

To: Housing and Homelessness Panel
Date: 6th March 2025
Report of: Director of Housing
Title of Report: Q3 Building Compliance Report for OCC HRA Stock
 September - December 2024

| Introduction | |
|------------------------------|--------------------------------------------------------------|
| Decision being taken: | To note the content of this report. |
| Key decision: | No |
| Cabinet Member: | Councillor Linda Smith, Cabinet Member for Housing |
| Corporate Priority: | Thriving Communities |
| Policy Framework: | Housing, Homelessness and Rough Sleeping Strategy 2023-2028. |

| |
|-----------------------------------------------------|
| Recommendation(s): That Cabinet resolves to: |
| 1. Note the content of this report. |

| Information Exempt From Publication |
|--------------------------------------------|
| None |

| Appendix No. | Appendix Title | Exempt from Publication |
|---------------------|-----------------------|--------------------------------|
| Appendix 1 | Q3 Summary Data | |

1. Introduction and background

1.1. This report outlines the building compliance status for OCC’s HRA stock, covering statutory requirements, reports on compliance, adherence to decency standards as well as the Regulator for Social Housing’s requirements.

- 1.2. The Building Compliance Team within Property Services reports monthly on performance relating to compliance and allows operational and strategic direction to achieve and improve delivery where identified.
- 1.3. A quarterly compliance report (this report) is then produced for the Quarterly Compliance Board currently chaired by the Deputy Chief Executive for Place before a review by CLT, and circulation to relevant members.

2. Executive Summary

- 2.1. Attached in Appendix 1 is the quarterly summary compliance dashboard.
- 2.2. Overall performance for Q3 has been positive, with fourteen of the twenty-one indicators at 100%, three within the KPI threshold, and one (installation of Smartlink monitors) not having a KPI but reported for information only. The body of the report below covers all indicators which are not at 100% irrespective of the KPI parameters.
- 2.3. There remains a challenge with getting data returns in a timely manner, largely due to the manual nature of the processes involved. This is particularly relevant to external contractors who have no access to our systems to update jobs or works.
- 2.4. To resolve this, work continues to develop the contractor portal access to QL which will allow real-time monitoring and improve our ability to manage and report on contractor performance. It is anticipated that contractor testing will be undertaken within the next quarter with the portal going live in April 2025. In the interim, colleagues are actively working with contractors to ensure timely data receipt.
- 2.5. There is a need for continued auditing of asset data via various works streams such as the rolling stock condition survey and insurance building surveys which have identified omissions in the asset lists e.g. including three passenger lifts, which have now been included in the planned maintenance programmes.

- 2.6. A review of stairlift data identified one hundred and seventy-seven stairlifts that are on the servicing contract but not being certificated under the LOLER regulations. With a more robust approach being introduced to building compliance these have now been added to the LOLER test and certification programme. Other compliance areas are being audited to ensure data accuracy.
- 2.7. Identified issues are currently being resolved, significantly reducing risk to the Council, providing greater confidence in our knowledge base of the assets for which the Council is responsible and providing assurance going forwards that servicing and certification will cover all OCC's responsibilities.
- 2.8. A schedule of auditing is currently being developed to support each delivery workstream and service area. An audit programme will be rolled out with the first audit scheduled to commence in March 2025.
- 2.9. By way of a trial in this area, we have undertaken a compliance audit on properties used by the Housing Needs Team and are working with them to deliver corrective actions.
- 2.10. Training remains a key focus for Property Services, and the Compliance Team is contributing to the development of training, and the identification of what training is needed by which personnel. The team has recently written two eLearning modules, Legionella and Asbestos Awareness to be rolled out to all site-based staff.

3. Exception Report on Compliance Performance

3.1 Domestic Electrical Safety

| | |
|--------------------------------------------------------------------------------|---------------|
| % of domestic sites with a compliant status (ie satisfactory EICR, 5-year EIC) | 94.60% |
|--------------------------------------------------------------------------------|---------------|

- 3.1.1. The effects of the change of testing frequency from 10-years, through 7-years, to 5-years, has largely been addressed. Non-compliant properties include:
- 3.1.2. 218 properties with overdue tests resulting from no access. ODS are currently working with Housing Management to gain access to these properties.

3.1.3. 172 properties with unsatisfactory certificates which require major remedial works, mainly rewires. ODS are again working with Housing Management to arrange access to these properties or resolve hoarding/overcrowding issues.

3.1.4. In both instances the combined efforts are getting positive results which will reflect in improved performance over Q4.

3.2 Communal Electrical Safety

| | |
|-------------------------------------------------------------------------------------------------------------------------------|---------------|
| % of communal sites with a compliant status (ie satisfactory EICR, 5-year EIC) (including, satellite offices & boiler houses) | 99.34% |
|-------------------------------------------------------------------------------------------------------------------------------|---------------|

4. There are three properties with overdue tests. Pound House, due for completion in January, Tompson Terrace which will become void in January thereby allowing access to the electric cupboard, and Blackbird Leys Road which is awaiting quote approval.

3.2.1. It is projected that 100% Compliance will be achieved during Q4.

3.3 Emergency Lighting

| | |
|--------------------------------------------------------------------------------------------------------------|---------------|
| % of emergency lighting sites with a compliant status (ie passed certificate for 3hr annual drain down test) | 99.81% |
|--------------------------------------------------------------------------------------------------------------|---------------|

3.3.1. Compliance with statutory testing regimes has very significantly improved across the quarter (Q1 - 49.5%; Q3 - 99.71%) with the majority of identified issues being resolved. One site is outstanding due to access issues. This test is booked for January on completion of which we will be reporting 100% compliance.

3.4 Fire doors

3.4.1. A fire door and hatch inspection programme has been commissioned through ODS, which commenced on 20th January and is scheduled to be completed before the end of March. Every asset will be tagged and information, including photographs and every individual report, will be uploaded to QL. This data will be used to inform future fire-door maintenance and replacement programs.

3.5 FRA Inspection Actions - Blocks Overdue

| | |
|----------------------------------------------------------------------------------------------|---------------|
| % of actions which are overdue, having gone past the FRA suggested timeframe for completion. | 50.71% |
|----------------------------------------------------------------------------------------------|---------------|

3.5.1. Quarterly compliance has fallen significantly. Most FRA assessments were undertaken in June/July which means a number of medium risk actions become overdue in December, greatly impacting on compliance performance.

3.5.2. The Fire Safety team has continued to work through these and has prioritised the high-risk actions first. Of the 3,450 HRA actions, 980 were completed by December. It is projected that another tranche of over 100 actions will be completed in January with a minimum of 500 further completions during Q4.

3.5.3. These actions include a large number of individual items, such as doors, which fall into overarching programmes which have been developed for ODS to deliver within the next twelve to eighteen months.

3.5.4. A Corporate Fire Safety manager has been recruited, and we are currently preparing recruitment for Fire Risk Assessors to oversee the process and deliver FRAs internally to ensure a consistent approach.

3.6 Fire Alarms and equipment test & inspection

| | |
|----------------------------------------------------------------------------------------------------------------------------------------|---------------|
| % of HRA fire alarms sites (communal, domestic, satellite offices, hostel, TA, sheltered) with compliant 3 monthly periodic inspection | 93.34% |
|----------------------------------------------------------------------------------------------------------------------------------------|---------------|

3.6.1. Our Fire Alarm inspection compliance has been below target over the quarter and was significantly down in December resulting from staff sickness within the contractor workforce. At a meeting with the contractor, OCC received assurance that changes have been made to ensure business continuity going forward and that resources have been allocated to swiftly address the backlog.

3.6.2. The current Sureserve contracted inspection cycle for fire alarms is 3 monthly. The Code of Practice as detailed in BS5839-1 states that these inspections need to be undertaken by a trained and competent person every six months, supported by weekly tests and monthly visual inspection undertaken by client employees in line with current practice. We are currently in discussion with ODS

to ensure all such inspections are undertaken and recorded – ODS are currently developing their tablets to allow live-time reporting and analysis.

3.7 Asbestos Management

| | |
|--------------------------------------------------------------------------------------------------------------------------------------|---------------|
| % of HRA communal areas with a compliant communal inspection report inc. communication centers, satellite offices and boiler houses. | 99.78% |
|--------------------------------------------------------------------------------------------------------------------------------------|---------------|

5. Quarterly performance was impacted by poor compliance in October. The November and December Asbestos inspections ran at 100%, leaving the quarterly performance Amber. It is anticipated that 100% compliance will be achieved in Q4.

3.8 Lift Safety

| | |
|------------------------------------------------------------------------------------------------------------------------------------|---------------|
| % of stairlifts with 6 monthly service and maintenance visits undertaken. [NOTE - Servicing Performance Indicator] (Council stock) | 94.50% |
|------------------------------------------------------------------------------------------------------------------------------------|---------------|

3.8.1. In December a Compliance Team audit of certification against servicing records identified 177 domestic stairlifts on the service contract that were not on the LOLER certification programme. These have been added to the contract as of 23/01/25 and inspections will commence in February. This will impinge on compliance performance until this backlog has been addressed, although we propose adding assets after the test to ensure that the data on the servicing contract is correct.

3.8.2. Audit also identified three passenger lifts not on the test and inspection programme for LOLER compliance. These have now been added to contract, and all will be tested and certificated during January 2025.

3.9 Lightning Protection

| | |
|---------------------------------------------------------------------------------------------|---------------|
| % of lightning protection systems (general needs and sheltered sites tested with 11 months) | 66.67% |
|---------------------------------------------------------------------------------------------|---------------|

The three non-compliant systems are at:

- 3.9.1. Plowman Tower. Remedial works are scheduled for January.

3.9.2. 37-59 Pennywell Drive. Major works are required which will necessitate road closures. Works are scheduled for completion in April.

3.9.3. 9-16 Snow House. Major works are required, but start is delayed awaiting confirmation of responsibility.

3.10 Bollard & Gates

3.10.1. To date no installations requiring statutory inspection have been identified as HRA assets, although the Compliance Team are undertaking an asset review to confirm.

3.11 Damp and Mould

3.11.1. We have installed 37 Smartlink systems, each equipped with multiple damp monitors that collect data on the home environment of our tenants. This allows us to proactively address issues related to damp and mould.

3.11.2. Eleven tenants have downloaded the app and are using the tool to help prevent damp and mould in their home.

3.11.3. Training of staff from the Damp and Mould team to monitor and manage the data will be commencing shortly.

3.12 Decency Standards

3.12.1. Stock condition surveys continue to progress. Results to date are being used to inform the five-year capital investment programme to improve decency across the portfolio which is currently standing at 96.7% based on latest data from the stock condition surveys (74.4% of stock inspected).

3.12.2. The stock condition survey will be undertaken annually to ensure continued monitoring of stock decency.

4. Conclusion

4.1. Historically OCC's recording of certification, maintenance programmes and asset listings has been largely done manually and therefore not in a system

driven manner, risking poor or missing data and poor performance on testing regimes. Much of this can be attributed to the changeover of systems around 2018/19 and introduction of QL. However, QL has developed considerably, enabling uploading and management of assets in a better and more reliable way. Areas of the QL modules continue to improve the way OCC operates in these areas (such as the contractor portal).

- 4.2. This report demonstrates the improvements and measures being taken by the delivery and compliance teams in Property Services, to identify areas of omission and concern and implement effective corrective actions to maintain and improve OCC's high standard of compliance in its social housing stock within continued development.

| | |
|----------------------------|--------------------------------------------------------------|
| Report author | Aidan Heed |
| Job title | Senior Surveyor (Interim) HRA |
| Service area or department | Property Services |
| Telephone | 07483 010896 |
| e-mail | ahead@oxford.gov.uk |

| | |
|---------------------------|--------------------------------------------------------|
| Background Papers: | |
| 1 | Appendix 1 – Summary of Quarterly Compliance Dashboard |
| 2 | |
| 3 | |
| 4 | |

This page is intentionally left blank