

Appendix A - RSH – Consumer Standards Draft Improvement Plan – March 2025

Core Findings	Areas of improvement and development	Risk Identification	Key Deliverable	RAG Status	Target date of completion
<b>Oversight, Scrutiny and Performance Monitoring</b>	Governance structure	High	Governance structure has been established which provides an effective oversight of all compliance related activities and performance. The weekly task and finish group reports monthly into the Compliance forum, Housing Portfolio Holder, Leader and Cabinet. Monthly reporting to RSH on all areas of compliance related activities and performance.	Completed	
	Develop as part of the process for all compliance related activities a quality assurance framework to support the key aims of the strategic management plans. include a range of independent and in-house quality assurance arrangements.	High	Compliance Policy Framework now established with associated process for quality assurance being reviewed and updated for each compliance area. Signed off – Compliance Policy Framework, Gas, Electric and Water policies.	Completed	
		High	A review of the current performance measures for all activities including a review of the HTS KPI's is in progress to ensure a robust performance framework is in place to demonstrate statutory obligations are being met.	In progress	June 2025
	Undertake an independent quality assurance of FRAs by a third-party accredited Fire Risk Assessor.	High	Current process is for each contractor to independently verify Fire Risk assessments by senior assessor to ensure they are compliant with BAFESP 205.	In progress	June 2025
		High	Team will be undertaking further validation of FRA by our external Fire Safety Engineer Urban Change.	In progress	August 2025
	Gas - Implement existing policy provision for an independent external audit	High	Ongoing external validation commenced in October 2024. 10% of stock is now audited and this involves both site visits and a desktop exercise.	In progress	September 2025
	Establish an effective suite of performance management KPI's to evidence all statutory and regulatory obligations and duties are being delivered.	High	Undertake a comprehensive review of the existing contractual suite of KPI's for all compliance testing for HTS and HDC. Ensuring performance reporting and measures have sufficient oversight of key landlord compliance activities/work. – The KPI review will commence as part of the contractual arrangement's changes being considered from April through to June 2025.	In progress	July 2025
		High	Electric – review and adjust electrical KPI to demonstrate a broader range of assurance related to electrical safety aspects including the outcomes from quality assurance. To be picked up as part of the wider review of compliance reporting.	Not started	September 2025

		High	Review HTS current emergency lighting reporting and performance monitoring as part of the wider assurance measures and KPI review. MRI has the functionality to pick up and review data.	In progress	August 2025
		High	Gas – Review reporting format for homes with capped gas and consider 2 / 3 programme for periodic validation of assets. Annual inspections are undertaken and LGSR provided.	In progress	May 2025
<b>Data (including hierarchy, validation, and reconciliation)</b>	Data management and quality has been highlighted as a concern. The Council needs to adopt a structured approach to data management for all compliance related activities. Many of the current systems are being manually managed through spreadsheets resulting in an inability to effectively manage both data and performance.	High	Determine what systems should be retained / developed / introduced – FRA data will continue to be held within Risk Base due to the data collection requirements of the contractors currently undertaking FRAs and it is reporting functionality. All remaining compliance functions will be managed in the MRI system.	Completed	
		High	Validation of data is subject to internal and external audits via internal and external auditing of the system and examination of the data through desk top exercises.	In progress	Ongoing – review annually
		High	The Asset Management MRI system is now live with data being cleansed prior to being transferred. All compliance data with the exception of FRAs will be stored in the MRI Asset Management System. FRA data will continue to be stored in Risk Base.	In progress	May 2025
		High	Continued development of the performance reporting tools within both the MRI and Risk Base system to ensure effective performance monitoring. Develop a suite of dashboard reports for all compliance related activities.	In progress	May 2025
		High	HTS data collection – All responsive repair reports will be recorded and monitored on to the MRI repairs module.	In progress	May 2025
	Formally liaise with Essex Fire and Rescue Service on all aspects of data requirements.	High	Regular site audits continue with ongoing engagement already in place with EFRS on all aspects of data requirement. Ongoing, regular review PEEP's, block plans and compliance certification in place.	Completed	
	Consult with Fire Risk Assessors to preserve the original FRA action date.	High	A review of the reporting functionality within Risk Base has been undertaken and the system reports in the original date works were identified. All FRA reports identify the original reporting date.	Completed	

	Fire actions/tasks should ensure that when they are when closed/completed this is evidenced and recorded with supporting photographic/certification/justification.	High	The data plan and procedures ensure storage of the evidence of both pre, and post works is named and recorded consistently and is accessible for all within Risk Base. Certification is held within MRI and cross checked. Both systems are completely auditable and transparent. All users are accountable for the actions recorded ensuring the final closure of the FRAs is controlled and restricted.	Completed	
	Data management of Fire door inspections must ensure all requirements of Reg 10 Fire door inspections, is appropriately recorded.	High	Fire door inspections continue with monthly, quarterly, and annual inspection programmes in progress, with all programme data being recorded in Risk Base. To support the requirements of the regulation additional external support is in place to undertake annual and quarterly inspections. The action remains in progress due to monthly inspection data not yet being loaded into Risk Base. The new HTS environment system Solavista has the capability to link with both Risk Base and MRI asset therefore allowing a seamless data transfer of the monthly inspections undertaken by HTS.	In progress	August 2026
	Review current data source for Fire Alarm detection and performance monitoring and develop plan for installation.	High	AICO system installation, continues to be rolled out across the stock aligned with the electrical servicing programme. 38% of stock currently fitted with the AICO system with completion of the programme set for 2028/2029. Plan has been developed for installation and data source is Risk Base.	In progress	July 2026
	Wider stock profile required to ensure compliance.	Low	The Council has committed to undertaking a 100% Stock condition survey of all stock, currently 33% of stock has been surveyed and the programme of surveying continues with completion date of all stock by March 2026.	In progress	March 2026
	Solar Panel management plan.	Low	No maintenance responsibility for existing panels. Management plan will be required for future new builds and energy efficiency measures and should be considered as part of the wider policy review in collaboration with the regeneration department.	In progress	March 2026
	Identify full extent of low surface temperature space heaters provided within Supported Housing units and develop a risk-based programme to install these.	High	Reviewing programme of renewal and upgrades to District and Communal Heating systems to develop a future scope and programme of works to remove low surface temperature space heaters.	In progress	March 2026

	Data storage CO detector alarms – MRI.	Low	A plan is being developed to ensure accurate information is recorded on MRI asset management system. The plan will align to the AICO delivery programme. Further interrogation of all systems including HTS is required to identify properties with/without basic fire alarm provision.	In progress	May 2025
		Low	To support the programme there is a requirement to implement a process for expiring equipment. Installation date data is held both on MRI Asset and is displayed on the AICO HomeLink Dashboard.	In progress	August 2025
	Data storage concealed flues.	Low	MRI data plan to include provision of data storage associated with concealed flues.	In progress	March 2026
	Process for validating pressure vessel assets.	Low	MRI data plan to include provision of data storage associated with validating pressure vessels.	In progress	March 2025
	Develop an asbestos needs analysis, data quality evaluation and data migration proposal as part of the data plan.	High	Key that all data associated with Asbestos is managed through the MRI system. Forms part of the wider install and roll out of the MRI system.	In progress	July 2025
<b>Capacity and skills assessment</b>	Develop a competency framework to define minimum levels of qualifications and experience required to demonstrate knowledge and skills for each role with responsibilities for resident health and safety and develop an associated training matrix.	High	The framework should consider all levels within the organisational structure, in addition to provisions for Members and involved residents.	In progress	July 2025
	Asbestos – review approach to minor works – HTS to train workforce to undertake minor low risk non notifiable asbestos works.	High			
	Joint approach to training being adopted for all internal and external teams.	Med			
		High	HTS and other Council appointed contractors are required to demonstrate competencies of their subcontractors covering all compliance areas.	Not Started	July 2025
	High	Technical review currently underway will provide a capacity and skills assessment of future requirements.	In progress	September 2025	

		High	Increase / support resources to support short-term technical requirements whilst restructure and assessment of services is undertaken. A number of additional resources have been appointed on an interim basis whilst restructuring of teams is underway with a further 4 permanent roles agreed as part of growth bid for 25/26 budget.	In progress	July 2025
		High	Consider extending third-party quality assurance activities in the interim to increase capacity within HOPs.	In progress	July 2025
		High	Training programme to be developed as part of the technical review, PPP and one to ones.	In progress	July 2025 / Ongoing
		High	Basic compliance awareness training identified and programme now in place. Training specifically to ensure officers are aware of the risks associated with compliance failures and specifically focusing on Fire Safety for the wider Housing team. Ensure basic training forms part of the induction programme for all new starters. Annual updates required for all staff.	In progress	Ongoing
<b>Compliance strategy supported by policy and procedural review and implementation</b>	Service requires a Strategic Management Plan with aligned and updated policies and procedures for all compliance areas including emergencies/ out of hours compliance related activities. key areas to be included. <ul style="list-style-type: none"> <li>• Gas</li> <li>• Electric</li> <li>• Fire Safety</li> <li>• Lifts</li> <li>• Water Hygiene</li> <li>• Asbestos</li> <li>• Damp and mould</li> </ul>	High	Develop a strategic management plan and compliance policy framework to ensure all assets are included regardless of height. Compliance Policy Framework completed.	In progress	September 2025
		Med	Develop a risk register for Housing Operations Property and a reporting tool for H & S, near miss log, property defects, disrepair, house fires etc.	In progress	September 2025
		Med	Risk register is in draft.	In progress	September 2025
		Med	Requirement to improve the links between Asset Management and procurement on contract awards for compliance related activities.	In progress	May 2025

		Med	Electric - Review current arrangements for record keeping for emergency lighting tests. Where required review risk assessment to potentially extend the period between short duration tests.	In progress	May 2025
		Med	Lifts - Review requirement for insurance inspection contractor to undertake electrical inspections and determine if these should be completed or removed from the inspection schedule.	Completed	
		High	Fire - Develop a clear strategy and guidance for blocks to determine provision and requirements for the use of firefighting equipment – Following recommendation from EFRS all fire fighting equipment has been removed from supported housing units with the exception of equipment in the lift rooms.	Completed	
		High	Gas – Ensure information regarding inadequacies in the gas rising main installations are considered and captured as part of the FRA and BSC.	Not started	July 2025
		High	Process in place but requires written process for all associated lift activities.	Not started	September 2025
		Med	Gas – Review gas /co incident procedures including use of a competent independent resource to undertake investigations – consider use of newly appointed independent quality assurance provision.	Not started	July 2025
		High	Develop process maps / plans to ensure planned reactive maintenance activities consider the impact of gas safety works planned or reactive where aspects of ventilation may be affected.	Not started	July 2025
		High	Asbestos - Review reactive works processes to ensure they are compliant with CDM requirements in relation to asbestos and evidence process associated with type 4 destructive surveys.	Completed	
		High	Fire - Determine all building conversions and dates of conversions and whether the buildings would be considered Section 257 HMO, review stay-put policy.	Completed	
		Low	Consider inclusion in the programme of Fire Risk Assessment of maisonette blocks. Already contained with programme or FRAs.	Not started	September 2025
		Med	Review PAT testing requirements – aim to remove from H & S to HOPs.	Not started	September 2025
		Low	Complete a risk assessment and develop a strategy process for PAT testing.	In progress	March 2026
		Med	Water - Develop a strategy for the removal of shared and individual CWST – Survey currently underway.	In progress	September 2025
		High	Management plan to include LRA frequencies and approach.	In progress	July 2025
		Med	Water – Review scope of LRA to ensure it includes all relevant parts of the building and ensure LA are reflect current resourcing at the council.	In progress	September 2025

		High	Water Hygiene process to clearly define process for dealing with suspected incidence of legionnaires disease.	Not started	July 2025
		High	Water – Design and implement programme of quality assurances for assurance that their obligations are being adequately delivered. To include an independent, review of a sample of LRA.	Not started	July 2025
<b>IT systems mobilisation and interface</b>	Develop a data and transition plan and change control processes for all areas of compliance data management.	High	Gas - Prior to full implementation of MRI explore with HTS the potential for the Council's QA contractor to have view only access to HTS Callsys. Process already in place to enable QA contractor to audit 10% of servicing on a monthly basis.	Completed	
	Define and prioritise compliance system requirements and consider extending systems as required.	High	Ahead of full implementation of MRI develop a range of checks and balances to ensure inspection reports are validated not uploaded as satisfaction without a defect being actioned. Current inhouse validation process in place requires written procedure	In progress	July 2025
	Develop and review process for receipt of regular data downloads from legionella contractors' system.	Low	Process already in place for monitoring performance requires written procedure.	In progress	March 2026
	Review current arrangements for recording onsite water safety checks.	High	Requires review and audit of current procedures.	Not started	July 2025
	MRI to consider recording all lift equipment assets within the new database.	Med	Stair, passenger and through floor lifts are recorded within MRI.	Completed	
	Lifts – implement contractor portal for use by the wider team.	Med	Functionality not available in MRI assets – review requirements with key officer.	Not started	September 2025
<b>Remedial action definition and management. Including risk mitigation in lieu of actions completion</b>	Review stay-put policy in conjunction with EFRS where applicable to align with Fire Risk Assessment timescale/priority for works.	High	Ongoing with EFRS in conjunction with specialist advice from Fire Engineer. Reviews currently underway on 3 high rise blocks.	In progress	June 2025



	Stock condition survey to include the identification and validation of the status of lead pipework present in stock.	Med	M & E stock condition survey required - to develop brief and procurement process.	Not started	September 2025
	Consider use of sprinkler systems in existing buildings to mitigate and reduce risk where required.	Low	Will be written into the Fire Safety Policy and will be scheme specific and where appropriate.	In progress	June 2025
	CCTV survey of ventilation ducts within stock – programme of ongoing surveys.	Med	All communal sites identified and surveying in progress.	In progress	September 2025
	Harlow adopt a weekly test of the fireman's override controls as part of the cyclical site checks for Supported Housing and general needs properties.	Med	Process is in place for testing system. Storage of data regarding testing to be discussed and developed.	In progress	September 2025
	Lifts – Harlow implement a weekly lift call system test as part of their onsite weekly checks	Med	Develop a process and mechanism for recording test outcome.	In progress	September 2025
<b>Safety information provision to all who require it</b>	Develop a resident engagement strategy including review of the format and accessibility and relevance of compliance information available for residents.	Med	Engagement strategy currently in place but not compliance specific needs to include all elements specifically relating to compliance – Task and Finish group established to review strategy.	In progress	September 2025
	Review and update current fire safety block plans and review current communication held on site for both residents and EFRS.	High	The annual review of safety block plans is currently underway.	In progress	July 2025
	Asbestos Information for residents.	High	Consider options for providing tenants with a summary of the asbestos in their homes.	Not started	July 2025
	Ensure Fire Strategies for block are updated and communicated to residents.	High	Develop a communication strategy / plan for disseminating information to residents. Currently Fire Safety plans are displayed within the notice boards in the blocks and Fire safety advice / information is provided for both new and existing tenants as part of the sign up.	Not started	July 2025
	Provide assessable safety information for residents. To cover all compliance related areas, and to include general information to the risks associated with charging a range of electrical equipment and devices e scooters, cycles etc.	Med	Develop a comprehensive set of information packs covering all aspects of compliance. As part of the engagement strategy consider methods of engagement and consultation.	In progress	September 2025
		Med	Consult with residents on preferred methods of	Not	September



			communication determine a format for information sharing.	started	2025
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Key (RAG status)

Not started	
In progress	
Completed	

Version Control

Version 1	25.3.2025
Document Owner:	Alan Townshend, Executive Director