

cross cutting themes			Ref	project	purpose and outcome	milestone products	dates	status	Risk to tenant safety and any mitigation measures	update	Owner
D	A	G									
		Y	1	review of governance arrangements	Having a clear structure for the oversight and scrutiny of the management of this function and its outputs will ensure that all levels of the organisation are focused on making sure we keep tenants safe	overview document and diagram to show optimal governance arrangements Implement new arrangements by setting up relevant groups as set out in the new governance design				this action has been completed The EICR working group has brought the communal EICRs up to 100% and has made a number of process improvements to minimise the number of outstanding domestic EICRs and to also minimise the number of EICRs expiring in future The FRA working group is going to be looking at revised reports that forecast and track the progress of remediation actions more effectively. The monthly programme monitoring meeting picks up the forecasting of completions and spend on our capital delivery projects, including Fire Safety and Compliance A new task and finish group has been set up to respond to non compliance on CO and smoke detection	Assistant Director of HOPs
		Y	2	develop quality assurance framework for all compliance areas	Articulate when, how, under what circumstances and by whom, compliance information will be checked or validated by third parties, so that we can be confident about tenant safety information produced from these sources	overview document explaining which compliance documents will be checked by whom, when and how, identifying any arrangements that need to be put in place but are not currently being implemented, showing short term interim arrangements and longer term arrangements where these may differ identify and plan for any new requirements and produce a plan, with detailed timescales about how these will be implemented Implement new arrangements as outlined in the plan above	20/06/25		low risk, this information will not change anything, we are just documenting it in a more holistic way risk not quantified, we do not know if any new arrangements will need to be made risk not quantified, we do not know if any new arrangements will need to be made	This is on track to be completed by 20th June This work will begin after 20th June, when the document upon which the plan will be based, is finalised	Operations Manager (Compliance)
Y			3	Develop an effective suite of performance measures, including KPIs for strategic reporting and SPIs for operational management	Set out the measures that will be reported against and document the calculation of these measures and the data validation process, so that the Council can rely on the information it receives, to know with certainty that tenants are being kept safe	list of KPIs documented calculation methods documented data source and validation behind each measure	31/09/25		low risk as most of these are covered in the TSM guidance low risk. This task is performed by experienced professionals, using industry standard software, so should be done correctly. This milestone task provides an extra level of assurance	This item has been completed The vast majority of these have been done because they are TSMs, but we have some additional ones that will be documented when our resource joins us in July 2025 This will be done when our resource joins us in July 2025	Assistant Operations Manager
						checklist of compliance related components showing what data is being held against them and to identify any the extent of any gaps	30/10/25		low risk, we already have a comprehensive list, but it is old and needs to be checked		

Y				4	Develop an information strategy for compliance activities	understand and document which systems and processes are being used to capture and manage compliance data, so that the Council can rely on the integrity of the data it procudes on whether tenants are being kep safe	document which systems are used to record different aspects of compliance information and how this is derived and used	31/09/25		low risk, we do not have a wide range of systems	compliance systems resource starts July 2025 and comes from Westminster City Council, where they achieved a C1	Assistant Operations Manager
							devise a sub section of the document that shows that all requirements of Reg 10 Fire door inspections are appropriately recorded	30/10/25		low risk, we are already doing reg 10 door inspections		
							devise a sub section of the document to articulate a data collection strategy for any areas of incomplete data, this may include instructing surveys, migrating data from third party sources, or additional validation activities	30/10/25		low risk, we are already monitoring our safety compliance to ensure that tenants are safe. Any missing data is therefore more likely to be around compontent condition, which would be used for component replacement planing. Even if a component is old and needs replacing, we can still satisfy ourselves that it is safe		
y				5	get compliance data onto MRI	informaiton we rely on to keep tenants safe should be reliable and robust and in a centralised system	load 5 of the big 6 compliance areas onto MRI				this action has been completed	Assistant Operations Manager
							get asbestos information turned into data rather than PDFs	30/09/25		low risk, detailed asbestos records already exist and there is a dedicated asbestos manager	In progress - Contact has been made with TEAMS that manage the information system used by our contractor to find out what data can be extracted and in what format.	
							load all asbestos data into MRI	30/09/25				
Y	Y	Y		6	Get MRI compliance reports running and automated and amalgamate these with informaiton from Risk Base	Ensure that the central software system produces accurate and complete reports to produce the agreed KPIs so that the Council can know how it is performing against standards it has set for itself to keep tenants	Design reports	30/09/25		low risk, existing arrangements work and reports are produced but the process is labour intensive and inefficient. This action represents an improvement in operational processes, not necessarily an improvement in tenant safety	compliance systems resource starts July 2025 and will work with consultants from MRI to develop a range of reports	Assistant Operations Manager
							Build reports (including exporting data from both MRI and Risk Base to a data universe where combined reports can be run	31/11/25				
				7	Launch a full range of updated policies and procedures for all compliance areas including emergencies, and out of hours compliance activities	All aspects of tenants safety should be reflected in policies that are clear and readily available, so that there is no ambiguity or doubt	Test reports	31/12/25				Operations Manager (Compliance)
							DMT to review and approve or finalise the existing draft policy framework and five policies	31/08/25				
							Damp and mould policy to be drafted and existing Asbestos policy to be reviewed and revised	30/09/25				
							write a checklist of all M&E items and check whether they would all be covered under the existing suite of policies	30/06/25				
	y	y		8	document high level processes and procuedures for high risk areas, to sit beneath the policies	there should be complete clarity on how to administer functions that keep tenants safe	Amend existing policies or write new ones if to accommodate any M&E assets that are not covered by existing policies	31/07/25		low risk as policies already exist. They are being reviewed and improved upon.	The repairs policy is being revised and will go to Cabinet in September for sign off. It will be going to the leaseholder standards panel in June 25.	Operations Manager (Compliance)
							scope which processes should be developed and plan their design and implementation	31/9/25		low risk, revisions are made to working processes through collaborative working groups on a risk baed approach. The Fire and Building Safety team are reviewing all aspects of performance in this area, according to risk, so any immediate risk is being picked up and day to day issues resolved. Therefore even though the formal suite of processes may not be launched yet, working practices on the ground are being revised as necessary.	The formal work to revisew and revise processes has not begun yet, but the opertaional work of reviewing how we do things, starting in high risk areas has. We have started with the management of the EICRs, as that represents a risk to compliance. The working group have revised a number of processes and introduced operational improvements and efficiencies	
							design reviesed processes	31/01/26				

						A reconfiguration of Risk Base, with detailed sub categories of actions and with statuses showing unallocated, in progress, on site and completed	30/07/25		This poses a high risk to tenants safety, which is mitigated by the list of mitigation actions on the 'mitigation' tab. We have assessed the risk of fire by completing all the FRAs and we are taking precautions to prevent the risk of fire by having prioritised closing down the FRA actions on our tall buildings and by recruiting an experienced and qualified Head of Fire and Building Safety to review existing risk areas and to mitigate risk in the period between remedial actions being identified and when they are completed. We have also recruited an experienced Assistant Director to continually improve appropriate oversight of key safety information	There have been several meetings between the Fire Safety team and the software provider Risk Base to discuss configuration. Risk Base are prioritising this and we aim to have the system configured correctly by the end of July		
	Y		9	Ensure all FRA actions are allocated to a programme or an individual	Make sure there is a robust plan in place to carry out any outstanding actions to keep tenants safe in the event of a fire	a report from Risk Base, reconciled with MRI, showing that all FRA actions are allocated to a programme (planned works) or an individual (Housing Management	30/09/25			Once Risk Base is correctly configured, all actions can be allocated to a programme or an individual, depending on risk. In the mean time, actions are still being assigned to departments or programmes and work is still underway (see separate report on FRA actions)		Head of Fire and Building Safety
						check that FRA actions that are completed or are old and outstanding are recorded correctly	31/08/25					
						check that all FRA actions marked as complete have documented evidence that is named correctly	31/08/25					
	Y	Y	10	conduct a check of FRA data for completeness and accuracy	check that data upon which we make decisions around tenant safety is reliable and accurate	check that all FRA certificates are named consistently	31/08/25					
						check that current outstanding FRA actions are categorised correctly and are correct	31/08/25			Low risk, all actions and FRA data is recorded on Risk Base and is reviewed regularly. This action is a check to provide additional assurance.	the new Head of Fire and Building Safety will oversee this process	Head of Fire and Building Safety
	Y			review building classifications and associated survey requirements	check that information that governs which data we gather on what type of buildings is correct, so that we can keep tenants safe	review classifications of converted buildings to see if they are HMOs	31/08/25					
						check that correct survey requirements are recorded against each asset based on relevant criteria	31/08/25			Low risk, these are already recorded, this action is to verify and check	the new Head of Fire and Building Safety will oversee this process	Head of Fire and Building Safety
						commission review - contract agreed and purchase order raised					PO raised and T&Cs of review agreed	
						commence review - kick off meeting taken place and workshops booked	02/06/25				kick off meeting taken place, information template filled in, workshop attendees arranged, information requested by ARK has been indexed and put into folder. Asset data lead met ARK rep to discuss data requirements for sampling	
						report issued	30/09/25				three month period allowed for review	
	Y		12	Commission a third party independent assurance review of compliance function	Obtain assurance that we can rely on our current practices and data to keep tenants safe	incorporate recommendations into improvement plan	15/10/25			medium risk, we have crossed referenced our action plan with the recommendations of the previous review. The risk of this new review discovering something that was previously unknown to us is not high.	will not start until the report has been received	Assistant Director of HOPs