new surveys are now sent in direct to the compliance team.</p> <p>16.10.1) All asbestos surveys have now been transferred into (WDC) ownership and are in progress of being transferred by (ICT) against the applicable property within ActiveH. All new surveys are now issued directly to the (WDC) compliance team.</p> <p>16.11) The Compliance Manager and the (BSL) have agreed to facilitate two workshops on contract management. One for the contract administrators and another for the contractors for debate and decision on a standard appraisal template agenda and cycle of appraisal joint review meetings.</p> <p>16.11.1) This project will now be implemented by the Compliance Manager and the (FSL)</p> <p>16.12) Target date has been changed to reflect time to complete transfers from all contractor portals to ActiveH.</p>
--	--	--	--	--	--	--	--

							<p>16.13) 13/05/24 - (ICT) Have now transferred all asbestos surveys collected from the consultant's portal into the ActiveH document management system for all applicable parties to view.</p> <p>16.14) Template has been created and being reviewed internally.</p>
<p>Recommendation 17 – Internal audit:</p> <p>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.</p> <p>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.</p>	Medium	30.01.24	31.10.24	AR	40% (33%)	In Progress	<p>17.1) 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.)</p> <p>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.</p> <p>17.2) 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 the necessary assurance across all 7</p>

							<p>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.</p> <p>Target date revised to reflect start of Tender exercise – not full completion of task. Delay due to staff absences.</p> <p>The strategic audit plan, which will be presented for approval by Audit & Standards on 27 February 2024, includes a number of different compliance audits to cover the relevant areas.</p> <p>Following consultation with Senior Management as part of the drafting of the strategic audit plan, these audits are currently included within years two and three of the plan in order to ensure that the other actions from this Compliance Roadmap Action Plan have been completed. The work of Internal Audit can then provide assurance that these actions have been addressed appropriately.</p> <p>Where relevant, Internal Audit may seek to appoint external specialist auditors to assist with these reviews.</p> <p>17.3) Due to ongoing change within the Internal Audit team, the process of commissioning the expertise has not yet commenced. However, noting that the support will not be required until year 2 of the current audit plan (1 April 2025 onwards), there is currently minimal risk of this not being in place for when it is required. Awarding contract should be completed by end of the project.</p> <p>17.4) Target date has been changed to reflect time needed to procure third party supplier.</p> <p>17.5) Audit and Procurement team are reviewing frameworks and looking to appoint specialist auditor. Meeting will be taking place in July to confirm specifications and details will be forthcoming after that meeting.</p>
<p>Recommendation 18 – External audit:</p> <p>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</p>	High	31.05.24	30.09.24	SP	77% (65%)	In Progress	<p>18.1) CORGI (Council for Registered Gas Installers) Offer an independent validation service across all six compliance workstreams (Gas, Electrical, Asbestos, Water hygiene, lifts, Fire safety)</p> <p>18.2) CORGI Will report on the outcomes of certification issued to them by (WDC) (Pass or Fail) and have a process for correction with the applicable contractor or consultant who deliver these services.</p>

<p>actioned within an appropriate timeframe.</p> <p>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.</p>								<p>18.3) CORGI Will also carry out a physical post inspection of complete works to ensure that they are compliant with current legislation.</p> <p>18.4) CORGI Have agreed to carry out a presentation on the 12th of February with members of the compliance team.</p> <p>18.5) The (BSL) is liaising with (ICT) and Corgi to coordinate a project plan to analyse the technical resources required and implementation timescales for further debate and decision.</p> <p>18.6) The Corgi independent third-party validation model was discussed at the Compliance and Building Safety Strategy meeting held on the 19/03/24. This model type was approved by Letrice Thomas from Pennington's and Steve Partner, Head of Neighbourhood and Assets. The (BSL) will now follow through with procurement to appoint a supplier asap.</p> <p>18.7) Target date has changed to consider time with ICT and Procurement</p> <p>18.8) ICT have begun to look at an implementation plan for this recommendation.</p> <p>18.9) The Fire Safety Lead has held discussions with procurement, ICT and the contract framework organisation to progress this activity to meeting with the top ranked supplier.</p> <p>18.10) 03/06/24 - The (BSL) A member of WDC's (ICT) team, the Head of Member Services from the framework contract organisation met with the top ranked supplier from the framework contract (Clear Safety Systems) This meeting was to assess their scope of services across the big 6 compliance work streams. The assessment also included the type of their validation system used to independently, collect, validate all completed certification produced by all compliance contractors, consultants, physical post inspections and reporting mechanism.</p> <p>Following this meeting, the framework organisation has now confirmed that Clear Safety Systems would use another third party to validate all certification which does not meet our</p>
---	--	--	--	--	--	--	--	---

								<p>requirements. Therefore, a meeting will now be arranged to meet with the second ranked supplier.</p> <p>18.11) 04/07/24 - Discussions in progress.</p> <p>18.12) The (BSL) has held discussions with the framework organisation (CHIC) and Corgi Technical Services who were the next ranked supplier on the framework contract. All parties have agreed the terms and conditions, and the contract is being prepared to engage Corgi for a three-year period as the framework agreement then expires.</p> <p>18.13) WDC Will procure and own the (TCW) platform and upload the applicable completed compliance certification across the big 6 compliance work streams for Corgi to independently validate and report on the outcomes. Further discussions are required between WDC and Corgi to agree the process, joint key performance indicators and a go live date which will be shared with all applicable parties shortly.</p> <p>18.13.1) 04/09/24 - The (BSL) and the Procurement Supervisor met with (TCW) the supplier that owns the database to independently validate all compliance certification against current legislation, best practice etc. We have agreed to process a 3 + 1 term contract from the framework contract with support from Corgi Technical. This new facility will validate the big 6 compliance certification across all (WDC) properties. A go live date will be confirmed shortly.</p>
<p>Recommendation 19 – resident communications:</p> <p>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.</p>	Medium	30.06.24	28.06.24	NC	100% (73%)	24.06.24	Complete	<p>19.1) A survey has been developed which will be issued to all housing tenants end December/early January.</p> <p>19.2) The results of this will be used to inform the Strategy.</p> <p>19.3) The results will also be used as a basis for identifying hard to reach groups and how to consistently reach them.</p> <p>19.4) Regular comms with tenants starting with their newsletter issued in December, which will feature an article about the audit and the action plan.</p> <p>19.5) Communication Plan being developed</p> <p>19.6) Target date revised to coincide with the last working day of the month.</p> <p>19.7) Resident engagement has been considered through the results of the survey and regular infographics and newsletters are being sent (quarterly). The communications plan continues</p>

<p>This should include consideration of the legal fire and building safety requirements under the Fire Safety (England) Regulations 2022 and Building Safety Act 2022.</p> <p>Also consider how you intend to inform harder to reach groups, such as those without internet access, where English is not their first language, or those with disabilities and impairments.</p>							<p>to be developed and will be complete by the end of June to begin implementation.</p> <p>19.8) Communications plan has been developed and being implemented. This will be updated regularly and will become a BAU item. Plan is in the final documentation folder.</p>
<p>Recommendation 20 – Gas and heating safety:</p> <p>Implement checks to ensure tenants are receiving LGSRs within 28 days of the service.</p> <p>Display LGSRs in communal areas of buildings served by a communal boiler.</p> <p>Ensure you can demonstrate compliance with the Smoke and Carbon Monoxide (Amendment) Regulations 2022</p> <p>Ensure the following items are addressed as part of policy, procedure and process map development:</p> <p>End-to-end access process.</p> <p>Managing remedial actions.</p>	High	30.06.24	30.09.24	SH	51% (44%)	In Progress	<p>20.1) Meeting on 10/10 to review existing no access process, existing policy and procedure.</p> <p>20.2) 2009 policy and procedure identified, walk through of existing HPM (ActiveH Case Processing) for Gas Safety No Access.</p> <p>20.3) Meeting on 14/11 identify required updates to Process Mapping, follow up meeting to be arranged January 2024.</p> <p>20.4) (BSL) has held discussions with heating contractor and a process is to be developed. However, where tenants have an email address the LGSR is emailed to the tenant the day after the annual gas check. A new process is required for those tenants with no email address.</p> <p>At the Asset Compliance Committee meeting held on the 26/02/24 The (BSL) confirmed that tenants who do not have an email facility have their (LGSR) posted out the day after the annual gas safety check/service is carried out. Proof of the post date is then sent by the gas safety contractor to the compliance team. A new attribute has also been implemented within ActiveH that the contractor completes to confirm that the (LGSR) has been issued to the tenant.</p> <p>20.5) A process is also required to display LGSRs in communal areas.</p> <p>At the Asset Compliance Committee meeting held on the 26/02/24 The (BSL) confirmed that (LGSR's) are now in the</p>

<p>New tenant checks to ensure they arrange turn on and test visits.</p> <p>Checks on properties that are not currently connected to the gas mains networks.</p> <p>Compliance with Dangerous Substances and Explosive Atmosphere Regulations 2002 through risk assessments (where necessary).</p>							<p>process of being displayed within all communal areas. This task will be completed by week ending 8th March 2024.</p> <p>20.6) Smoke and carbon monoxide detectors process is currently under review.</p> <p>20.7) Managing remedial actions is currently under review.</p> <p>20.8) New tenant checks are currently under review.</p> <p>20.9) Checks on properties not currently connected to the gas mains are currently under review.</p> <p>20.10) Target date has been revised due to work that is being completed on Recommendations 12 and 13.</p> <p>20.11) LGSRs are now displayed in communal areas of buildings served by a communal boiler. We are aware of tenants who receive a physical copy of their LGSR through a mailing list provided by contractor.</p>
<p>Recommendation 21 – Electrical safety:</p> <p>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.</p> <p>Ensure the following items are addressed as part of policy, procedure and process map development:</p> <p>End-to-end access process. Managing remedial actions.</p> <p>Ensuring Active H captures reinspection dates less than five years (as recommended by the competent person)</p>	High	31.10.24	30.09.24	SH	46% (40%)	In Progress	<p>21.2) 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.</p> <p>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.</p> <p>Attribute updated in ActiveH to accommodate new data, (assisting with Recommendation 5, 6, 11 and General Recommendation 7).</p> <p>21.2) The (BSL) and Compliance Manager have held discussions with the Development Manager over non receipt of certification from new build properties and acquisitions. It was identified that a data error was being inserted into ActiveH showing that these properties were in management and consequently the database was then identifying that these units were non-compliant. A solution to this error has now been identified and tested and works therefore a procedural process requires updating and outstanding legacy errors correcting. The (BSL) and Compliance Manager are currently reviewing this workstream and the associated backlog.</p> <p>21.3) Target date has been revised due to work that is being completed on Recommendations 12 and 13.</p>

<p>Recommendation 22 – Fire safety:</p> <p>Complete all outstanding fire risk assessments (FRAs) in line with the fire risk assessor’s recommended reassessment frequency.</p> <p>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.).</p> <p>Ensure you can demonstrate compliance with the Fire Safety (England) Regulations 2022, including undertaking fire door checks.</p> <p>Consider undertaking Type 3 FRAs to all properties as this provides a more detailed understanding by assessing a sample of homes within each block.</p> <p>Ensure the following items are addressed as part of policy, procedure and process map development:</p>	Critical	31.04.24	30.09.24	SP	79% (73%)	In Progress	<p>22.1) Additional person engaged and trained to carry out fire door checks - fixed term to June 2024 and will be reviewed.</p> <p>22.2) 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)</p> <p>22.3) New Fire Risk Assessments for all medium/high rise properties commissioned by Housing.</p> <p>22.4) Housing site staff carry out daily inspections of high rise and weekly of medium rise.</p> <p>22.5) 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.</p> <p>22.6) All 6 new FRAs were received January 11, 2024.</p> <p>22.7) In the process of engaging a new Fire Safety Lead who will review the data.</p> <p>22.8) New Fire safety Lead appointed and joining (WDC) on Monday 4th March 2024 and will take the lead on reviewing outstanding (FRA) actions.</p> <p>22.9) The new (FSL) is working closely with the (BSL) compliance manager and technical members of the housing team and participating in various safety review meetings as well as inspecting the highrise and other buildings.</p> <p>22.10) The (FSL) is currently reviewing the FRA actions and will provide an update shortly on completed works, works in progress and works outstanding by status.</p> <p>22.11) Target date has been revised due to work that is being completed on Recommendations 12 and 13.</p> <p>22.12) Work continues with the review of FRA actions.</p> <p>22.13) 20/5/24 all FRAs reviewed, and works being allocated to relevant teams' additional resources being utilised to complete all actions.</p> <p>22.14) It has now been decided to replace all FEDs and communal doors to bring them all up to current standards.</p> <p>22.15) Programme of works for the door replacements and the compartmentation surveys is being arranged.</p>
---	----------	----------	----------	----	--------------	-------------	---

<p>Management and reporting of periodic checks on fire safety equipment.</p> <p>Housing management issues that impact on fire safety, such as hoarding and allocations.</p> <p>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</p>								
<p>Recommendation 23 – Asbestos Management:</p> <p>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.</p> <p>Ensure the following items are addressed as part of policy, procedure and process map development:</p> <p>Establish Appointed Person and Deputy Appointed</p>	Medium	31.10.24	30.09.24	SH	33% (27%)		In Progress	<p>23.1) Tersus has been appointed to carry out a new asbestos survey across all communal blocks. Once work begins, a weekly programme update will be provided by Tersus.</p> <p>23.2) Tersus asbestos surveying will start surveying the highrise buildings as detailed below.</p> <ul style="list-style-type: none"> > 19/03/24 - Ashton Court. Asbestos survey completed. > 20/3 - Southorn Court. Asbestos survey completed. > 21/3 - Stamford Gardens. Asbestos survey completed. <p>The buildings below are now scheduled to take place on the revised dates due to the complexity of the buildings.</p> <ul style="list-style-type: none"> > 11/04/24 - Westbrook House. Asbestos survey completed. > 17/04 - Radcliff Gardens. Asbestos survey completed. > 22/04 - Eden Court – 22/04/24. Asbestos survey completed. <p>23.3) The full asbestos surveying programme/plan is currently being developed and upon completion will be accessible to all applicable parties.</p> <p>23.4) Going forward, an annual inspection will be carried out across all communal block areas and the asbestos plan updated accordingly.</p> <p>23.5) Target date has been revised due to work that is being completed on Recommendations 12 and 13.</p> <p>23.6) 04/04/24 - The next batch of asbestos surveys (21 Blocks) has been issued to the asbestos surveying Consultant. We are awaiting survey dates prior to notifying the residents and the housing team.</p> <p>23.7) The batch of asbestos surveys itemised in (23.6) have been completed.</p>

<p>Person roles (ensuring they are appropriately qualified).</p> <p>Develop a fit for purpose asbestos management plan.</p> <p>Use of priority assessment scores and material assessment scores to determine the risk of an asbestos item.</p>							<p>23.8) 18/04/24 - The next batch of surveys (20 Blocks) have been issued to the asbestos surveying consultant.</p> <p>23.9) The batch of surveys itemised in (23.8) have been completed.</p> <p>23.10) 20/05/24 - The next batch of surveys (44 Blocks) have been issued to to the asbestos consultant and are in progress.</p> <p>23.11) 04/07/24 - The activities listed in (23.10) above are in progress and estimated to be completed by the 09/07/24. Upon completion, a new batch of (40) surveys will be issued to the asbestos consultant.</p> <p>23.12) The activities listed above in (23.11) have been completed.</p> <p>23.13) 11/07/24 - A new batch of surveys (40 Blocks) have been issued to the asbestos consultant and the estimated completion date is the 13/08/24.</p> <p>23.14) 08/08/24 - A new batch of surveys (41 Blocks) have been issued to the asbestos consultant and the estimated completion date is the 12/09/24.</p> <p>23.15) 12/09/24 - A new batch of surveys (40 Blocks) have been issued to the asbestos consultant.</p> <p>23.16) 12/09/24 - The (BSL) and the compliance team leader met with the asbestos consultant, and they have agreed to employ an additional resource to enhance the current monthly volume of surveys. A further update will be given shortly. All completed asbestos surveys are filed in the ActiveH database (DMS)</p>
<p>Recommendation 24 – Water Hygiene:</p> <p>Undertake all outstanding legionella risk assessments.</p> <p>Ensure written schemes of control are documented to provide guidance on how to manage and monitor the risks identified within the legionella risk assessments.</p> <p>Ensure the following items are addressed as part of policy, procedure and process map development:</p>	Medium	30.06.24	30.09.24	SH	53% (49%)	In Progress	<p>24.1) New Contractor is currently reviewing existing Risk Assessments</p> <p>24.2) Review of existing assessments is ongoing</p> <p>24.3) Target date has been revised due to work that is being completed on Recommendations 12 and 13.</p> <p>24.4) Risk assessments have been completed for all housing. All have been reviewed and received by WDC.</p> <p>24.5) All risk assessments have been saved onto the DMS system.</p> <p>24.6) Remedial actions are being reviewed and works programme being put in place.</p> <p>24.7) 08/05/24 The (BSL) Confirmed at the Compliance Board meeting that all (HRA) legionella risk assessments have been completed.</p>

<p>Establish Responsible Person and Deputy Responsible Person roles (ensuring they are appropriately qualified).</p> <p>Managing water hygiene in domestic properties – adopting a practical and proportionate approach.</p> <p>Managing water hygiene void properties (considering the void standard, removing high risk installations, system flushing, replacing shower heads, etc.)</p>							
<p>Recommendation 25 – Lift Safety:</p> <p>Review all thorough examination remedial actions and ensure they are completed.</p> <p>Ensure the following items are addressed as part of policy, procedure and process map development:</p> <p>Establish a formal process for notifying the compliance team of new domestic lifts installations.</p> <p>Managing remedial action</p>	High	31.03.24	30.09.24	SH	45% (37%)	In Progress	<p>25.1) ActiveH up to date. New attribute created and populated with information from Contractor.</p> <p>25.2) We will finalise reporting and publishing of reports from ActiveH.</p> <p>25.3) We will be meeting with Contractor to discuss how we ‘push’ works to them, how its completed and data returned to ActiveH with automation.</p> <p>25.4) Building Safety Lead involvement with Corporate Insurance Officer.</p> <p>25.5) Target date has been revised due to work that is being completed on Recommendations 12 and 13.</p> <p>25.6) Remedial actions have been reviewed and are being managed for suitable completion.</p>

<p>Recommendation 1 – Building registration:</p> <p>Any higher-risk buildings identified following completion of the wider data validation exercise should be registered with the Building Safety Regulator</p>	Critical	31.03.24	31.03.24	SP	100% (95%)	27.03.24	Complete	<p>1.1) Seven higher-risk buildings registered with the Building Safety Regulator.</p> <p>1.2) An identified outcome of the data validation process to confirm final numbers to be registered.</p> <p>1.3) 44, Clarendon Square is being deregistered, so will be removed from the list.</p> <p>1.4) 15/03/24 - The new (FSL) has inspected the building itemised in (1.3) above with the local fire service officer. Both parties agree that this building is not a high rise, confirmed in writing and will be deregistered shortly.</p> <p>1.5) 27/03/24 - Steve Partner, Head of Neighbourhood and Assets has notified the Building Safety Regulator that 44 Clarendon Square is not classified as a high-rise building and requested it to be deregistered. All notifications to the Building Safety Regulator for high rise buildings are in the team's channel.</p>
<p>Recommendation 2 – Building safety cases and reports:</p> <p>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.</p> <p>This will allow the safety case and safety case report development project to resume and will include documenting a safety</p>	High	31.03.24	31.03.25	SP	71% (35%)		In Progress	<p>2.1) Pennington commissioned to prepare draft building safety cases based on information being supplied and taking in to account latest guidance from the building safety Regulator.</p> <p>2.2) Draft safety case for Eden Court to be completed by Pennington by 15 December 2023 and used as a gap analysis for data.</p> <p>2.3) Daily safety inspections undertaken by housing teams on site.</p> <p>2.4) Target date will need to be reviewed and clarified with Pennington.</p> <p>2.5) The building safety cases are in progress with the (BSL)</p> <p>2.5.1) The (BSL) and a member of the procurement team are meeting with the framework organisation and structural engineering Company on Monday 08/04/24. This meeting is to discuss updating the structural survey carried out in 2017 across all the high-rise buildings to comply with current legislation and comply with this recommendation.</p>

management system and building risk assessment.								<p>2.5.2) 19/04/24 - Update on (2.5.1) Procurement is in the process of gaining approval to appoint the structural consultant via a framework contract to update all the highrise building structural reports.</p> <p>2.5.3) 24/04/24 - A direct award contract from the framework contract has been signed and issued to the supplier. The desk top survey will commence on the 13/05/24 followed by an on-site survey across the highrise buildings.</p> <p>2.6) Target date has been changed to reflect workload and has been discussed with Pennington Choices.</p> <p>2.7) 24/04/24 - The (BSL) has requested a quotation from a supplier via a framework contract to update the existing highrise building drawings to comply with current legislation.</p> <p>2.8) 15/05/24 - The (BSL) has received the quotation itemised in (2.7) above and accepted. The contract has been completed and issued to the external consultant and a commencement date will be given shortly.</p> <p>2.9) 04/06/24 - New building drawings and structural surveys: The appointed external consultant (Ridge & Partners LLP) is currently carrying out a desk top review prior to attending site. Notification to all residents will be carried out explaining the reasons for these surveys prior to the consultant attending site.</p> <p>2.10) 01/07/24 - The activity listed above in 2.9 is in progress.</p> <p>2.11) 15/07/24 - New floor plans across the 6 highrise buildings. Following written consultation and notification to all residents, Ridge and Partners Consultants have carried out surveys to measure and produce new floor plans. The estimated completion date for receipt of these documents is the 16/08/24 and these documents will be shared with all applicable parties.</p> <p>2.11.1) 08/08/24 - All new floor plans received and to be shared with Pennington's for validation.</p> <p>2.11.2) Ridge and Partners Consultants at the same time of the above survey itemised in (2.11) have started working on new structural reports for Eden Court and Stamford Gardens which are currently in progress. The (BSL) has also requested a quotation to produce new fire strategies for these two buildings which is in progress.</p> <p>2.11.3) 23/08/24 - The (BSL) has received the quotation for the fire strategies and the contract documentation is in progress.</p> <p>2.12) - Structural reports and fire strategies for Westbrooke House, Ashton and Southorn Court and Radcliffe Gardens have already been produced by Wate's consultants as part of the</p>
---	--	--	--	--	--	--	--	---

							<p>cladding replacement programme and will be shared with all applicable parties shortly.</p> <p>2.13 16/08/24 - The (BSL) has developed a secure shared folder with (ICT) Uploaded various documents such as structural reports, fire strategies, new floor plans etc for all six highrise buildings and shared this folder with Pennington's for review of the documents produced to date and validation.</p> <p>2.14 04/09/24 - The Project Manager, Fire Safety Lead and the (BSL) met with Letrice Thomas from Pennington's. LT Confirmed that that have selected Ashton Court, highrise building to produce the pilot building safety case. Once validated, Pennington's will complete all other high-rise building safety cases.</p>
<p>Recommendation 3 – Golden thread:</p> <p>Document the approach and commitment to delivering golden thread principles for all higher-risk buildings.</p> <p>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.</p>	High	31.03.24	31.03.25	SP	10% (10%)	In Progress	<p>3.1) Linked to Recommendation 2, above and will form part of the Building Safety Cases.</p> <p>3.2) Will be reviewed after discussion with Pennington (see Recommendation2).</p> <p>3.3) Target date has been revised as this item will need to be completed once all the Recommendations related to Building Safety are completed.</p>
<p>Recommendation 4 – Mandatory occurrence reporting:</p> <p>Develop a mandatory occurrence reporting procedure that captures the principles of reporting and recording safety occurrences as intended by the Act.</p>	High	31.07.24	31.03.25	SP	50% (50%)	In Progress	<p>4.1) 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</p> <p>4.2) Target date has been revised as this item will need to be completed once the details announced by HMG have been considered.</p> <p>4.3) SP has replaced FJQ as being responsible for this recommendation.</p>

<p>Recommendation 5 – Residents’ engagement strategies:</p> <p>Develop building specific residents’ engagement strategies for your higher-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.</p>	High	30.03.24	29.11.24	SP	90% (100%)	In Progress	<p>5.1) Lead officer to engage with Landlord Services Manager</p> <p>5.2) Survey conducted and ended on the 19th of January. Based on the information received, it was decided that additional results are required. A paper copy of the survey will now be distributed with in person visits to follow. A new closing date for the survey of February 29, 2024, has been set. The results of this will still be used to inform strategy.</p> <p>5.3) Strategic documents for each block are being developed.</p> <p>5.4) The installation of digital information boards in each block has begun.</p> <p>5.5) Target date has been re-assessed to consider the work that still needs to be completed and may need to be assessed again.</p> <p>5.6) Individual pamphlets / booklets have been created for each of the blocks. These contain safety information and block specific details.</p> <p>5.7) Engagement strategy has been provided and will also feed into the communications plan in Recommendation 19.</p> <p>5.8) Based on review comments from Pennington, we have returned this item back to “In Progress”. We feel based on the additional recommendations for Pennington to improve the individual engagement strategies, that they can be completed and approved by the end of November 2024.</p>
<p>Recommendation 6 – Complaints procedure:</p> <p>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</p>	High	30.04.24	29.11.24	GL	90% (100%)	In Progress	<p>6.1) There is an agreed timetable for adoption of a new complaints policy and procedure which is as follows:</p> <ul style="list-style-type: none"> • 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 • Publish SLT Agenda 15 Jan 2024 • 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 • SLT agree final policy 18 Jan 2024 • The draft report to be sent to Committee Services by 10am. Committee Services produce & send draft agenda to Chief Exec, Monitoring Officer, Programme

assessment and safety case).							<p>Director for Climate Change & Cabinet & Group Leaders 18/01/2024.</p> <ul style="list-style-type: none"> • 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 • Final Report to Committee Services by 10:00am 25/01/2024 • Despatch of Agenda 29/01/2024 • Date of Overview & Scrutiny Committee 06/02/2024 • Date of Cabinet meeting 08/02/2024 <p>6.2) To date we are on track with that delivery timeline.</p> <p>6.3) A new officer is being appointed for taking responsibility for complaints across the Council which the post is due to be advertised this week.</p> <p>6.4) Policy has been approved by Cabinet</p> <p>6.5) New Complaints Officer is starting on April 22, 2024</p> <p>6.6) Procedures are being developed and target date has been changed to reflect this including the start date of the new Complaints Officer.</p> <p>6.7) Procedure flow has been created and will be implemented. Amendments will be done if they are needed.</p> <p>6.8) The target date has been changed due to the following reason. We felt that this recommendation was complete on the 28.05.24. However, with through discussions with Pennington Choices on 03.06.24, they felt it still required a few elements to be complete. these changes are being considered and incorporated.</p> <p>6.9) Changes were made to process flow and procedure documentation to include building safety requirements. An addendum will also be made to the existing policy.</p> <p>7.0) Based on feedback from Pennington, this recommendation has been changed to In Progress. There are items, that they feel need to be included in the documentation for Complaints procedure. This feedback has been taken on board and will be incorporated into an addendum for the current policy. This addendum is meant to be approved by Cabinet in October.</p>
------------------------------	--	--	--	--	--	--	---

<p>Recommendation 7 – Measuring performance:</p> <p>Develop performance measures and assurance reporting, in line with the above, to enable effective oversight to ensure building safety obligations are being achieved.</p>	Medium	30.04.24	15.08.24	SH	100% (10%)	15.08.24	Complete	<p>7.1) Progress on this action is also detailed as part of Recommendation 5.</p> <p>7.2) Various output options being considered with work being done on simplifying and providing a consistent foundation to queries with database functions.</p> <p>7.3) Possible need to extend due date if opportunities to develop reports beyond Recommendation scope present themselves.</p> <p>7.4) Target date has been updated to consider additional recommendations and recommendations that are due closer to the end of the project.</p> <p>7.5) Based on evidence provided to Pennington Choices in the midpoint review, they have confirmed that the information we are measuring fulfils this action and that we can deem it to be complete. The feeling was that we were looking at improvement items going forward and that this becomes Business Improvement and was beyond the scope of the recommendation.</p>

Progress Colour Key:

Stage	Colour
Not Started	
<50% Complete	
>50% Complete	
Completed	
Late	