NORWICH City Council

Cabinet

SUPPLEMENTARY AGENDA

Date: Wednesday, 18 January 2023
Time: 17:30
Venue: Council chamber, City Hall, St Peters Street, Norwich, NR2 1NH

Committee members:

Councillors:

Waters (chair)
Harris (vice chair)
Giles
Hampton
Jones
Kendrick
Oliver
Stonard

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8 **An update on Health, Safety and Compliance in Council Homes and Buildings** 3 - 16

Purpose: To provide an update to members about health, safety and compliance management and improvement in council homes and buildings.

EXEMPT ITEMS:

(During consideration of these items the meeting is not likely to be open to the press and the public.)

To consider whether the press and public should be excluded from the meeting during consideration of an agenda item on the grounds that it involves the likely disclosure of exempt information as specified in Part 1 of Schedule 12 A of the Local Government Act 1972 or it being confidential for the purposes of Section 100A(2) of that Act.

In each case, members are asked to decide whether, in all circumstances, the public interest in maintaining the exemption (and discussing the matter in private) outweighs the public interest in disclosing the information.

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Date of publication**: Wednesday, 11 January 2023**

NORWICH City Council

Item 8

Committee Name: Cabinet
Committee Date: 18/01/2023
Report Title: An update on Health, Safety and Compliance in Council Homes and Buildings

Portfolio:	Councillor Harris, Deputy leader and cabinet member for social housing
Report from:	Executive director of community services
Wards:	All Wards

OPEN PUBLIC ITEM

Purpose
To provide an update to members about health, safety and compliance management and improvement in council homes and buildings.

Recommendation:
It is recommended that members note the content of this report.

Policy Framework

The Council has five corporate priorities, which are:

- People live independently and well in a diverse and safe city.
- Norwich is a sustainable and healthy city.
- Norwich has the infrastructure and housing it needs to be a successful city.
- The city has an inclusive economy in which residents have equal opportunity to flourish.
- Norwich City Council is in good shape to serve the city.

This report addresses the following corporate priorities

- People live independently and well in a diverse and safe city.
- Norwich has the infrastructure and housing it needs to be a successful city.

The Council's Housing Strategy *'Fit for the Future' A Council Housing Strategy for Norwich* sets priorities for the Council's homes and estates for the period 2020 to 2026. It identifies four primary goals, these are:

- Delivering new homes
- Maintaining and improving condition of existing housing
- Improving the use and management of our existing housing stock
- Improving our neighborhoods

The Council's Strategic Asset Management Framework 2022 sets out six policy themes including 'compliant and financially resilient management of assets'.

Report Details

1. Norwich City Council (NCC) is landlord of approximately 14,500 council homes and the freeholder for the buildings in which approximately 3,000 leaseholder homes are situated. It also owns more than 900 assets held on the general fund.

2. Registered providers of social housing (including councils and housing associations) are governed by the Regulator of Social Housing (RSH). The objectives of the RSH are set out in the Housing and Regeneration Act 2008. At the core of the RSH regulation is a set of standards which registered providers landlords must comply with.

3. In November 2021, members considered the outcomes of a review by the RSH following the self-reporting by NCC on 28th July 2021 of a possible breach of the home standard. The RSH found that NCC had breached the Homes Standard and published a Regulatory Notice. The RSH did not feel it necessary to take enforcement action against NCC because they were assured of NCC's plans to improve services and return to full compliance.

4. It was agreed in November 2021, that whilst the regulatory notice remained in place, a quarterly progress update would be provided to Cabinet. This is the fourth update and includes information up to the 31st of December 2022.

Governance

5. Senior officers meet with the RSH monthly, to report and discuss progress. The RSH continues to be satisfied with the progress being made and the arrangements in place. A member of the Compliance Delivery Group (CDG) also attends the meetings. This committee update reports is shared with the RSH to further validate reporting and information.

6. Internal governance and assurance is provided through the following framework:

   The Health, Safety and Compliance Board - the Board has been established since November 2021 and meets monthly to receive updated information, to consider progress, and agree further actions to be taken. The Board has oversight of both housing, and non-housing property compliance within the NCC property estate. Board members include the portfolio holders of both social housing and resources, the Chief Executive, the Executive Directors of Communities and Development and City Services, the Monitoring Officer and the s.151 Officer or their Deputy.

   The Compliance Delivery Group (CDG) - NCC entered a voluntary undertaking with the RSH in July 2022. This is an agreement which confirms the steps that will be taken to achieve full compliance and when completed will help to inform the RSH in their decision to lift regulatory supervision. The delivery of the voluntary undertaking is supported by the CDG which includes three independent experts from outside the Council. This group meets monthly to consider operational detail and monitor progress. The

CDG advises the Health, Safety and Compliance Board in delivering the compliance improvement plan.

Quarterly update reports to Cabinet – reports have been provided to Cabinet on a quarterly basis since November 2021 to update on progress.

Compliance Improvement Plan

7. The compliance improvement plan (CIP) has been separated into housing and non-housing areas to support focused engagement with the RSH on housing matters and provide clear internal reporting of progress against identified actions across both areas.

8. The table below provides a summary of progress for the Housing CIP which has two phases with activity prioritised based on risk assessment. The first phase was planned for completion by the 30.11.22 and the second by the 31.5.23.

Housing CIP Summary	**Phase 1 - 30.11.22**		**Phase 2 - 31.5.23**
Activity	**Status**	**Update**	**Status**
Policies, procedures	60%	All P&Ps mapped, and work program created. Reviewed date for completion 31.5.23	-
Staff and contractors	100%	Complete	60%
Data management	95%	Data input complete and the review is being carried out.	25%
KPI reporting and performance	80%	Review of data is on-going to ensure it meets the required standards. New completion date 31.5.23	40%
Strategic oversight and governance	100%	Complete	-
Financial resources	100%	Complete	-
Requirements of the Building Safety Act	-	N/A	78%
Information and advice to residents	-	N/A	55%
Information, advice and training to Members*	-	N/A	20%

* Please note, we are currently reviewing training required for members.

General Fund

9. General Fund (non-housing) properties were prioritised to ensure that resource is focused on high risk, high liability assets first. Assets have been split into one of the following groups:
    - High priority – properties we occupy or use for delivery of services or where we have full repairing and insuring liabilities (typically where the asset is multi-tenanted) or general fund properties with sleeping accommodation above.

- Medium priority – tenanted properties where some repairing liabilities fall to us as the landlord;
- Low priority – tenanted properties where no repairing liabilities all to landlord or unoccupied assets such as land / statues etc

10. Work has now been completed to map the compliance responsibilities on the 75 high priority assets identified. This involves ensuring that compliance information is in place, up-to-date, and that remedial actions have been undertaken when required. This process will be repeated for medium and low priority properties.

11. Compliance, where responsibility falls on the landlord, is ongoing for high priority assets with the aim of completing this work by the end of the financial year. This includes both initial reporting and undertaking any remedial actions identified. Once this has been completed, work will commence on medium and then low priority assets where responsibilities will typically fall to tenants. Legal advice is currently being sought to inform the content of letters to tenants of medium and low risk properties, however the aim will be to gain assurance from tenants that they are meeting their compliance responsibilities and provide them with information on how to ensure they remain compliant.

12. A further aspect of the compliance improvement plan is the review of existing programmed maintenance of non-housing assets to ensure that maintenance regimes are fit for purpose. A desk-top review has been undertaken and this is now being followed up with site visits to further validate the programmed maintenance schedules. Financial resources for general fund compliance activity will be from the commercial property and repairs reserves as agreed by cabinet in November. A separate compliance dashboard for general fund assets has been developed alongside the mapping exercise.

Housing Compliance Dashboard

13. To enable progress to be reported and monitored effectively, a compliance dashboard has been developed. The dashboard is updated monthly and reported to the Compliance Delivery Group and the Health, Safety and Compliance Board.

14. Overdue work and current work are monitored separately. All inspections and remedial works outstanding as of the 31st of December 2021 are ‘overdue works’. All actions since that date are monitored to be completed within required timescales and are termed ‘business as usual’. This approach has been agreed with the RSH.

Backlog Work

15. All works outstanding as of the 31st of December 2021, where access has been gained, have been completed across the following areas: gas safety; water hygiene; electrical safety and lifts.

16. Where access to a home has not been possible and has prevented work being completed the appropriate tenancy support/action is being taken to enable completion of works as swiftly as possible. This work is being undertaken by housing teams.

17. The asbestos programme and fire programme are within targets set by the RSH. The asbestos survey programme will be completed by August 2023 and our fire risk assessment programme will be completed by September 2023.

18. Detailed programmes have been received from both contractors and are reviewed regularly with progress scrutinised by the Compliance Delivery Group and the Health, Safety and Compliance Board.

19. The position as of the 31st of December 2022 is set out in the tables below in section 20.

Please note the following abbreviations

HRRB	High Risk Residential Building
SpH	Specialised Housing
SpH LL	Specialised Housing Landlord service
SpH Dom	Specialised Housing domestic property
LRB	Lower risk Buildings
FRA	Fire risk assessment

** Properties are compliant if they have a safety certificate or are being managed in accordance with the council's no access process.

20.

Gas Safety

	Position in Nov 2021	December 2022	RAG
Gas Safety	Compliant**	Compliant **	☑

Electrical Safety (EICRs)

	Position in Nov 2021	December 2022	RAG
Electrical Safety	105 Communal EICR's overdue	Compliant **	☑
	806 Domestic EICR's overdue	6 HRRB inspections overdue	↑
		Compliant** SPH inspections	☑

		84 LRB inspections overdue	↑
	Remedial actions position to be confirmed	Compliant ** HRRB remedial actions	☑
		Compliant ** SpH remedial actions	☑
		47 LRB remedial actions overdue (see explanation below)	↑

21. The HRRB inspections outstanding are all cases where the contractor has not been able to gain access to the property; these are being progressed through the housing team where additional focused resources are now in place. Legal action to gain access will be taken where necessary.

22. All priority 1 and 2 remedial actions arising from inspections are now being completed at the time of the inspection to enable certification to be achieved without delay. Overdue remedial actions in all areas are reducing.

Water Hygiene

	Position in Nov 2021	**December 2022**	**RAG**
Water Hygiene	Up to 500 Water Hygiene surveys required	Compliant ** HRRB inspections	☑
		Compliant ** SPH LL inspections	☑
		1 SpH Dom inspection outstanding	↑
		Compliant** HRRB remedials actions overdue	☑
		Compliant** SpH LL remedials actions	☑
		Compliant ** SpH Dom remedials actions	☑

23. Good progress has been made in the last quarter with all HRRB and Specialist housing inspections and priority remedial work having been completed.

24. Specialist housing domestic inspections have progressed quickly with one outstanding which is programed to be completed by February 2023. Any remedial actions are being completed at the time of the inspection.

Fire Safety

	Position in Nov 2021	December 2022	RAG
Fire Safety HRRB – High Risk Residential Building	All HRRB FRA's completed	Compliant** HRRB inspections	☑
	2 SpH overdue FRA's	Compliant ** SpH inspections outstanding	☑
	650 LRB FRA's outstanding (Please note, incorrect number was initially reported)	1493 LRB inspections outstanding	↑
		3 HRRB remedial actions overdue	↑
		5 SpH remedial actions overdue	↑
		122 LRB remedial actions overdue	↑

25. Fire risk assessments (FRA) for all high-risk residential buildings and specialist housing have been completed.

26. Contractors have been appointed to undertake the outstanding remedial works and these are gradually reducing although there are some access issues to individual properties.

27. As part of the fire risk assessment process, we have commissioned surveys of some of the fire doors within our blocks. These surveys highlighted some concerns with the quality of the installation and the materials that had been used. After further specialist assessment and testing, we have identified that some doors may not perform as required in the event of a fire. We have updated our fire risk assessments to reflect this and shared our findings with the Norfolk Fire and Rescue Service. We have put in place a series of measures to mitigate the risks associated with the doors and have written to our affected residents to share some updated advice and to arrange to visit their home. We are working closely with NFRS to assist any vulnerable residents that we identify, and NFRS have been supportive of the approach that we have taken so far. We have also shared information with the RSH

and will continue to share our progress with them during our monthly meetings.

Asbestos

	Position in Nov 2021	December 2022	RAG
Asbestos	68 inspections required in communal areas	Compliant** HRRB management Surveys	☑
		Compliant** SpH management Surveys outstanding	☑
		285 LRB management Surveys outstanding	↑
	Remedial Actions - position unknown	Compliant** HRRB remedial actions	☑
		Compliant** SpH remedial actions	☑
		Compliant** LRB remedial actions	☑

28. Good progress has been made and all asbestos management surveys of communal areas in HRRB are completed with only a small number outstanding in specialist housing which are expected to be completed by the end of August 2023.

29. A program of inspections has been put in place to undertake the surveys in the LRB over the coming months. An interim asbestos management officer has been appointed to lead this work.

Lifts

	Position in Nov 2021	December 2022	RAG
Lifts	Compliant**	Compliant**	☑

30. All safety inspections have been completed as required.

Non housing assets data

31. Progress against the non-housing compliance dashboard has accelerated in the last two months following the improvement of data. However, that data is still currently held in shared folders and spreadsheets rather than a bespoke specialist system. In the long-term and improved IT system will be required and is being scoped at the present time.

32. A program is in place to update all FRA's by the end of Summer. FRA's completed are identifying remedial actions and resources are being aligned to ensure that these can be actioned in a timely manner.

33. Significant progress has been made in all compliance areas for both operational and shared responsibility buildings (Community Centres) and the current position is recorded in the table below.

34. Operational building compliance

Fire	1 Risk Assessment is outstanding which is programmed in. All high-risk actions have been addressed. Fresh fire risk assessments are being undertaken on operational assets programmed in with an aim to complete by end of August. These may lead to further remedial works being identified.
Electrical	All condition reports are up to date with 1 building isolated pending electrical upgrades.
Water	All buildings have an up-to-date Risk Assessment with no outstanding actions
Asbestos	All buildings have been surveyed and no high-risk material outstanding.
Gas	Gas servicing is up to date
Lifts	All lifts have up to date service records and are on a service/inspection plan.
Fire Installations	1 test document is outstanding (a satisfactory test has been carried out) and is with NCSL

35. Community Centre Compliance

Fire	All Risk Assessment are complete, and all outstanding actions have been raised with NCSL to address
Electrical	All condition reports are up to date.
Water	All Risk Assessment are up to date with no actions
Asbestos	All asbestos surveys are up to date with no outstanding actions.
Gas	Gas servicing is up to date
Lifts	All lifts have up to date service records and are on a service/inspection plan.
Fire Installations	All fire alarm systems are serviced and up to date.

36. Tenants of high-risk properties have been written to on 4 October. The response rate has been relatively poor with 11 replies received out of 37 recorded delivery and hand delivered letters sent. A further chaser letter was sent on 4 November and a further 2 responses received. Where a response has been received communication is continuing with tenants. Legal advice is being sought ahead of taking any further steps for those tenants whom have not responded.

Compliance Risk Register

37. The Health, Safety and Compliance Board has developed a risk register that is reflected through into the Council's corporate risks. The register is regularly reviewed and has been updated and approved by the CDG, the HSCB will consider the risk register later in January.

Next Steps

38. Work has commenced on phase 1 of the independent review, which forms part of the voluntary undertaking with the RSH. The initial review will be concluded in January 2023 and a report circulated in February 2023. The purpose of this work is to validate our progress to date.

39. The compliance team will continue to work closely with colleagues in housing management and tenancy support to ensure access is gained to properties to carry out the necessary inspections and works, whilst minimising inconvenience to residents.

40. Outstanding actions on the Housing CIP, which have not been completed in line with deadlines will be addressed. Please note, the deadlines will remain subject to scrutiny by the Compliance Delivery Group and the Health and Safety Compliance Board to ensure progress is made.

41. As overdue works are complete, focus has turned to business as usual and the embedding, monitoring, reporting and further development of policies, processes and governance to support the move out of regulatory supervision. A new suite of business-as-usual dashboards has been developed and these are reviewed monthly.

Engagement

42. Web content has been kept up to date to provide additional information and helpful FAQ's relating to the key issues.

43. Residents have a number of different options to get in touch with us about compliance and to raise and questions or concerns

44. The Tenant Involvement Panel will continue to be kept informed of key aspects of the program of works where applicable.

45. For tenanted non-housing properties tenants will be contacted to ensure they are familiar with their compliance responsibilities and that these are aligned with the Council's responsibilities as landlord.

Implications

Financial and Resources

46. This report provides an update on the expenditure against the additional resources allocated to the compliance budgets.

47. On 12th November 2021, Cabinet approved budget virements to create additional 2021/22 revenue budgets of £1.272m to support the CIP and also approved the creation of a new HRA Compliance earmarked reserve that enabled any unspent revenue budgets at the end of the 2021/22, to be carried forward and utilised in 2022/23. In addition, on 30th November 2021, Council approved an increase to the 2021/22 HRA capital programme of £1.000m, with the intention that approval would be sought for any underspend to be carried forward through the usual capital carry-forward process for utilisation in 2022/23.

48. A revenue underspend of £0.840m was moved to an earmarked reserve and is available to spend in 2022/23. The capital underspend of £1.000m has been carried forward and is available to spend in 2022/23.

49. In addition, HRA revenue budgets totaling £0.662m plus an HRA capital budget of £1.000m have been agreed as part of the 2022/23 HRA budget to support the ongoing additional compliance work. This has been included within the figures shown in the table below.

50. The budget position as at period 8 (end of November 2022) is shown in the tables below:

Revenue Cost	Compliance Budget £	2022/23 P8 Actual £	Remaining Reserve £
Additional Specialist Resource	663,053	294,511	368,541
Compliance Remedial works	838,857	31,571	807,286
Total	**1,501,909**	**326,082**	**1,175,827**

Capital Cost	Compliance Budget £	2022/23 P8 Actual	Remaining Reserve
HRA Major compliance upgrades	2,000,000	33,466	1,966,534

51. This shows that expenditure has been incurred in relation to additional specialist resources being used to oversee and manage the compliance works.

52. Significant compliance work has been undertaken as is demonstrated through the compliance performance information, but invoices are yet to be received. There is a considerable time lag between work being undertaken and confirmed as completed, and invoices being issued. A further update

will be provided to Cabinet on the 18th of January which will provide estimates of committed but not invoiced works.

53. In November 2021, the Cabinet approved, the remit of the General Fund Commercial Property Reserve and General Fund Repairs Reserve be extended to enable the funding of any necessary compliance works to General Fund properties. To date, no virement has taken place from these reserves and any works have been funded from within existing budgets

Legal

54. The legal implications of the RSH notice and process were established in the report to Cabinet on 12 November 2021. The position remains unchanged for the purpose of this update report.

55. Legal advice has been obtained with regards to the respective Council and tenant responsibilities relating to leased properties in the general fund. We are continuing to review the position and take further advice regarding responsibilities based on individual responses from tenants and the relevant lease terms

Statutory Considerations

Consideration	**Details of any implications and proposed measures to address**
Equality and Diversity	None
Health, Social and Economic Impact	None
Crime and Disorder	None
Children and Adults Safeguarding	None
Environmental Impact	None

Risk Management

56. The critical risk register for this project is attached in Appendix 1.

Other Options Considered

57. This is an update report following decision made by cabinet in November 2021.

Reasons for the decision/recommendation

58. No decision is required.

Appendices: 1

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Appendix 1

Risk Management

A detailed project risk register has been developed. Set out below are the overarching and critical risks to the compliance program.

Risk	Consequence	Controls Required
Inadequate systems to record and manage data.	Inaccurate information resulting in insufficient progress in key areas and ineffective management of Health and Safety Compliance. Serious detriment to tenants/ leaseholders.	Risk based programme in place. NEC system implementation. Skilled additional capacity.
Lack of contractor supply chain capacity.	The CIP cannot be delivered swiftly, and tenants remain at risk for an extended period.	Widen the pool of contractors being used. Work with EPL to identify potential contractors.
Skills and expertise not sufficient to manage the program in NCC.	Delayed decision making and inability to progress the work required. Tenants remain at risk for an extended period.	Recruit skilled temporary resources to oversee the programs of works. Undertake permanent recruitment of key posts.
Loss of experienced staff currently delivering compliance activity.	Compliance catch up works not progressed in a timely way.	Review the roles and implement a new structure as required Undertake required training of key staff.
Incomplete or out of date policies and procedures.	Actions are incorrect, not meeting statutory requirements. Inadequate support for staff.	Identify an appropriately skilled resource and update all policies and procedures.
Undertake a quality review, back 5 years, of all Fire Safety improvement works	Poor quality work does not meet the required standard. Tenants remain at risk	Validation of existing data through the annual inspection program. Targeted surveys by specialist Fire safety contractor.