Appendix 3

Report To:	Performance Monitoring Panel
Date:	20 May 2025
Subject:	Housing Landlord Service - Compliance Assurance
Purpose:	To consider how the Housing Landlord Service is performing against key statutory compliance measures.
Key Decision:	No
Portfolio Holder:	Councillor Tracey Carter, Portfolio Holder of Strategic and Operational Housing
Report Of:	Jason King, Director of Communities
Report Author:	Chris Mycock, Housing and Property Services Manager
Ward(s) Affected:	All
Exempt Report:	No

Summary

Following on from the in-year report to PMP in March 2025 on Statutory Compliance within the Housing Landlord Service, this report seeks to update PMP with the year-end position in the compliance areas identified by the Regulator for Social Housing within the safety and quality standards.

Recommendations

That Performance Monitoring Panel considers the Housing Landlord Service's performance against key statutory compliance measures and provides feedback to Cabinet.

Reasons for Recommendations

The purpose of this report is to provide assurance and confidence to Members that tenants are living in safe homes and that arrangements for monitoring compliance areas are robust, with regular reviews and improvements implemented.

Other Options Considered

1. **Do nothing**. To not consider information presented regarding the performance of statutory compliance. This option is not recommended.

1. Background

1.1 A report to PMP on 12th March 2025 set out the in-year position of our performance against the statutory safety requirements (including damp, condensation and mould), this report updates our performance against those measures as of the 3 March 2025 – year end position.

1.2 As previously reported the Council does not have any high-rise blocks of flats, nor does it face any significant risks related to RAAC or radon gas exposure. If there are any fundamental changes to these areas that are not currently an area of risk for the Council they will be included in future PMP reports.

1.3 The Safety and Quality Standard states that Registered Providers must:

- identify and meet all legal requirements that relate to the health and safety of tenants in their homes and communal areas
- ensure that all required actions arising from legally required health and safety assessments are carried out within appropriate timescales
- ensure that the safety of tenants is considered in the design and delivery of landlord services, taking reasonable steps to mitigate any identified risks to tenants.

2. Key Compliance Measures

2.1. In support of these key themes of activity, the performance of the following items is reported to Housing Compliance Clinic. Additionally, key compliance performance data is reported to Senior Leadership Team, scrutinised by Performance Monitoring Panel and reported to Cabinet on a quarterly basis. Management of risks relating to compliance are recorded in the Operational Risk Register and Corporate Risk Register of which is presented on a quarterly basis to Senior Leadership Team and scrutinised by Governance and Audit.

2.2. To enhance scrutiny, benchmarking information, such as Housemark pulse data, is included with the reports. This benchmarking data supports scrutiny by providing a comparative analysis against sector standards, helping to identify areas for improvement. It is effectively used to ensure that performance metrics are not only met but also aligned with best practices, thereby driving continuous improvement.

3. Annual reporting on compliance performance

3.1. In line with our Housing Transformation Programme this year-end report on compliance supports the submission of Tenant Satisfaction Measure data to the Regulator of Social Housing in June 2025. Members are asked to note that

performance on damp, condensation and mould is included within the year-end reporting of compliance as this is actively monitored by the Compliance Clinic.

3.2. This report will be produced on an annual basis going forward, to allow scrutiny of data prior to submission to the Regulator of Social Housing. This information will also be published on the tenant section of our website.

4. Compliance position as of 31/1/2025

4.1. The tables below summarise the compliance position as of 31 March 2025 across the key compliance measures as well as the frequency of inspections or surveys as required. Each area is explored in more detail throughout the report

REQUIRED SAFETY CHECKS COMPLETED AS OF 31/3/25		
Compliance area	Percentage of safety checks complete	Frequency due
Asbestos management (Communal areas)	100%	Annually
Gas Safety (Communal areas)	100%	Annually
Gas safety (Dwellings)	100%	Annually
Legionella Safety (Communal areas)	100%	2 yearly
Electrical Safety (Communal areas)	100%	5 yearly
Electrical Safety (Dwellings)	99.54%	5 yearly
Fire Safety Risk Assessments (Communal areas)	100%	Annually
Passenger lift safety (Communal areas)	100%	Quarterly

4.2 Members will note from the data set out that with the exception of periodical electrical checks which is reported at 99.54% and equates to a total of 18 outstanding properties (details of which are set out in the Electrical Safety section of this report) the Housing Service is meeting the requirements for the statutory inspection regime across all areas of compliance.

5. Asbestos management (communal areas)

ASBESTOS MANAGEMENT PERFORMANCE POSITION AS OF 31/3/25	
100%	Asbestos management surveys/re-inspections carried out as required for communal areas.
0	Remedials recommended as part of 24/25 checks.

5.1. The Council is required to have an updated Asbestos Management Plan for each residential asset that has a communal area. Each area is required to be inspected annually to assess the condition of any asbestos containing materials and if required to action any remedial works that may be identified.

5.2. Following each annual inspection the Asbestos Management Plans are updated and signed off by the Housing Property and Repairs Manager, both the signing off of the

plans on an annual basis as well as any remedial actions identified are reported monthly to the Housing Compliance Clinic for oversight.

5.3. Presently there are no outstanding remedial actions associated with our Asbestos Management Plans and the schedule for the annual survey of each of the areas are set to be carried out throughout September 2025.

6. Gas safety

GAS SAFETY PERFORMANCE POSITION AS OF 31/3/25	
100%	Gas safety checks carried out on communal areas requiring them.
0	Remedials recommended as part of 24/25 communal checks
100%	Gas Safety checks carried out on homes requiring them.
0	Remedials recommended as part of 24/25 home checks

GAS SAFETY REMEDIALS AS OF 31/3/25	
0	Total number of remedials due (including any from previous years)
0	Remedials overdue

GAS SUPPLIES CAPPED AS OF 31/3/25	
10	Properties capped.
A risk-based approach is taken with capped properties. Where the Council is unable to obtain access, our 'no access' procedure is followed. These cases are supervised by the Housing Services Manager in conjunction with the Housing Repairs and Property Services Manager. Updates are provided monthly to Housing Compliance Clinic.	

6.1. The Council is required to carry out annual gas safety checks of all properties which contain a gas burning appliance. In addition, gas safety checks and a valid Gas Safety Certificate are required before each property is let.

6.2. Where the Council cannot gain access to a property to perform these checks, the gas supply is capped to ensure compliance with safety regulations, where no other option is deemed safe and reasonable and as reported within the in-year report to March PMP the capping of gas supplies is a last resort.

6.3. We continue to conduct checks up to two months before they are due (MOT style) to allow maximum opportunity to attend properties.

6.4. As of 31 March 2025 we had 10 properties which had the gas supply capped due to us being unable to carry out the service, all cases enter into our no access process and officers from both Property Services and Housing Management work together to resolve the, often complex, access issues. The performance in this area is reported monthly to our Compliance Clinic to ensure regular oversight.

6.5. Included within our cyclical programme of servicing heating systems are the off-gas heating systems throughout our stock, the table below reports on performance in this area.

OFF-GAS HEATING SYSTEM SERVICING PERFORMANCE POSITION AS OF 31/3/25

100%	Solid fuel heating systems serviced
0	Remedials recommended as part of 24/25 checks
100%	Air-source and ground source heating systems serviced
0	Remedials recommended as part of 24/25 checks
100%	Oil heating systems serviced
0	Remedials recommended as part of 24/25 checks
100%	LPG heating systems serviced
0	Remedials recommended as part of 24/25 checks
Note that storage heaters do not require annual heating system inspection but are checked as part of 5-year electrical safety checks. All properties are inspected annually for smoke alarm detectors and carbon monoxide, as appropriate. (Please note this includes properties with storage heaters).	

7. Legionella Safety (communal areas)

LEGIONELLA SAFETY PERFORMANCE POSITION AS OF 31/3/25	
100%	Legionella risk assessments carried out for properties requiring them.
3	Remedials recommended as part of 24/25 checks

LEGIONELLA SAFETY REMEDIALS AS OF 31/3/25	
3	Total number of remedials due (including any from previous years)
1	Remedials overdue

7.1. Statutory legislation requires weekly flushing of outlets in communal bathrooms and kitchens etc., plus temperature checks at nearest, intermediate, and furthest points from feed tanks or calorifiers in flat schemes (where communal water tanks or heating cylinders are present). These checks are carried out monthly to ensure compliance.

7.2. Additionally, the Council carries out risk assessments every 2 years via a procured contract, including sampling and cleaning of tanks in all flat schemes where there is a communal water source. All actions arising from these risk assessments are dealt with as they arise. Performance is reported to Housing Compliance Clinic.

7.3. As reported to March PMP the remaining action referenced above is in relation to loft hatch access at our Trinity Court scheme, as opposed to a direct risk associated with Legionella. This was identified as part of the annual risk assessment in carried out in April 2024. Works to resolve this action have been included in major works connected to fire compartmentation within the loft space at Trinity Court. This work has commenced with an anticipated completion in July.

8. Electrical Safety

ELECTRICAL SAFETY PERFORMANCE POSITION AS OF 31/3/25

100%	Electrical safety checks carried out on communal areas requiring them.
0	Remedials recommended as part of 24/25 communal checks.
99.54% (18 properties)	Electrical Safety checks carried out on homes requiring them.
0	Remedials recommended as part of 24/25 home checks

ELECTRICAL SAFETY REMEDIALS AS OF 31/3/25	
0	Total number of remedials due (including any from previous years)
	• C1 remedials due – 0
	• C2 remedials due – 0

8.1. The Council carries out periodic electrical installation safety inspections on all housing stock, including communal landlord supplies every 5 years, in line with best practice. These safety checks are carried out by a qualified and accredited external contractor. As with our approach to gas safety, the electrical contractor must be accredited to a competency scheme, our current provider being accredited with NICEIC, and all relevant qualifications of their engineers are provided to us.

8.2. As of 31 March 2025 we had 18 properties for which we were unable to complete the periodical electrical check. All these cases are escalated through our 'no access' procedure, including ascertaining whether any additional support is required to gain access (due to household vulnerabilities) or whether enforcement action is necessary.

8.3. Ongoing supervision of these cases is undertaken by the Housing Services Manager in conjunction with the Housing Repairs and Property Services Manager and updates are provided to Housing Compliance Clinic on a monthly basis.

9. **Fire Safety (communal areas)**

9.1. Under Article 9 of the Regulatory Reform (Fire Safety) Order 2005 any scheme we have where there are areas of communal use are subject to an annual Fire Risk Assessment. The Council procures the services of independent and appropriately qualified contractors to carry out these assessments.

The following table summarises the actions identified in 24/25 Fire Risk Assessments. Actions are categorised under the following assessment criteria.

FIRE SAFETY ACTIONS IDENTIFIED IN 24/25 FIRE RISK ASSESSMENTS		
Category of action	Number of actions identified	Number of actions remaining
Immediate Action required	3	0
Action required within 28 days	30	0
Action required within three months	87	27
Ongoing management	17	4
Total	137	31

9.2. In addition to the above, as of 31 March there were two actions outstanding that relate to major capital works. Contractors are currently on site with mitigations in place to ensure tenants' safety. Works have been completed on the Nene Court Scheme and a further Fire Risk Assessment is scheduled in May to sign off on the completed works. Works on the final scheme are in progress with an anticipated completion date in July. Mitigations remain in place for both schemes until works have been signed off by the fire risk assessor.

9.3. The 27 remaining actions consist of 23 that relate to our Fire Door Replacement programme for which works have been instructed. The remaining four, which all have works scheduled in, are:

- Replacing a roller shutter within a community centre
- Installation of a fire warning beacon in a communal WC
- Replacement of furniture at a community centre
- Sectioning off an area underneath an external staircase to prevent items being stored

9.4. The PMP report in March reported our in-year position in relation to fire protection by way of smoke alarms. We remain at 100% and certificates of annual inspection continue to be supplied to us as part of our inspection contract. As of 31st March 2025, 100% of properties have a working smoke alarm and carbon monoxide detector, where required.

SMOKE ALARM INSPECTION AS OF 31/3/25	
100%	Annual inspection of Smoke Alarms
0	Remedials recommended as part of 24/25 checks.

10. Passenger lift safety checks (communal areas)

10.1. All lift servicing and safety work is carried out on a quarterly basis by suitably qualified engineers in accordance with the requirements of LOLER and manufacturers guidance on servicing.

PASSENGER LIFT SAFETY PERFORMANCE POSITION AS OF 31/3/25	
100% (3 lifts and 4 stairlifts)	Lift safety checks completed.
0	Remedials recommended as part of 24/25 checks.

PASSENGER LIFT SAFETY REMEDIALS DUE AS OF 31/3/25	
0	Remedials due (including any from previous years)

10.2. All servicing records and certificates are provided to us as part of the cyclical servicing programme.

11. Damp, Condensation and Mould (DCM)

11.1 The Council has a dedicated DCM Coordinator focussed on triage of all reports of damp, condensation and mould. Provision is made within the Housing Repairs Team, supported by procured contracts, to carry out all remedial works. Cases are logged

on NEC housing and monitored by the DCM Coordinator. All cases are reported at the monthly Housing Compliance Clinic to allow scrutiny and oversight regarding the progress made in effectively remedying these cases.

11.2 The tables below set out the number and category of reactive DCM cases reported to our DCM team, the percentage against our stock volumes and the performance against inspection targets and remedial works completed within target and the number of cases where remedial works have been completed.

DCM CASE MANAGENT BY PRIORITY 31/3/25		
Priority	Number of cases	Percentage Surveyed in Target
Emergency	12	100% (12 properties)
Urgent	117	60% (70 properties)
Routine	40	75% (30 Properties)
Monitor	9	100% (9 Properties)
No access	12	0% (0 Properties)
	Total	190

NUMBER OF CASES OF DCM IDENTIFIED DURING 24/25		
Reporting mechanism	Number of cases	Number as percentage of total stock (3857 units)
Reactive (cases reported by tenants, tenant representatives, Officers or contractors)	190	4.92%

DCM CASES REPORTED BETWEEN 1/10/24 AND 31/3/25			
Number of cases reported to SHDC	Percentage of cases inspected within target of 14 days	Number of cases closed	Percentage of remedial works completed within target (56 days)
190	84.6%	104	93%

11.1 The above date sets out that of the 190 cases reported reactively to us, we have carried out and signed off remedial works on 104 of those cases, there are a further 19 where works have been completed and have the sign off inspection scheduled in. Our survey rate is reported in line with our policy but then further detail is given on the measure against the survey rate set out in the impending Awaabs Law legislation.

11.2 In addition to the reactive reports the Council is currently undertaking a full Stock Condition Survey of all our properties. The specific inclusion of identification of hazards under the Housing, Health and Safety Rating System with the survey has enabled us to proactively identify 555 properties with DCM or a perceived risk of DCM. The table below breaks down those reports into the categories within the Stock Condition Data:

11.3 The categorisation of the Stock Condition survey and the breakdown of cases identified within those categories is as follows:

CATEGORIES AND DEFINITIONS DETERMINED BY MLCS3	
Severe	Excessive damp or mould noted to one or more rooms
Moderate	Minor damp or mould noted in more than one room
Slight	Minor damp or mould noted in one room

NUMBER OF CASES OF DCM IDENTIFIED FROM STOCK CONDTION SURVEY AS OF 31 MARCH 2025		
Reporting mechanism	Category	Number of cases
Proactive (identified as part of stock surveys)	Severe	11
	Moderate	202
	Slight	342
	Total	555

11.4 Any case that is identified within the severe category is reported directly to our DCM team on the day of survey. The 11 cases within this category have been attended and remedial works completed.

11.5 The cases that fall within the other two categories are further broken down into two workstreams. The cases raised as part of the initial 30% validated data return as of 31 Jan 2025 and then the cases reported weekly from 1st Feb 2025 onwards.

11.6 The resources within the DCM team were increased in March 2025 to enable us to undertake the triage and remedial works from the stock condition outputs.

11.7 Each case receives a triage call which examines the information provided from the stock condition survey and assesses this against the circumstances of the tenants in respect of vulnerabilities or health issues. This enables us to assign a priority to the case and take appropriate action. The table below details the outcomes to date of the cases identified via the Stock Condition Survey split by the two workstreams.

NUMBER OF CASES OF DCM IDENTIFIED FROM STOCK CONDTION SURVEY AS OF 31 MARCH 2025 (excludes the 11 Severe cases already closed)						
Total Cases	Triaged	No response	Desktop Survey complete	Further home survey required	Remedial works booked	Cases closed
373	318	55	246	23	123	76
171	112	59	n/a	0	66	44

11.8 Managing DCM is a complex challenge for the Service. A risk was recently added to the Risk Register regarding the Council's ability to deliver the requirements of Awaab's Law. In response to this, separate papers will be brought forward to Members on the Council's response to DCM and the preparedness to deliver Awaab's Law.

12. Quality Assurance

12.1. <u>Gas Safety</u>

12.2. The Council continues to commission a third-party Accredited Assessor to carry out a rolling quality assessment regime on a minimum of 10% of the work carried out by the Council's gas contractor. This gives us the assurance that the programme of works related to our cyclical service of gas heating systems accords with the legislative requirements.

12.3. Internal Audit

12.4. As reported within the in-year Compliance position report to PMP in March an Internal audit carried out in Q3 24/25 across all housing compliance measures confirmed that the Council has implemented effective governance and control improvements. These include establishing a governance framework, with clearly defined roles and responsibilities for council and contractor staff. Contract management processes have been strengthened with regular minuted meetings and action points enabling robust performance monitoring across key performance indicators (KPIs).

12.5. Governance & Audit received a reasonable assurance opinion from Internal Audit in January 2025 confirming housing compliance governance has improved. Robust controls and oversight were evidenced and continue to be developed.

12.6. In addition to the above and also as reported to March PMP the service undertook an internal exercise, branded as a "Compliance Away Day" on how the Service obtained compliance information in a real-life regulatory inspection scenario. This process was particularly focussed on ease of accessing evidence, whether there are any gaps in evidence and any single points of failure.

12.7. The exercise provided assurance to the Assistant Director – Housing as the Person Responsible for Compliance with the Consumer Standards and the Housing Repairs and Property Services Manager as the Lead Officer for Health and Safety. No material issues relating to non-compliance or potential non-compliance with delivering the Consumer Standards or Health and Safety requirements were identified as part of the exercise.

13. Keeping tenants informed

13.1. Tenants are kept informed about the safety of their home in a variety of ways including:

- Receiving copies of gas and electrical safety compliance certificates following inspection
- Annual report providing an overall position on health and safety (Tenant Satisfaction Measures)
- Quarterly compliance performance statistics published on the tenant's section of the website www.sholland.gov.uk/about-your-landlord
- Tenant Satisfaction Measures published with national benchmarking at www.sholland.gov.uk/about-your-landlord

15.2 The Council is currently consulting tenants on a Tenant Engagement and Influence Strategy. We aim to develop a variety of engagement and influence opportunities during 2025/26 including establishing a Tenant Influence Panel to scrutinise our performance.

14. Conclusion

14.1. This report sets out and explains the Council's approach to dealing with all matters relating to compliance and the discharging of our responsibility under the various legislation that governs our sector. Our ethos is to have the safety of our tenants at the centre of all we do by ensuring, as set out in this report, that any contractors or direct employees have the necessary training, qualifications and competencies in place.

14.2. Responding to damp, condensation and mould continues to be a challenge for the Service and therefore separate papers on the Council's response to DCM and the preparedness to deliver Awaab's Law is considered necessary to ensure appropriate oversight and scrutiny of this challenge, ensuring that tenants remain safe in their homes.

14.3. The report also sets out how our processes, systems and collection of necessary evidence through certification are appropriately scrutinised by both internal governance procedures and external validation partners to give the organisation assurance that the Council is operating compliantly and in accordance with the regulations in place for each element of compliance.

14.4. Finally, the report seeks to address the balance of carrying out testing and assessments to identify hazards as well as ensuring all identified remedial actions are completed within appropriate timescales.

Implications

South and East Lincolnshire Councils Partnership

This report provides assurance that South Holland District Council takes its responsibility as a landlord seriously and will mitigate against any potential reputational damage or negative impacts to tenants.

Corporate Priorities

This report will support the following South and East Lincolnshire Councils Partnership Sub-Regional Strategy priorities:

- Healthy Lives – Safe housing will lead to the better health of our tenants and everyone that stays or visits the properties.
- Safe and Resilient – Providing community confidence that our homes are well maintained.

Staffing

None.

Workforce Capacity Implications

None.

Constitutional and Legal Implications

None.

Data Protection

None.

Financial

The financial position of the HRA is monitored through regular budget meetings, formally reported to Members through quarterly outturn reports. The Portfolio Holder receives updates at the Governance Clinic. A full recast of the HRA budget was completed at Q1 for revenue and Q2 for capital to ensure sufficient financial resources are in place to fulfil all compliance requirements and complete all identified remedial actions.

Risk Management

None.

Stakeholder / Consultation / Timescales

The Portfolio Holder - Strategic and Operational Housing and the Deputy Chief Executive (Corporate Development) and S151 Officer have been consulted. They continue to be regularly updated as Chair and Sponsor of the Housing Transformation and Improvement Programme Board.

An earlier version of this report was presented to Cabinet on 18 February 2025. To allow effective scrutiny of the performance, it was felt that Performance Monitoring Panel should be informed of Cabinets' views prior to scrutinising the performance. (A similar approach was adopted for the HRA Governance Framework).

Cabinet sought assurance from Officers around:

- robustness and reliability of data – further information added to report for Scrutiny to consider.
- keeping tenants informed about the safety of their home – further information added to report for Scrutiny to consider.
- data and timescales on overdue remedial actions – further information added to report for Scrutiny to consider.

Reputation

Presenting an annual compliance report to Members significantly enhances the Council's reputation by demonstrating a commitment to transparency and accountability. By openly sharing our compliance status, we build trust with stakeholders, including tenants and Members. This proactive approach reassures Members that potential risks are being managed effectively, boosting confidence in our operations. Additionally, demonstrating our adherence to regulations and ethical standards reinforces that we are a responsible social landlord.

Contracts

None.

Crime and Disorder

It is important for Housing Providers to ensure that statutory safety work is carried out to a high standard. Poorly performing landlords can be fined or prosecuted for failing to take the necessary measures to protect tenants and employees.

Equality and Diversity / Human Rights / Safeguarding

The Council is required to consider what adjustments it can reasonably make when carrying out work within a tenant's home to deal with disabilities or other issues arising. Such adjustments are considered on a case-by-case basis.

The Council is in the process of drafting a Vulnerable Persons and Reasonable Adjustments Policy which is designed to support tenants. The Council is committed to making necessary adjustments such as providing additional assistance to meet the diverse needs of our tenants including when accessing their homes to complete compliance checks. This will underscore the dedication of the Council to inclusivity and safety ensuring all tenants feel supported whilst essential safety work is carried out in their homes.

Health and Wellbeing

Registered providers are required to publish Tenant Satisfaction Measures (TSM) data, which includes compliance data. By clearly communicating our compliance with safety regulations, we ensure that tenants feel secure and confident in their homes.

Climate Change and Environment Impact Assessment

Not undertaken.

Acronyms

HHSRS - The Housing Health and Safety Rating System
TSM – Tenant Satisfaction Measures
DCM – Damp Condensation and Mould
RSH – Regulator of Social Housing

Appendices

None.

Background Papers

Document title	**Where the document can be viewed**
SHDC – HRA Governance Framework	HRA_Governance_Framework.pdf
SHDC – Landlord Strategy 2024 -2026 and Transformation Programme for 2024-2026	SHDC_Housing_Landlord_Strategy_2024-2026.pdf
Regulator of Social Housing - Safety and Quality Standard	April_2024_-Safety_and_Quality_Standard_FINAL.pdf

Chronological History of this Report

A report on this item has not been previously considered by a Council body

Report Approval

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