

Cheltenham Borough Council Cabinet Housing Committee

Meeting date: 11 June 2025

Meeting time: 6.00 pm

Meeting venue: Council Chamber - Municipal Offices

Membership:

Councillor Flo Clucas, Councillor Jan Foster, Councillor Julian Tooke and Councillor Suzanne Williams

Ian Mason (Tenant Representative), Bozena Tarnawska (Leaseholder Representative) and Agnieszka Wisniewska (Tenant Representative)

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- 1 Apologies
- 2 Declarations of interest
- 3 Public and Member Questions
- 4 Minutes of the last meeting (Pages 3 8)
- 5 CEO Briefing (Verbal)
- 6 Compliance Strategy and Policies (Pages 9 108)
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- 9 Housing Complaints and Compliments Report Quarter 4 (Pages 159 184)
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Cabinet Housing Committee Minutes

17 March 2025

Present:

Councillors:

Meeting date:

Flo Clucas, Jan Foster, Richard Pineger, Julian Tooke and Suzanne Williams

Cooptees:

Ian Mason

Also in attendance:

Gareth Edmundson (Chief Executive), Claire Hughes (Director of Governance, Housing and Communities) and Paul Leo (Interim Director Housing Transformation) and Kate Seeley (Counter Fraud and Enforcement Unit)

1 Apologies

Apologies were received from Bozena Tawnawska and Agnieszka Wisniewska.

2 Declarations of interest

There were none.

3 Public and Member Questions

There were none.

4 Minutes of the last meeting

To approve the minutes of the meeting held on 19 February 2025.

RESOLVED THAT The minutes of the meeting held on 19 February 2025 were signed as a correct record.

5 CEO Briefing (Verbal Update)

Objective: An update from the Chief Executive on key issues which may be of interest to the Cabinet Housing Committee.

The Chief Executive addressed the committee and confirmed that:

- The changes of line management discussed at a previous meeting had come into effect with housing now sitting under Claire Hughes as the Director of Governance, Housing and Communities. Further details will be provided at future meetings as the transformation progresses.
- 28% of stock condition surveys have now been completed and will be analysed to ensure we have the quality information needed to take core decisions around investment.
- All Gloucestershire councils will be submitting a joint letter to the government, subject to approval this week, setting out the interim proposals for local government reorganisation in Gloucestershire. There are broadly three proposals a single countywide unitary in line with the current county boundary geography, two unitary authorities based on an East and West split, and a Greater Gloucester model based on an expanded Gloucester City footprint with two or three unitary models sitting underneath. Final proposals will be submitted in November and consultation will be taking place to decide whether all three proposals are submitted. Final determination by the government is currently scheduled for April/May 2026. Cheltenham Borough Council (CBC) have voted to support the two unitary authority proposal.
- The Chief Executive had worked with an operational team to insulate a loft in the previous week. He highlighted the importance of seeing the impact of damp, mould and condensation on the house and tenants and the work being carried out to resolve the issue. He had also toured the Depot and discussed the potential for making things more efficient and improving the repairs process with colleagues. He thanked the team for showing the exemplary customer service delivered.

The committee's discussion raised the following points:

- They echoed the value of seeing the work being carried out on the ground after the committee had visited some empty properties in the previous week and the importance of listening to the colleagues carrying out the work. The way teams work in partnership with tenants was also praised.

6 Property Compliance Performance and stock condition project update

Objective: To provide the Committee with an understanding of our property compliance status and the planned improvements needed to address areas of noncompliance.

The Interim Housing Transformation Director addressed the Committee and provided an update on compliance figures for the end of February 2025:

 There are two homes with out-of-date gas certificates, an increase from one at the end of January. Legal action is being undertaken to gain access to both. One tenancy has been terminated and gas will be capped or certificated

- once access is achieved. This means gas certification is 99.95% compliant but we are aiming to return to 100% as soon as possible.
- Capped gas supplies have remained consistent, with the majority occurring in void properties. Where properties are occupied contact is being maintained with the tenant and support being provided.
- Overdue fire risk actions are reducing slowly with 94 remaining, 18 of which are high risk. Delivery of the specially manufactured fire doors has begun and testing is taking place to ensure that they are working and can be certified. It is hoped that this will increase actions being closed more quickly.
- There are 14 properties remaining with electrical certificates over 5 years old. All these properties are within the legislative requirements of 10 years, but work is being progressed to bring it in line with the council's 5-year policy. Ten of these properties are voids, one property is awaiting repair, and injunctions are in place for two properties to gain access.
- Damp, mould and condensation has increased to 340 open cases, with no new category 1 cases identified. This is in line with expectations for this time of year and is expected to decrease in the Summer. Data is being used to predict where issues will occur to allow preventative action to be taken.
- Stock condition surveys will no longer be reported as part of the compliance report now that enough have been completed to carry out analysis for the planned maintenance programme.

The committee's discussion raised the following points:

- Where properties' gas is capped no carbon monoxide alarms are required.
- An ongoing piece of work is being carried out to ensure all reports are automated and to reduce the need for manual involvement in reports.
- A 'The Facts About Asbestos' leaflet delivered to tenants was praised for providing tenants with clear information. Asbestos is considered safe if not disturbed but it is important that contractors, tenants and leaseholders are aware of the potential risk if work is carried out. Over the next few years full surveys will be carried out and it is recommended that leaseholders do the same. It was suggested that consideration could be given to further highlighting asbestos risk within the corporate risk register.
- The stratified sample of stock condition surveys has been achieved and is currently awaiting analysis. Once completed there will be a consultation carried out to further review what investments should be progressed. However, whilst some programmes of work have been paused to allow this analysis to be completed a lot of other work is ongoing. Health and safety is still being carried out as a priority, work is also continuing connected to the Warm Homes Programme funding, major voids are being brought back into the stock, and where failing kitchens, bathrooms or components have been identified these are being replaced.
- The increase in DMC cases does reflect growing awareness of the support available for tenants following promotion exercises and also the time of year. Some issues are likely to reoccur due to families living in properties that are too small but wherever possible issues are resolved. Hopefully increased use of remote monitoring software in the future will allow issues to be more proactively managed as soon as they emerge.
- A text message has been sent to all residences about the availability of replacement key fobs.

- There have been issues across the country with key fobs due to networking issues following deterioration of mobile networks. This can mean that when new fobs are programmed, they do not initially work. Currently the council are investigating moving to a different mobile supplier.
- There are currently 140 voids. Contractors have been onsite for 10 major voids as of the beginning of March and are expected to finish between 4 and 5 properties a week. Another contractor will be going live in the next 6 weeks.
- A business case to use the workshop more effectively and to provide opportunities to explore apprenticeships is being considered. Considerations will include the initial investment required, ensuring colleagues have the right training and skills, material compliance, and the need for testing and certification. This has the potential to allow us to address actions relating to unusual design needs more quickly.

7 Consumer Standards Improvement Plan

Objective: To provide the Committee with a copy of the Improvement Plan developed to resolve areas of non-compliance with the Regulator of Social Housing's Consumer Standards.

The Director of Governance, Housing and Communities introduced the report and explained that the programme is slightly behind target, but progress is being made. She highlighted that:

- Early delays in the stock condition surveys are now being caught up. Analysis
 will be carried out of the stratified sample to inform the development of the
 planned maintenance programme.
- Progress has also been made on the mobilisation of the asbestos contract.
- Fire risk actions now have a fully automated process, reducing the risk of errors.
- A Compliance Monitoring Group has been established, including two independent appointments who will provide steer for the group over the next 6 months.
- Pennington Choices have been commissioned to carry of a full review of the compliance policies. The revised policies will be brought to the committee before approval at Cabinet.
- A review of the website is being carried out.
- A resident engagement officer has been recruited.
- A Tenant Engagement Strategy has been reviewed by the Tenant Panel and tenant engagement experts, TPAS. Feedback has been positive, and it is scheduled to come before committee in July. Councillor Clucas thanked colleagues for creating a strong and readable Tenant Engagement Strategy. She highlighted that it shows tenants they have a voice, a way of doing things, and can approach colleagues if that approach does not work for them.

8 Counter Fraud and Enforcement Unit Report

Objective: To provide the Committee with an overview of the Counter Fraud Enforcement Unit's work on housing and tenancy fraud over the previous year.

The Investigation and Enforcement Manager introduced the report and explained that it gives a summary of the work carried out by the Counter Fraud and Enforcement Unit (CFEU) over the past two years. She confirmed that previously they had reported to Cheltenham Borough Homes and will be presenting to the committee annually going forward. Work carried out included verification work, specific investigations referred to the CFEU, proactive data matching exercises, reviews of housing waiting lists and the National Fraud Initiative housing matches. The CFEU will also be delivering training for council colleagues over the next 2 months around general fraud, tenancy and housing fraud awareness, the Regulation of Investigatory Powers Act, surveillance, and the use of social media as part of investigations. It is hoped this will enable former housing colleagues to carry out more investigations themselves within the council's regulatory powers.

The committee's discussion raised the following points:

- The subletting of social housing on Airbnb may potentially be an issue in Cheltenham, especially around Race Week. This can be difficult to investigate as Airbnb are not a UK based organisation and do not have to comply with information requests. London councils have used a court order to compel Airbnb to provide information about specific housing estates with known problems. The CFEU is part of the Tenancy Fraud Forum which have recently produced a report on the use of Airbnb and are encouraging the Regulator of Social Housing (RSH) to take more of an interest in housing fraud, particularly as other social housing providers do not have the capacity that councils have to investigate the matter. Individual cases can be investigated by the CFEU if information is received, and a proactive investigation could be undertaken prior to Race Week.
- The regulations do not provide powers of access unless accompanied by police with a warrant, but it is possible to gain utility use data and bank statements to investigate potentially empty properties and subletting.
- Reviews of the housing waiting list confirm whether the information provided when people first applied is still correct as circumstances may have changed. These households may still remain on the waiting list, if appropriate, with a recommendation to move them on to a different priority level.
- Where an offender lacks mental capacity or has a relevant disability solicitors carry out a 2-stage test before recommending any criminal action to consider whether it meets the evidential standards and whether it meets the public interest test. The public interest test considers other mitigating factors around the fraud such as capacity, but that would not necessarily prevent action being taken.
- The CFEU is a shared service across the five partner councils within Gloucestershire (Gloucester City Council is the only exception). They work under a collaboration agreement with officers seconded to each council.
- The waiting list has increased to 3014 households, primarily due to the economic climate in recent times. This means it is more important than ever to ensure the right people are on the list and that properties are recovered where possible from those who should not have them or who are subletting them.

9 Updates from the Tenant and Leaseholder Panels

Objective: To highlight the ongoing activities of the Tenant and Leaseholder Panels and provide an additional opportunity for tenant and leaseholder voices to be heard.

The Tenant and Leaseholder Panel updates were noted.

10 Review of the Housing Committee Forward Plan

The committee reviewed the forward plan and agreed that the 11 June meeting agenda should be reviewed to ensure sufficient time is available.

11 Items to be referred to Cabinet

There were none.

12 Briefing Note - Housing Sector Insight

Objective: To provide the Committee with an overview of recent developments in the housing sector and provide opportunities for horizon scanning.

The briefing note was noted.

Cheltenham Borough Council

Cabinet Housing Committee – 11 June 2025

Compliance Strategy and Policies

Accountable member:

Cllr Flo Clucas, Cabinet Member for Housing and Customer Services

Accountable officer:

Claire Hughes, Director of Governance, Housing and Communities

Executive summary:

This report brings forward a new compliance strategy and revised compliance policies for the big six areas of compliance in housing (gas, electrical, fire, asbestos, water and lifts). The committee are asked to recommend that the Cabinet approve the strategy and policies.

The compliance strategy action plan will be monitored via the Compliance Monitoring Group and captured within our Housing Improvement Programme.

Recommendations:

- 1. The Cabinet Housing Committee recommends that Cabinet:
 - a. adopt the Compliance Strategy (Appendix 2); and
 - b. adopt the following Compliance Policies
 - i. Gas and Heating Safety (Appendix 3)
 - ii. Electrical Safety (Appendix 4)
 - iii. Fire Safety (Appendix 5)
 - iv. Asbestos (Appendix 6)
 - v. Water Safety (Appendix 7)
 - vi. Lift Safety (Appendix 8)

1 Background

1.1 Cheltenham Borough Council (CBC) provides a wide range of local services, including the provision of social housing, maintaining approximately 5,000 domestic properties, communal blocks and schemes. In 2023, we made the strategic decision to bring CBC owned properties and housing services back under our own management and that transfer took place on 1 July 2024. These

properties are subject to landlord property compliance arrangements to ensure they are safe places to live and work.

- 1.2 A key driver in this change was to ensure that our tenants were at the heart of everything we do and that their safety, together with the standards of their homes is our number one priority.
- 1.3 Ahead of the transfer, in June 2024 Cabinet approved a range of compliance policies relating to the big 6 areas of compliance, namely gas, electrical, fire, asbestos, water and lifts.
- 1.4 Since the transfer we have been on an improvement journey, developing our services and our approach to compliance. On 1 April officers attended a facilitated session with Pennington Choices Limited where our compliance strategy was created and developed.
- 1.5 Building on the Compliance Strategy officers attended a further facilitated session with Pennington Choices on 30 April to review our existing compliance policies. A further session on 5 June will develop this work further creating a suite of operational procedures and process maps, ensuring everyone is clear on our approach to compliance.

2 Compliance Strategy

- 2.1 The development of a compliance strategy enables the council to be clear, both internally and externally about its approach to compliance. Modelled around the 'three lines of defence' risk management and assurance framework it provides clarity and structure around all components that need to work together to ensure successful property compliance delivery.
- 2.2 The strategy outlines our arrangements across the 'big six' areas of compliance as well as damp and mould. It concludes with our overall objectives, and a supporting action plan, which demonstrates our commitment to prioritising tenant safety and continuous improvement.
- 2.3 Delivery of the action plan will be monitored by the Compliance Monitoring Group and captured within our Housing Improvement Programme.

3 Compliance Policies

- 3.1 The council adopted a suite of compliance policies in June 2024 as part of the transfer of Housing Services. At that time, it committed to carrying out a full review of those policies post transfer.
- 3.2 Supported by Pennington Choices Limited that review has now concluded and attached are a revised suite of policies which the committee are asked to review and recommend to cabinet for adoption.
- 3.3 In accordance with our new compliance strategy each policy has been updated to ensure that it contains the following information:
 - Ownership, review and approval
 - Introduction, objectives and scope
 - Roles and responsibilities
 - Legislation, guidance and regulatory standards
 - Obligations
 - Statement of intent
 - Programmes
 - Follow up work

- Data and records
- Resident engagement
- Competent persons
- Training
- Performance reporting
- Quality assurance
- Significant non-compliance and escalation
- 3.4 Whilst most elements of the policy are statutory there are some areas where strategic choices were required, for example our desire via our planned maintenance programme to upgrade all smoke detectors to LD1s, the highest level of fire protection for a domestic property.
- 3.5 Adopting these policies demonstrates the councils commitment to safety and ensures that compliance remains our priority.

4 Key risks

4.1 Key risks are set out in the risk register at Appendix 1.

Report author:

Claire Hughes, Director of Governance, Housing and Communities, claire.hughes@cheltenham.gov.uk

Appendices:

- i. Risk Assessment
- ii. Compliance Strategy
- iii. Gas and Heating Safety
- iv. Electrical Safety
- v. Fire Safety
- vi. Asbestos
- vii. Water Safety
- viii. Lift Safety

Appendix 1: Risk Assessment

Risk ref	Risk description	Risk owner	Impact score (1-5)	Likelihood score (1-5)	Initial raw risk score (1 - 25)	Risk response	Controls / Mitigating actions	Control / Action owner	Deadline for controls/ actions
1	The Council has a legal duty to ensure that properties it manages are safe and comply with all applicable statutory requirements. If the Council fails to adopt clear policies then this could result in ambiguity and compliance failures, potentially putting tenants and residents at risk	Director of Governance, Housing and Communities	5	3	15	Reduce	Produce, approve and implement clear and robust policies and associated procedures.	Director of Governance, Housing and Communities	July 2025
2	If the Council does not have clear property compliance policies in place or does not comply with the provisions of the polices then there is a significant safety and reputational risk to the Council.	Director of Governance, Housing and Communities	5	3	15	Reduce	Produce, approve and implement clear and robust policies and associated procedures.	Director of Governance, Housing and Communities	July 2025 Page 12
3	If the Council does not have clear property compliance policies in place or does not comply with the provisions of the polices then there is a significant financial risk to the Council.	Director of Governance, Housing and Communities	5	3	15	Reduce	Produce, approve and implement clear and robust policies and associated procedures.	Director of Governance, Housing and Communities	July 2025
4	If the Council does not have clear property compliance policies in place or does not comply with the provisions of the polices then there is a significant legal risk to the Council.	Director of Governance, Housing and Communities	5	3	15	Reduce	Produce, approve and implement clear and robust policies and associated procedures.	Director of Governance, Housing and Communities	July 2025



Cheltenham Borough Council Property Compliance Strategy

2025 - 2028

Owner Director of Governance, Housing and Communities

Directorate Governance, Housing and Communities

Last review June 2025

Next review June 2028

Consultation Tenant Panel, Cabinet Housing Committee

Approved by Cabinet

Version V1.0

Claire Hughes - Director of Governance, Housing and

Strategic Lead Communities

Councillor Flo Clucas - Cabinet Member Housing and

Member Lead Customer Services

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1. Introduction

Cheltenham Borough Council (CBC) provides a wide range of local services, including the provision of social housing, maintaining approximately 5,000 domestic properties, communal blocks and schemes. In 2024, we made the strategic decision to bring CBC owned properties and housing services back under our own management. These properties are subject to landlord property compliance arrangements to ensure they are safe places to live and work.

Property compliance and building safety is ultimately about risk management and keeping people safe. We strive to achieve this by meeting our legal and regulatory obligations through well-managed testing, servicing, and inspection programmes and carrying out remedial and follow-up actions when required.

Success relies on robust data management, performance management, assurance reporting, and employing competent individuals and suppliers. We use the 'three lines of defence' assurance framework to ensure that each of these elements work effectively together (see Section 2).

With recent changes in the legal and regulatory landscape and due bringing housing services back to CBC we have refreshed our **Corporate Plan** and also created a **Mission Statement** for CBC's housing services.

Together with our **Asset Management Strategy and Tenant Engagement Plan**, these set out our objectives for the housing service. This strategy supports our vision and forms part of our wider organisational commitment to driving a positive health and safety culture among our employees, contractors and stakeholders as detailed within our **Health**

and Safety Policy. We also continue to learn from the ongoing impact of the Grenfell Tower fire tragedy in 2017, which was a catalyst for change within the social housing sector. We want to ensure that as far possible, no similar event occurs within our housing portfolio.

Together with our tenants we provide safe, secure and well-maintained homes that help everyone to reach their potential.

Since bringing housing services back to CBC, we have been on an improvement journey to develop a greater understanding of our buildings, our compliance arrangements and our response to the new regulatory challenges. This has resulted in a **housing improvement programme** which will strengthen our approach.

To support the improvement programme, on 1 April 2025, CBC employees attended a facilitated workshop with external consultant Pennington Choices Ltd. to develop a property compliance strategy (this strategy) to document our overarching framework, objectives, and priorities for property compliance delivery.

The following sections of this strategy outline these arrangements across the 'big six' areas of property compliance: gas, electric, fire, asbestos, water, and lifts, as well as damp and mould. The strategy concludes with our overall objectives, and supporting action plan, to demonstrate our commitment prioritising resident safety and continuous improvement within CBC.

2. Three lines of defence

This strategy is modelled around the 'three lines of defence' risk management and assurance framework. We have adopted this framework to provide clarity and structure around all of the components that need to work together to ensure successful property compliance delivery. We can check and measure our performance against each line of defence to ensure a holistic approach to provide assurance.

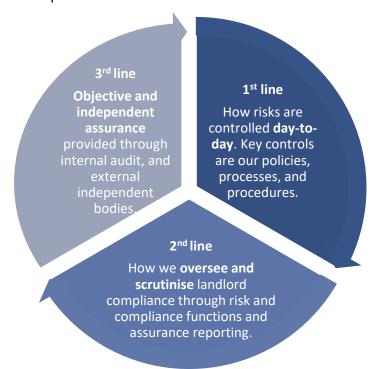


Diagram 1: Three lines of defence model.

Sections 7 - 15 of this strategy describe how we put the three lines of defence framework into effect (also illustrated in Diagram 2 below).

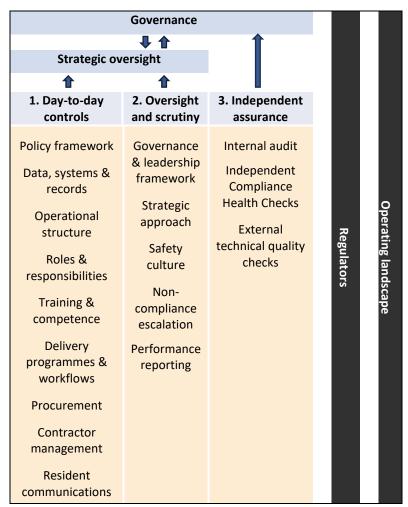


Diagram 2: Three lines of defence in practice.

3. Context: Properties & residents

The scope of this strategy includes CBC assets which are assigned to the housing revenue account. These are primarily domestic properties, communal blocks, and schemes. This strategy does not cover commercial or public buildings.

Shared ownership properties as well as a small number of private rentals are included within compliance performance data to ensure we retain full oversight. We adopt a zero-tolerance approach to risk within these arrangements.

Properties				
Item	Count	Description		
Domestic	4710	Flats, houses, bungalows, and so on.		
Managed domestic	0	Domestic properties we own that are managed by a third party.		
Communal blocks	447	Total number of all communal blocks.		
Shared Ownership	51			
18m+ blocks	0	N/A		
11m+ blocks	5	5 (with x 3 having EWS)		
Private Rental	13	Monitored but reported aside from HRA assets		
Schemes	17	Independent living, sheltered, and so on.		

Table 1: Our properties by type.

CBC operates a diverse range of tenures, as illustrated in the table and pie chart below. CBC have been working to ensure that we meet the housing needs of all our customers. Our aim is to ensure our priorities and activities going forward reflect our additional responsibilities not only as a housing provider, but as landlord to the tenants and leaseholders who live in our properties.

Units				
Туре	Description	Count		
Social housing	Social Rent and Affordable Rent	4,640		
Leaseholders	Leasehold properties	426		
Other tenures	Private Rental and Shared Ownership	64		

Table 2: Our residents/units by type.

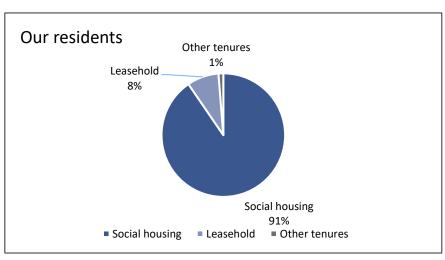


Diagram 3: Resident breakdown.

Context: Operating landscape

CBC must meet a range of legal and regulatory duties in respect of the safety and quality of our homes. The legal landscape around safety and compliance has changed considerably over the past five years, with the introduction of new pieces of legislation, including the Fire Safety (England) Regulations 2022, Building Safety Act 2022, and Social Housing (Regulation) Act 2023. Awaab's Law will also be implemented from October 2025.

We must ensure we stay up to date with obligations to ensure we meet our duties. Failure to comply could mean legal action from the Health and Safety Executive or our residents. The Regulator of Social Housing can also impose sanctions if we fail to meet regulatory standards. We must also provide services to residents in a way which meets the expectations of the Housing Ombudsman. Whilst we do not have buildings over 18m in height and in scope of the Building Safety Regulator, we must also monitor changes in this area as the threshold for intervention is likely to be lowered.

Diagram 4 demonstrates how we stay up to date with changes that have an impact on property compliance and building safety.

We are risk aware, not risk averse. Our Risk Register demonstrates that we understand, and have considered, wider risks in the operating environment. The housing and compliance risks are reviewed every six months by the Director of Governance, Housing and Communities and Cabinet Housing Committee.



5. Context: Regulator of Social Housing

The Social Housing (Regulation) Act 2023 received Royal Assent in July 2023. It aims to improve social housing quality by delivering 'transformational change' for social housing tenants. The Act has enabled the Regulator of Social Housing (RSH) to implement a new, proactive consumer regulation regime through a new set of strengthened consumer standards that CBC must comply with.

The new Safety and Quality Standard, which has been in effect since April 2024, requires landlords to provide safe and good-quality homes for their tenants, along with good-quality landlord services.

The RSH will include us in their programme of planned inspections to review how we are performing against the new standards. We must be prepared to provide them with evidence and assurance that we have an effective framework for managing property compliance in place.

If the RSH believes that we do not, and improvements are required, they can use a range of tools for intervention, until they are satisfied issues have been addressed and measures and controls are in place to prevent a recurrence. To support this, we engage proactively with RSH as part of the co-regulatory approach required under the consumer standards.

The RSH will also gather information in between planned inspections, through the tenant satisfaction measures, quarterly survey or other engagement. As a result, we must always ensure compliance with the standards. This strategy demonstrates how we will meet the health and safety requirements under the Safety and Quality Standard.



Diagram 5: The six elements of the Safety and Quality Standard.

6. 1st line: Policy framework

Having a robust compliance policy framework in place to support this strategy is key to ensuring CBC meets its legal obligations and our stakeholders understand what we will do to achieve compliance.

We are updating our compliance policies across the compliance areas to set out **what** we will do to meet our legal and regulatory obligations and show that we have considered relevant strategic choices that have significant cost and risk implications. Each policy will be updated to include all the items listed in Diagram 6.

The policies are approved through our governance framework and ultimately by the Cabinet. They will be reviewed at least every two years, or sooner if legislative requirements change.

The policies will be supported by operational process maps and procedure documents which are also being developed. These will outline **how** we deliver end-to-end compliance processes and include milestones, timescales, interdependencies, roles and responsibilities, contract delivery and confirm how operational performance and compliance will be monitored.

Our policies will include the following:

- ✓ Ownership, review, and approval
- ✓ Introduction, objectives, and scope
- ✓ Roles and responsibilities
- ✓ Legislation, guidance, and regulatory standards
- Obligations
- ✓ Statement of intent
- ✓ Programmes
- ✓ Follow-up work
- Data and records
- Resident engagement
- ✓ Competent persons
- ✓ Training
- ✓ Performance reporting
- Quality assurance
- Significant non-compliance and escalation

Diagram 6: Policy content.

7. 1st line: Data and systems

Successful data management supports our assurance and delivery of property compliance. We must understand how many properties we own and manage and which compliance programmes they should be included on.

QL is our parent housing management system with our compliance programme data and records held between QL, Data Hub, Documotive and Excel. The table below provides an overview of where compliance data is held.

Area Programme		Follow-up actions	Records	
Gas	Excel >QL	Excel >QL	Documotive > Contractor Portal	
Electric	Excel >QL	Excel> QL	Documotive	
Fire	QL	QL	Documotive	
Asbestos	Excel >QL	Excel>QL	Documotive > Contractor Portal	
Water	Excel>QL	Excel> QL	Documotive > Contractor Portal	
Lifts (communal)	Excel > QL	Excel > QL	Documotive	
Damp and Mould	QL	QL	Documotive	

Over the next 12 months we will be making a number of data and system improvements to ensure we manage and deliver compliance programmes effectively. This will ensure we understand our properties better so that we have one universally agreed version of the truth.

Our **top three** compliance data priorities are to:

- Transition from the use of manual systems and Excel to ensure compliance programmes, follow-up actions and records are recorded and managed consistently on the QL system.
- 2. Undertake a data validation exercise to support migration to QL and ensure all required properties are included on compliance programmes with valid and evidenced based reasons for any exclusions.
- **3.** Explore the reporting functionality of QL to automate our performance reporting to give greater data assurance.

Following data validation, we will implement monthly data reconciliation across all assets, compliance programmes and systems to ensure that records remain accurate and up to date. This will include sample checks of compliance records to ensure inspection dates are being captured correctly within each system.

Table 3: Compliance data locations. **Key:** > System to be implemented.

8. 1st line: Operational structure

The Property Compliance Manager(s) have overall operational responsibility for property compliance. They are supported by officers with responsibility for individual compliance areas. Beneath these managers are contract managers, officers, coordinators, risk assessors, engineers, and technical assistants to make up the full operational structure

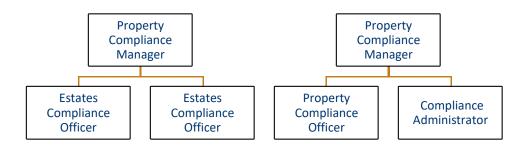


Diagram 5: High level operational structure for compliance delivery at CBC.

Training and competence

We will update our policies to detail the qualifications, skills, and competencies we require individuals to hold for each area of compliance. We will also encourage and support CBC staff to gain relevant compliance management qualifications.

We will only engage competent, qualified, technical consultants and contractors to provide external assurance, technical advice, and to deliver compliance inspections and remedial works.

Health and Safety Lead

As required under the Social Housing (Regulation) Act 2023 we have appointed The Deputy Chief Executive as our Health and Safety Lead to:

- **1.** Monitor our compliance with health and safety requirements.
- **2.** Assess risks of failure to comply with health and safety requirements.
- Notify CBC councillors of the risks assessed and any material failures to comply with health and safety requirements.
- **4.** Provide advice to councillors as to how CBC should address associated risks and failures.

9. 1st line: Procurement and contract management

All our compliance contracts will be formally procured, with support from third-party technical experts and our shared services procurement team, to ensure service specifications are robust. We will be implementing annual contractor checks to review insurance, qualifications, and accreditations to ensure standards are maintained for the duration of each contract.

We will proactively manage all contractors through a framework of structured formal contractor meetings and arrangements across all compliance programmes. We will provide regular contract management training for individuals managing and dealing with compliance and building safety contracts.

Area	Inspection frequency
Gas (Landlord's gas safety records)	Annual
Electric (Electrical installation condition reports)	5 years
Fire (Fire risk assessments)	High risk blocks 3 years Low risk blocks 4 years
Asbestos (Re-inspections)	Annual for Garages 1/2/3/4&5 years based on the risks and survey results stating timeframe
Water (Legionella risk assessments)	2 years
Lifts (Thorough examinations)	6 months

Table 4: Compliance programme frequencies.

10. 1st line: Customer communications

We are improving our approach to communicating with our residents and will implement our Customer Engagement Strategy for the housing service to put the voice of customers at the heart of everything we do. This includes working with customers to keep their homes safe and making sure customers have a range of methods they can get involved in shaping our services.

Our Tenant Voice newsletter provides our residents with the latest updates about their homes and the local community. It includes different ways that residents can engage with us to share their thoughts and concerns.

We provide information through our Tenant and Leaseholders Handbooks and on our website on keeping homes safe. We are working with customers to update and improve these.

We will also develop a resident safety communications plan to strengthen our approach to resident health and safety. We will proactively promote the work we do to keep our residents safe and develop an annual plan that raises general awareness about key safety issues as residents are often best placed to mitigate risks themselves.

11. 2nd line: Governance and strategic oversight

Our governance structure, as illustrated in the image below, demonstrates how we implement effective scrutiny and oversight of property compliance.

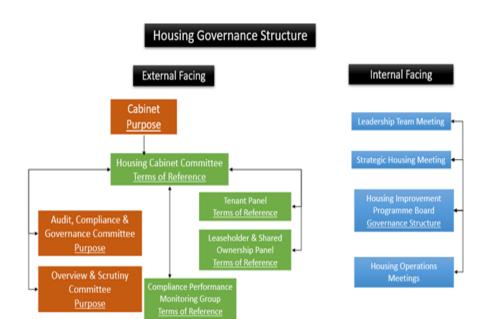


Diagram 6: : CBC Governance Structure.

Our Leadership Team, Compliance Monitoring Group, Cabinet Housing Committee and Cabinet Member for Housing and Customer Services all receive regular landlord property compliance performance reporting.

Our Cabinet has overall governance accountability to ensure full compliance with legislation and regulatory standards, and the Director of Governance, Housing and Communities has overall strategic accountability for property compliance and the health and safety of our homes.

To ensure tenants and leaseholders have oversight of property compliance, we have established tenant and leaseholder panels which feed into our Cabinet Housing Committee. Tenant and leaseholder representatives also sit on the Cabinet Housing Committee.

We provide awareness training on property health and safety compliance to our elected members, Leadership Team and residents to inform strategic decision making, including how to provide effective challenge, scrutiny, and oversight.

12. 2nd line: Safety culture

We are committed to developing and maintaining a strong safety culture within CBC based on the following principles:

Effective leadership

- Appropriate proportion of time, money and resources are allocated to deliver compliance arrangements.
- We prioritise risk and quality over cost and profit.

Positive organisational environment

- Managers need to be seen visibly leading by example through talking about landlord health and safety compliance and following correct procedures.
- Acknowledging that people make mistakes without blame reporting. Instead, our focus is on continuous improvement while holding people accountable for their actions.
- Roles and responsibilities are clearly defined and allocated so everybody knows what they are expected to do in different health and safety scenarios.
- Critical issues are not overlooked and dealt with as they emerge.

Effective communication

- Top down and bottom-up open communication.
- Health and safety is acknowledged to be everyone's responsibility and be part of everyday work conversations.

13. 2nd line: Reporting & escalation

Reporting

As a minimum we will report the following performance indicators for each area of property compliance:

- ✓ Total number of properties domestic/ communal (number).
- ✓ Properties not on programme (number).
- Properties with valid and in date inspection records (number and percentage).
- Properties without valid and in date inspection records (number and percentage).
- ✓ Properties due within the next 30 days (number).
- ✓ Follow-up works by priority and overdue status (number).
- Explanation of corrective action required and progress with completion of follow-up works (narrative).

Performance is reported monthly to Compliance Group and Leadership Team, and quarterly to Cabinet Housing Committee

Non-compliance escalation

Any incident which could result in a breach of legislation or regulatory standard, or which causes a risk to health or safety, and needs to be managed as an exception will be escalated from operational level through our governance framework. Escalation routes will be outlined within our compliance policies.

14. 3rd line: Quality assurance

Our third line of defence is about ensuring we have independent and objective assurance around compliance delivery. To support this, we will consider implementing programmes of third-party technical audits across all compliance areas. This will provide quality assurance through fieldwork checks and desktop reviews of compliance records on a sample basis. Our approach to each compliance area will be set out within individual policies.

We will also review our internal audit function with the aim of developing a programme that includes all six compliance areas, and damp and mould, at least once every two-years. We will ensure that the internal auditors are competent to undertake this task.

We will also consider commissioning an independent, external 'health check' of property compliance periodically (every three years). The purpose will be to test compliance with legal and regulatory requirements and to identify any non-compliance issues for correction collectively across all areas.

15. Supporting documents

- Mission Statement for Cheltenham BC Housing Service
- Corporate Plan
- Asset Management Strategy
- Risk Register
- Customer Engagement Strategy
- Individual compliance policies x 6
- Damp and Mould Policy
- Health and Safety Policy
- Housing Improvement Plan

16. Objectives

The four key objectives below summarise our priorities for delivering this strategy to keep our properties compliant and support resident safety. The action plan at Appendix 1 includes the key activities we need to deliver to meet these objectives over the next three years. This strategy, objectives and action plan will be reviewed periodically to ensure they remain an accurate reflection of what we would like to achieve. The objectives will also be reviewed if there is a change to any applicable health and safety legislation.

OBJECTIVE 1	Key results
STRENGTHEN 1 ST LINE OF DEFENCE WITHIN PROPERTY COMPLIANCE FRAMEWORK	We will strengthen our first line of defence to ensure all day-to-day operational controls are implemented. We will also improve the accuracy of our data and the use the QL compliance system to manage all compliance programmes. This will be completed by April 2026

OBJECTIVE 3	Key results			
STRENGTHEN	We will establish and implement quality checking			
3 RD LINE OF	regimes to provide independent and objective			
DEFENCE	assurance around our property compliance			
WITHIN	management and delivery framework. This will be			
PROPERTY	completed by April 2027			
COMPLIANCE	This will also provide assurance that the improvement			
FRAMEWORK	actions we have taken have been embedded within the			
	organisation successfully.			

OBJECTIVE 2	Key results
STRENGTHEN 2 ND LINE OF DEFENCE WITHIN	We will update compliance reporting templates and scorecards to provide the appropriate amount of detail and clarify non-compliance escalation processes by September 2025.
PROPERTY COMPLIANCE FRAMEWORK	This will help our Leadership and Governance Teams to challenge and scrutinise compliance performance effectively, and ensure non-compliance is escalated within appropriate timeframes.

OBJECTIVE 4	Key results		
STRENGHTEN OUR PEOPLE AND	We will review our existing staffing structures to ensure we are appropriately resourced and will put in place formal plans and protocols for internal and external		
ENGAGEMENT TO SUPPORT	communication and training by April 2026 to ensure a joined-up approach to sharing information with		
OUR COMPLIANCE FRAMEWORK	residents and wider housing management staff. This will help ensure support a positive safety culture, with people having the right skills and knowledge to		

17. Appendix 1 - Action Plan

High	Within six months
Medium	Within 12 months
Low	Before the end of the strategy (by April 2028)

Objective	Action	Description	By when?	Accountable	Responsible	Priority
	1.	Develop and implement a plan to move all property compliance programmes away from Excel spreadsheets and on to QL.	October 2025	Interim Director of Housing Transformation	ТВС	High
1	2.	Undertake a data validation and cleansing exercise prior to migrating data to QL to ensure the data is accurate and provides one version of the truth.	August 2025	Director of Governance, Housing and Communities	Governance, Risk and Assurance Manager	High
Strengthen first line of defence within property compliance	3.	Implement monthly data reconciliation across assets, compliance programmes and systems to ensure that records remain accurate and up to date.	September 2025	Interim Director of Housing Transformation	Compliance Manager	High
framework	4.	Implement sample checks of compliance records to ensure inspection dates are being captured correctly within each system	December 2025	Interim Service Improvement Lead	Compliance Manager	High
	5.	Develop policies, processes, and procedures to underpin the delivery of the compliance programmes.	July 2025	Director of Governance, Housing and Communities	Director of Governance, Housing and Communities	Medium

	6.	Implement a consistent approach to procuring contracts and undertaking contractor competency checks.	December 2025	Interim Director of Housing Transformation	Interim Service Improvement Lead	Medium
	7.	Set expected competence levels for internal team members managing and delivering compliance programmes.	December 2025	Interim Service Improvement Lead	Learning and Development Lead	Medium
Strengthen second line of defence within property compliance framework	8.	Develop a scorecard to strengthen property compliance reporting in line with Section 13 of the strategy and the requirements under the tenant satisfaction measures.	September 2025	Director of Governance, Housing and Communities	Governance, Risk and Assurance Manager	Medium
	9.	Develop and implement a consistent approach to escalating contractor non-performance and non-compliance escalation.	September 2025	Interim Director of Housing Transformation	Interim Service Improvement Lead	Medium

3 Strengthen third line of defence within property compliance framework.	10.	Implement an internal audit regime for the big six areas of compliance, and for damp and mould at least every two years.	October 2025	Director of Governance, Housing and Communities	SWAP	Low
	11.	Implement technical third-party quality assurance checks across all compliance areas to undertake sample checks on field work and desktop reviews on records. The auditors will be competent and appropriately qualified.	May 2026	Interim Service Improvement Lead	Compliance Manager	Medium
	12.	Consider commissioning an external compliance health check every two years	June 2026	Director of Governance, Housing and Communities	Director of Governance, Housing and Communities	Low
4 Strengthen our people and engagement to support our property compliance framework.	13.	Review our compliance team to make sure it is fit for purpose.	December 2025	Director of Governance, Housing and Communities	Interim Service Improvement Lead	High
	14.	Implement regular training for elected members and leaders on compliance assurance.	May 2026	Director of Governance, Housing and Communities	Learning and Development Lead	Low
	15.	Develop an internal protocol for sharing information and raise awareness of the importance of property compliance to improve knowledge and understanding and that we 'own it'	January 2026	Director of Governance, Housing and Communities	Housing Improvement Programme Lead	Medium

	16.	Implement the Customer Engagement plan to improve tenant oversight, scrutiny and engagement with compliance and safety in the home.	December 2025	Director of Governance, Housing and Communities	Director of Housing: Customer and Communities	Medium
	17.	Develop our Tenant and Leaseholder handbook and website information	June 2026	Director of Governance, Housing and Communities	Housing Improvement Programme Lead	Medium
	18.	Develop a resident communications plan for property compliance (such as gas safety week, summer months focus on water hygiene, barbeques on balconies, and heating safety in autumn/winter).	June 2026	Director of Governance, Housing and Communities	Housing Improvement Programme Lead	Low

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Gas and Heating Policy



Name Gas and Heating Policy

Owner Property Compliance Manager

Version 2

Last ReviewJune 2025Next ReviewJune 2027

Strategic Lead Claire Hughes – Director of Governance,

Housing and Communities

Member Lead Councillor Flo Clucas – Cabinet Member

Housing and Customer Services

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1.0 Introduction and Objectives

- 1.1 As a landlord, Cheltenham Borough Council (CBC) is responsible for the maintenance and repairs to our homes, communal blocks and other properties we own and manage, many of which will contain gas installations and appliances.
- 1.2 We are also responsible for maintaining other types of heating systems to ensure that all heating appliances provided for tenants are safe. These include solid fuel/ solar thermal/ electrical heating systems.
- 1.3 The key objective of this policy is to ensure our Cabinet, Leadership Team, employees, partners and tenants are clear on our legal and regulatory gas/heating safety obligations. This policy provides the framework our staff and partners will operate within to meet these obligations.
- 1.4 This policy forms part of our wider organisational commitment to driving a health and safety culture amongst staff and contractors (as detailed within our Health and Safety Policy). It will be saved on our shared drive and distributed to all relevant members of staff.

2.0 Scope

- 2.1 This policy applies to the following property types:
 - Domestic properties (houses, flats, bungalows, and so on).
 - Communal blocks.
 - Sheltered / independent living schemes.
- 2.2 This policy is relevant to all our employees, tenants, contractors, stakeholders and other persons who may work on, occupy, visit, or use our premises, or who may be affected by our activities or services. Adherence to this policy is mandatory.

3.0 Roles and Responsibilities

- 3.1 The Cabinet has overall governance responsibility for ensuring this policy is fully implemented to ensure full compliance with legislation and regulatory standards. As such, the Cabinet will formally approve this policy and review it every two years (or sooner if there is a change in legislation or regulation).
- 3.2 The Leadership Team (LT) will receive monthly performance reports in respect of gas and heating safety and ensure compliance is being achieved. They will also be notified of any non-compliance issue identified.

- 3.3 The Property Compliance Manager has strategic responsibility for the management of gas and heating safety, and ensuring compliance is achieved and maintained. They will oversee the implementation of this policy.
- 3.4 The Interim Capital and Repairs Manager has operational responsibility for the management of gas and heating safety and will be responsible for overseeing the delivery of these programmes.
- 3.5 Housing teams will provide support where gaining access to properties is difficult and will assist and facilitate any legal processes as necessary.
- 3.6 Under the requirements of the Social Housing (Regulation) Act 2023 we have appointed the Deputy Chief Executive as our Health and Safety Lead.

4.0 Legislation, Guidance and Regulatory Standards

- 4.1 **Legislation** The principal legislation applicable to this policy is:
 - The Gas Safety (Installation and Use) Regulations 1998 as amended (hereafter referred to as the Gas Safety Regulations). We have a legal obligation under Part F, Regulation 36 of the legislation (Duties of Landlords) and we are the 'Landlord' for the purposes of the legislation.
 - Smoke and Carbon Monoxide Alarm (Amendment) Regulations 2022.
 - This policy also operates within the context of additional legislation (see Appendix 1).
- 4.2 Approved Code of Practice (ACoP) The ACoP applicable to this policy is:
 - ACoP L56 'Safety in the installation and use of gas systems and appliances' (5th edition 2018).
- 4.3 **Guidance** The principal guidance applicable to this policy is:
 - INDG285 'A guide to landlords' duties: Gas Safety (Installation and Use) Regulations 1998 as amended Approved Code of Practice and guidance (3rd Edition 2018).
- 4.4 **Regulatory standards** We must ensure we comply with the Regulator of Social Housing's regulatory framework and consumer standards for social housing in England; the Safety and Quality Standard is the primary one applicable to this policy.
 - The Social Housing (Regulation) Act 2023 changes the way social housing is regulated and may result in future changes to this policy.
- 4.5 **Sanctions** Failure to discharge our responsibilities and obligations properly could lead to sanctions, including prosecution by the Health and Safety Executive (the HSE) under the Health and Safety at Work Act 1974; prosecution under the Corporate Manslaughter and Corporate Homicide Act 2007; prosecution under the Gas Safety Regulations; and via a regulatory judgement from the Regulator of Social Housing.

5.0 Obligations

- 5.1 The **Gas Safety (Installation and Use) Regulations 1998** impose duties on landlords to protect tenants in their homes. These obligations apply to both gas heating and liquid petroleum gas heating systems. The main landlord duties are set out in Regulation 36 and require landlords to:
 - Ensure gas fittings and flues are maintained in a safe condition. Gas appliances should be serviced in accordance with the manufacturer's instructions. If these are not available it is recommended that they are serviced annually, unless advised otherwise by a Gas Safe registered engineer.
 - Ensure the annual safety check is carried out on each gas appliance and flue within 12 months of the previous safety check.
 - Have all installation, maintenance and safety checks carried out by a Gas Safe registered engineer.
 - Keep a record of each safety check for at least two years (until at least two further gas safety checks have been carried out).
 - Issue a copy of the latest safety check record to existing tenants within 28 days of the check being completed, or prior to any new tenant moving in.
 - Display a copy of the latest safety check record in a common area of a building where the gas appliance serves a communal heating system to multiple homes.
 - Ensure that no gas fitting of a type that would contravene Regulation 30 (for example, certain gas fires and instantaneous water heaters) is fitted in any room occupied, or to be occupied, as sleeping accommodation after the Regulations came into force.
 This includes any room converted into such accommodation after that time.
- 5.2 The Smoke and Carbon Monoxide Alarm (Amendment) Regulations 2022, came into effect on 1 October 2022, require landlords to:
 - Install smoke alarm on every storey with living accommodation.
 - Install carbon monoxide alarms in any rooms used as living accommodation with a fixed combustion appliance (excluding gas cookers).
 - Repair or replace faulty alarms as soon as reasonably practicable.
- 5.3 For **other heating types** (as set out in Section 2.1), although there is no legal requirement to do so, we will carry out periodic safety checks to these properties as detailed in Section 7.

6.0 Statement of Intent

- 6.1 We acknowledge and accept our responsibilities under the Gas Safety Regulations, Smoke and Carbon Monoxide Alarm (Amendment) Regulations, and other duties outlined in Section 4 and Section 5.
- 6.2 We will carry out an annual gas safety check to all properties with a gas supply, irrespective of whether the gas is connected or not.
- 6.3 We will ensure that copies of all landlord's gas safety records (LGSRs)/certificates are provided to tenants or displayed in a common area within 28 days of completion.
- Any open flue gas appliances found in any rooms that are being used as bedrooms or for sleeping will be removed.
- 6.5 We will cap off gas supplies to all properties when the property becomes void, and a new tenant is not moving in immediately after. This will be completed within 24 hours.
- 6.6 We will cap off gas supplies to all new build properties at handover from the contractor/developer to us if the new tenancy is not commencing immediately at the point of handover.
- 6.7 We will ensure that gas safety checks are carried out within 24 hours of the commencement of a new tenancy (void or new build properties), mutual exchange and/or transfer, and that the tenant receives a copy of the LGSR before they move in.
- 6.8 We will ensure a gas safety check is carried out following our installation of any new gas appliance and obtain a gas safety certificate to confirm the necessary checks have been completed.
- 6.9 We will carry out a five-point visual check of tenant owned cooker appliances and carry out a safety test of a tenant's own gas fire if in place. If any appliance is deemed unsafe we will issue a warning notice and the appliance will be capped off with the tenants' permission until such time it can be evidenced as being safe.
- 6.10 A safety check will be carried out on completion of any repair and/or refurbishment works to occupied or void properties where works may have affected any gas fittings, appliances or flues.
- 6.11 We will install, test and replace (as required) battery operated and/or hard-wired smoke alarms and carbon monoxide detectors as part of the annual gas safety check (or at void stage).
- 6.12 We will carry out an annual gas safety check to all properties where the gas supply has been capped at the request of the tenant, to ensure the supply has not been reconnected by the tenant. At the same time, we will check on the tenant's wellbeing and assess whether or not the lack of gas heating is adversely affecting the condition of the property. In addition, we will endeavour to communicate monthly with these tenants to ensure

- the property remains capped and inform the tenant of what is required to reinstate gas at the property.
- 6.13 We will regularly check properties that are not currently connected to the gas mains network to ensure a gas supply has not been installed without our knowledge.
- 6.14 We will ensure that there is a robust process in place for the management of immediately dangerous situations identified from the gas/heating safety check.
- 6.15 We will operate a robust process if there is difficulty gaining access to a property to carry out the gas/heating safety check or remediation works. We will use the legal remedies available within the terms of the tenancy agreement, provided the appropriate procedures have been followed and approval given by a Head of Service (or more senior role). Where tenant vulnerability issues are known or identified, we will ensure we safeguard the wellbeing of the tenant.
- 6.16 We will operate effective contract management arrangements with the contractors responsible for delivering the service, including ensuring contracts/service level agreements are in place, conducting client-led performance meetings, and ensuring that contractors' employee and public liability insurances are up to date on an annual basis.
- 6.17 We will ensure that all replacements, modifications and installations of gas appliances and heating systems within our properties will comply with all elements of Building Regulations, Part J Combustion Appliances and Fuel Storage Systems.
- 6.18 We will establish and maintain a risk assessment for gas safety management and operations, setting out our key gas safety risks and appropriate mitigations.
- 6.19 To comply with the requirements of the Construction (Design and Management)
 Regulations 2015 (CDM) a Construction Phase Plan will be in place for all repairs work to
 void and tenanted properties (at the start of the contract and reviewed annually
 thereafter), component replacement and refurbishment works.
- 6.20 To comply with the requirements of the Dangerous Substances and Explosive Atmospheres Regulations (DSEAR) 2002, we will consider the safety of our workspaces and plant/boiler rooms of our residential blocks that fall within scope of the legislation.

7.0 Programmes

- 7.1 **Domestic properties** We will carry out a programme of annual gas safety checks to all domestic properties we own and manage; the check will be completed within 12 months from the date of the previous LGSR/certificate.
- 7.2 We will consider the 'MOT' approach to gas safety checks within the lifecycle of this policy. This approach, under Part F, Regulation 36 (3) of the Gas Safety Regulations, allows a gas safety check to take place within ten months and one day of the previous safety check and retain the original 12-month anniversary date of the previous LGSR.

- 7.3 We will carry out a safety check of electrical heating systems every five years during the periodic electrical inspection and testing programme.
- 7.4 We will carry out an annual safety check to properties with solar thermal heating.
- 7.5 **Communal blocks and other properties** We will carry out a programme of annual gas safety checks and services to all communal blocks and other properties (such as sheltered/ supported schemes), where we have the legal obligation to do so; these will be completed within 12 months from the date of the previous LGSR/certificate.
- 7.6 **Properties managed by others** We will obtain LGSRs/gas safety certificates where our properties are managed by a third party. If we are not provided with the LGSR/certificate we will agree on an appropriate course of action, which may include carrying out the safety check and re-charging them for the cost of this work.
- 7.7 We will ensure there is a robust process in place for the management of any follow-up works required following the completion of a gas/heating safety check (where the work cannot be completed at the time of the check).

8.0 Data and Records

- 8.1 We will maintain a core asset register of all properties we own and/or manage, with component/attribute data against each property to show gas/heating safety check requirements.
- 8.2 We will operate a robust process to manage all changes to stock, including property acquisitions and disposals, to ensure that properties are not omitted from gas/heating safety programmes and the programme remains up to date.
- 8.3 We will hold gas/heating safety check dates and safety check records against each property we own or manage. We will hold the dates of the safety checks in the QL System and safety check records in Documotive.
- 8.4 We will ensure the Gas Safe registered engineer records the details of all appliances and other equipment which is served by the gas/heating supply in every domestic property, communal block or other property.
- 8.5 We will keep all completed safety check records, warning notices and remedial work records for at least two years and/or the duration that we own and manage the property and will have robust processes and controls in place to maintain appropriate levels of security for all gas/heating safety related data and records.

9.0 Tenant Engagement

9.1 We consider good communication essential in the effective delivery of gas and heating safety programmes therefore we will endeavor to establish a tenant engagement strategy

- and communication programme to support tenants in their understanding of gas and heating safety.
- 9.2 This will assist us in maximising access to carry out gas safety checks, encourage and support tenants to report any concerns about gas and heating safety, and help us engage with vulnerable and hard to reach tenants.
- 9.3 We will share information clearly and transparently and will ensure that information is available to tenants via regular publications and information on our website.

10.0 Competent Persons

- 10.1 All operatives/engineers (internal or external) will maintain Gas Safe accreditation for all areas of gas/LPG works that they undertake and will be members of the Nationally Accredited Certification Scheme for Individual Gas Fitting Operatives (ACS).
- 10.2 Only individuals/organisations with a Microgeneration Certification Scheme accreditation (MCS) will undertake works on ground/air source heat pumps, solar thermal and biomass heating systems.
- 10.3 Only suitably competent NICEIC (or equivalent) electrical contractors and operatives will undertake servicing and repairs to electrical heating systems.
- 10.4 Only suitably competent Gas Safe registered and NICEIC (or equivalent) third party technical auditors will undertake quality assurance checks.
- 10.5 We will check our contractors hold the relevant qualifications and accreditations when we procure them, and thereafter on an annual basis; we will evidence these checks and each contractor's certification appropriately.

11.0 Training

11.1 We will deliver training on this policy and the procedures that support it, through appropriate methods including team briefings; basic gas and heating safety awareness training; and on the job training for those delivering the programme of gas and heating safety checks, planned maintenance and repair works as part of their daily job. All training undertaken by staff will be formally recorded.

12.0 Performance Reporting

- 12.1 We will report key performance indicator (KPI) measures for gas/heating safety that follow the requirements set out in the Tenant Satisfaction Measures (TSMs) which came into force on 1 April 2023 and must be reported to the RSH on an annual basis.
- 12.2 We will report the following gas safety performance:

Report recipient	Frequency
Regulator of Social Housing	Annual
Leadership Team	Monthly
Cabinet	Quarterly
Tenants	Quarterly

12.3 We will also report the following:

Data - the total number of:

- Properties split by category (domestic, communal, commercial/others).
- Properties on programme split by category.
- Properties not on programme.
- Properties with a valid and in date LGSR/certificate.
- Properties without a valid and in date record LGSR/certificate.
- Properties due to be serviced within the next 30 days.

Narrative - an explanation of the:

- Current position.
- Corrective action required.
- Progress with completion of follow-up works.

In addition:

The number of RIDDOR notifications to the HSE about gas/heating safety.

13.0 Quality Assurance

- 13.1 We will ensure there is an annual programme of third-party quality assurance audits of gas/heating safety checks, gas appliance services and gas appliance repair works. This will be:
 - Ten per cent of all new installations.
 - Ten per cent sample of field checks and certificates.
- 13.2 Internally we will undertake 100 per cent desktop audits of all LGSRs/certificates using the nine-point check.
- 13.3 We will carry out an independent audit of gas/heating safety at least once every two years, to specifically test for compliance with legal and regulatory obligations and to identify non-compliance issues for correction.

14.0 Significant Non-Compliance and Escalation

- 14.1 Our definition of significant non-compliance is any incident which has the potential to result in a potential breach of legislation or regulatory standard, or which causes a risk to health or safety, and which needs to be managed as an exception to routine processes and procedures.
- 14.2 All non-compliance issues will be reported and escalated as soon as possible, and no later than 24 hours after the incident occurred, or of a CBC employee becoming aware of it.
- 14.3 Any non-compliance issue identified at an operational level will be formally reported to the Interim Capital and Repairs Manager in the first instance, who will agree an appropriate course of corrective action with the Property Compliance Manager and report details of the same to the LT.
- 14.4 In cases of serious non-compliance, LT and Cabinet will consider whether it is necessary to disclose the issue to the Regulator of Social Housing as required by the regulatory framework, or any other relevant organisation such as the Health and Safety Executive.
- 14.5 We will ensure there is a robust process in place to investigate and manage all RIDDOR notifications submitted to the HSE in relation to gas and heating safety and will take action to address any issues identified and lessons we have learned, to prevent a similar incident occurring again.

15.0 Glossary

- 15.1 This glossary defines key terms used throughout this policy:
 - Gas Safe Register: the official list of gas engineers who are qualified to work legally on gas appliances.
 - **LGSR**: Landlord's Gas Safety Record a certificate containing the results of the annual safety check carried out on gas appliances and flues.

Appendix 1 - Additional Legislation

This policy also operates within the context of the following legislation:

- Defective Premises Act 1972
- Health and Safety at Work Act 1974
- Landlord and Tenant Act 1985
- Homes (Fitness for Human Habitation) Act 2018
- The Occupiers' Liability Act 1984
- Workplace (Health, Safety and Welfare) Regulations 1992
- Pipelines Safety Regulations 1996
- Health and Safety (Safety Signs and Signals) Regulations 1996
- Gas Safety (Management) Regulations 1996 (as amended)
- Provision and Use of Work Equipment Regulations 1998
- Management of Health and Safety at Work Regulations 1999
- Management of Houses in Multiple Occupation (England) Regulations 2006
- Pressure Equipment (Safety) Regulations 2016
- Pressure Systems Safety Regulations 2000
- Dangerous Substances and Explosive Atmospheres Regulations (DSEAR) 2002
- Housing Act 2004
- Building Regulations 2010 (England and Wales)
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- Construction (Design and Management) Regulations 2015
- Data Protection Act 2018
- Smoke and Carbon Monoxide Alarm (Amendment) Regulations 2022
- Social Housing (Regulation) Act 2023

Electrical Safety Policy



Name Electrical Safety Policy

Owner Property Compliance Manager

Version 2

Last ReviewJune 2025Next ReviewJune 2026

Strategic Lead Claire Hughes – Director of Governance,

Housing and Communities

Member Lead Councillor Flo Clucas – Cabinet Member

Housing and Customer Services

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1.0 Introduction and Objectives

- 1.1 As a landlord, Cheltenham Brough Council (CBC) is responsible for repairs and maintenance to our homes, communal blocks and other properties we own and manage, all of which will contain electrical installations, equipment and portable appliances.
- 1.2 The key objective of this policy is to ensure our Cabinet, Leadership Team, employees, partners and tenants are clear on our legal and regulatory electrical safety obligations. This policy provides the framework our staff and partners will operate within to meet these obligations.
- 1.3 This policy forms part of our wider organisational commitment to driving a health and safety culture amongst staff and contractors (as detailed within our Health and Safety Policy). It will be saved on our shared drive and distributed to all relevant members of staff.

2.0 Scope

- 2.1 This policy applies to the following property types only:
 - Domestic properties (houses, flats bungalows, and so on).
 - Communal blocks.
 - Sheltered / independent living schemes.
- 2.2 This policy is relevant to all our employees, tenants, contractors, stakeholders and other persons who may work on, occupy, visit, or use our premises, or who may be affected by our activities or services. Adherence to this policy is mandatory.

3.0 Roles and Responsibilities

- 3.1 The Cabinet has overall governance responsibility for ensuring this policy is fully implemented to ensure full compliance with legislation and regulatory standards. As such, the Cabinet will formally approve this policy and review it every two years (or sooner if there is a change in legislation or regulation).
- 3.2 The Leadership Team (LT) will receive monthly performance reports in respect of electrical safety and ensure compliance is being achieved. They will also be notified of any non-compliance issue identified.
- 3.3 The Property Compliance Manger has strategic responsibility for the management of electrical safety, and ensuring compliance is achieved and maintained. They will oversee the implementation of this policy.

- 3.4 The Interim Capital and Repairs Manager has operational responsibility for the management of electrical safety and will be responsible for overseeing the delivery of these programmes.
- 3.5 Housing teams will provide support where gaining access to properties is difficult and will assist and facilitate any legal processes, as necessary.
- 3.6 Under the requirements of the Social Housing (Regulation) Act 2023 we have appointed the Deputy Chief Executive as our Health and Safety Lead.

4.0 Legislation, Guidance and Regulatory Standards

- 4.1 **Legislation** Principal legislation applicable to this policy is:
 - Housing Act 2004.
 - Landlord and Tenant Act 1985.
 - Homes (Fitness for Human Habitation) Act 2018.
 - Electricity at Work Regulations 1989.
 - Electrical Equipment (Safety) Regulations 2016.

The government consultation into electrical safety within social housing closed on 31 August 2022 and we are awaiting the outcome to be published, which will likely result in future changes to this policy.

This policy also operates within the context of additional legislation (see Appendix 1).

- 4.2 **Guidance and codes of practice** The principal guidance and codes of practice applicable to this policy are:
 - INDG236 Maintaining portable electrical equipment in low-risk environments (as amended 2013).
 - IET Wiring Regulations British Standard 7671:2018 (18th edition).
 - Code of Practice for the Management of Electrotechnical Care in Social Housing (Electrical Safety Roundtable) January 2019.
 - The Code of Practice for In-Service Inspection and Testing of Electrical Equipment (IET) 2020 (5th edition).
- 4.3 **Regulatory standards** We must ensure we comply with the Regulator of Social Housing's regulatory framework and consumer standards for social housing in England; the Safety and Quality Standard is the primary one applicable to this policy.
 - The Social Housing (Regulation) Act 2023 changes the way social housing is regulated and may result in future changes to this policy.
- 4.4 **Sanctions** Failure to discharge our responsibilities and obligations properly could lead to sanctions, including prosecution by the Health and Safety Executive (the HSE) under

the Health and Safety at Work Act 1974; prosecution under the Corporate Manslaughter and Corporate Homicide Act 2007; prosecution under any of the principal legislation listed in Section 4.1; and via a regulatory judgement from the Regulator of Social Housing.

5.0 Obligations

- 5.1 The Housing Act 2004 requires that properties are free from Category 1 housing health and safety rating system (HHSRS) hazards; this includes electrical hazards.
- 5.2 The Landlord and Tenant Act 1985 and the Homes (Fitness for Human Habitation) Act 2018 place duties on landlords to ensure that electrical installations in rented properties are:
 - Safe when a tenancy begins.
 - Maintained in a safe condition throughout the tenancy so the property is fit for habitation.
- 5.3 To comply with these duties, electrical installations should be periodically inspected and tested. Although there is no legal requirement setting out the frequency, best practice guidance from the Electrical Safety Council and from BS7671:2018 recommends intervals of no longer than five years from the previous inspection.
- All electrical installations should be inspected and tested prior to the commencement of any new tenancies. This means that tests should be carried out whilst properties are void and when mutual exchanges and transfers take place, and a satisfactory Electrical Installation Condition Report (EICR) must be issued to the tenant upon moving in.
- 5.5 The Electricity at Work Regulations 1989 places duties on employers that all electrical installations and appliances within the workplace are safe and that only competent persons work on the electrical installations, systems and equipment.
- 5.6 The Electrical Equipment (Safety) Regulations 2016 requires landlords to ensure that any electrical appliances provided as part of a tenancy are safe when first supplied.

6.0 Statement of Intent

- 6.1 We acknowledge and accept our responsibilities with regards to electrical safety under the legislation and regulations, as outlined in Sections 4 and 5.
- 6.2 We will deliver an electrical inspection and testing programme as set out in Section 7.
- 6.3 We will ensure that all electrical installations are in a satisfactory condition following the completion of an electrical installation inspection and test and will require the production of a condition report or other certificate which confirms that the installation is safe.
- 6.4 We will ensure that a full electrical installation inspection and test is undertaken at change of occupancy (void properties, mutual exchanges and transfers), and when

- completing planned works within domestic properties; this will be evidenced through a satisfactory EICR or other report.
- 6.5 We will install, test and replace (as required) battery/hard-wired smoke and carbon monoxide alarms as part of the annual gas safety check visit (or at void stage).
- 6.6 We will operate a robust process if there is difficulty gaining access to a property to carry out the electrical safety check or remediation works. We will use the legal remedies available within the terms of the tenancy agreement, provided the appropriate procedures have been followed and approval given by a Head of Service (or more senior role). Where tenant vulnerability issues are known or identified, we will ensure that we safeguard the wellbeing of the tenant.
- 6.7 We will ensure that there is a robust process in place for the management of immediately dangerous situations identified from the electrical safety check.
- 6.8 We will operate effective contract management arrangements with the contractors responsible for delivering the service, including ensuring contracts/service level agreements are in place, conducting client-led performance meetings and ensuring that contractors' employee and public liability insurances are up to date on an annual basis.
- 6.9 We will operate measures to identify, manage and/or mitigate risks related to portable electrical appliances in the properties we are responsible for.
- 6.10 We will establish and maintain a risk assessment for electrical safety management and operations, setting out our key electrical safety risks and appropriate mitigations.
- 6.11 To comply with the requirements of the Construction (Design and Management)
 Regulations 2015 (CDM) a Construction Phase Plan will be in place for all repairs work to
 void and tenanted properties (at the start of the contract and reviewed annually
 thereafter), component replacement and refurbishment works.

7.0 Programmes

- 7.1 We will carry out a programme of five yearly electrical installation inspections and tests to all domestic properties, communal blocks and other properties (unless the competent person recommends an earlier next test date) or where a new consumer unit has been installed, and this will include the issuing of a new satisfactory EICR. The date of the inspection and test is driven from the anniversary date of the most recent EICR.
- 7.2 **New builds and rewires** All new builds, and all properties which have had a rewire, will receive their first electrical installation inspection and test five years after the date of installation, and every five years thereafter.
- 7.3 **Properties managed by others** We will obtain EICRs where our properties are managed by a third party. We will promote discounted services as an incentive for completion of the EICR. If we are not provided with the EICR we will agree on an appropriate course of

action, which may include carrying out the safety check and re-charging them for the cost of this work.

8.0 Follow-up Work

- 8.1 We will endeavour to repair all Code 1 (C1) and Code 2 (C2) defects identified by an electrical installation inspection and test at the time of the check, to produce a satisfactory EICR. Where this is not possible, we will make the installation safe and return to complete the required remediation works within 28 days to ensure a satisfactory EICR is produced.
- Where any C1 and C2 defects have been repaired, they will be recorded on the satisfactory EICR to provide an audit of the work completed.
- 8.3 We will review all Code 3 (C3) and Further Investigation observations and determine and take the most appropriate course of action.

9.0 Data and Records

- 9.1 We will maintain a core asset register of all properties we own or manage, with component/attribute data against each property to show electrical safety testing and inspection requirements.
- 9.2 We will operate a robust process to manage all changes to stock, including property acquisitions and disposals, to ensure that properties are not omitted from the electrical safety programme and the programme remains up to date.
- 9.3 We will maintain accurate records, against each property we own and/or manage, of the following:
 - Inspection dates.
 - EICRs.
 - Minor Electrical Works Certificates and Building Regulation Part P notifications associated with remedial works.
 - Electrical Installation Certificates.
- 9.4 We will hold these in the QL system and safety check records in Documotive.
- 9.5 We will keep all records and data for a minimum of ten years and for the duration that we own and manage the property. We will keep at least the two most recent EICR records or certificates outlined within section 9.3. We will have robust processes and controls in place to maintain appropriate levels of security for all electrical safety related data.

10.0 Tenant Engagement

- 10.1 We consider good communication essential in the effective delivery of electrical safety programmes, therefore we will endeavour to establish a tenant engagement strategy and communication programme to support tenants in their understanding of electrical safety.
- 10.2 This will assist us in maximising access to carry out electrical inspections, encourage and support tenants to report any concerns about electrical safety, and help us to engage with vulnerable and hard to reach tenants.
- 10.3 We will share information clearly and transparently and will ensure that information is available to tenants via regular publications and information on our website.

11.0 Competent Persons

- 11.1 The Internal Electrical Supervisor, who has lead responsibility for operational delivery, will maintain Approved Electrical Contractor Accreditation with the National Inspection Council for Electrical Inspection Contracting (NICEIC), or equivalent, for all areas of electrical inspection, testing, installation and repair works that they undertake.
- 11.2 Only suitably competent NICEIC (or equivalent) electrical contractors and operatives will undertake electrical works on our behalf.
- 11.3 Only suitably competent NICEIC (or equivalent) third party technical auditors will undertake quality assurance checks.
- 11.4 We will check that our contractors hold the relevant qualifications and accreditations when we procure them, and thereafter on an annual basis; we will evidence these checks and each contractor's certification appropriately.

12.0 Training

12.1 We will deliver training on this policy and the procedures that support it, through appropriate methods including team briefings; basic electrical safety awareness training; and on the job training for those delivering the electrical safety programme, planned maintenance and repair works as part of their daily job. All training undertaken by staff will be formally recorded.

13.0 Performance Reporting

13.1 We will report key performance indicator (KPI) measures for electrical safety that follow the principles set out in the Tenant Satisfaction Measures (TSMs) which came in to force on 1 April 2023. Although electrical safety is not specifically covered by these measures, we will adopt the same approach to ensure consistency with other compliance areas and ensure all dwellings at risk are accounted for.

13.2 We will report the following electrical safety performance:

Report recipient	Frequency
Regulator of Social Housing	Annual
Leadership Team	Monthly
Cabinet	Quarterly
Tenants	Quarterly

13.3 We will also report the following:

Data – the total number of:

- Properties split by category (domestic, communal, commercial/others).
- Properties on programme split by category.
- Properties not on programme.
- Properties with a satisfactory and in date EICR.
- Properties without a satisfactory and in date EICR.
- Properties due to be inspected and tested within the next 30 days.
- Follow-up actions arising from the programme (in time and overdue).

Narrative - an explanation of the:

- Current position.
- Corrective action required.
- Progress with completion of follow-up works.

In addition:

The number of RIDDOR notifications to the HSE with regards to electrical safety.

14.0 Quality Assurance

- 14.1 We will ensure there is programme of third-party quality assurance audits of electrical safety checks. This will be:
 - 100 per cent of all new installations.
 - Ten per cent sample of field checks.
 - Ten per cent of all certificates
- 14.2 Internally we will undertake 100 per cent desktop audits of all EICRs and other records and certificates outlined in Section 9.3.
- 14.3 We will carry out an independent audit of electrical safety annually, to specifically test for compliance with legal and regulatory obligations and to identify non-compliance issues for correction.

15.0 Significant Non-Compliance and Escalation

- 15.1 Our definition of significant non-compliance is any incident which has the potential to result in a potential breach of legislation or regulatory standard, or which causes a risk to health or safety, and which needs to be managed as an exception to routine processes and procedures.
- 15.2 All non-compliance issues will be reported and escalated as soon as possible, and no later than 24 hours after the incident occurred, or of a CBC employee becoming aware of it.
- 15.3 Any non-compliance issue identified at an operational level will be formally reported to the Electrical Supervisor in the first instance, who will agree an appropriate course of corrective action with the Property Compliance Manager and report details of the same to the LT.
- 15.4 In cases of serious non-compliance, LT and Cabinet will consider whether it is necessary to disclose the issue to the Regulator of Social Housing as required by the regulatory framework, or any other relevant organisation such as the Health and Safety Executive.
- 15.5 We will ensure there is a robust process in place to investigate and manage all RIDDOR notifications made to the HSE in relation to electrical safety and will take action to address any issues identified and lessons we have learned, to prevent a similar incident occurring again.

16.0 Glossary

- 16.1 This glossary defines key terms used throughout this policy:
 - EICR: Electrical Installation Condition Report a formal document that is produced following an assessment of the electrical installation within a property (domestic or communal). It must be carried out by an experienced qualified electrician or approved contractor.
 - NICEIC: National Inspection Council for Electrical Installation Contracting an organisation which regulates the training and work of electrical contractors in the UK.
 The NICEIC is one of several providers given Government approval to offer Competent Person Schemes to oversee electrical work within the electrical industry.

Appendix 1 - Additional Legislation

This policy also operates within the context of the following legislation:

- The Defective Premises Act 1972
- Health and Safety at Work Act 1974
- The Occupiers' Liability Act 1984
- Workplace (Health Safety and Welfare) Regulations 1992
- Health and Safety (Safety Signs and Signals) Regulations 1996
- Provision and Use of Work Equipment Regulations 1998
- Management of Health and Safety at Work Regulations 1999
- Regulatory Reform (Fire Safety) Order 2005
- Corporate Manslaughter and Homicide Act 2007
- Building Regulations 2010 (England and Wales) Part P
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- Construction, Design and Management Regulations 2015
- Data Protection Act 2018
- Smoke and Carbon Monoxide Alarm (Amendment) Regulations 2022



Fire Safety Policy



Name Fire Safety Policy

Owner Property Compliance Manager

Version 2

Last Review June 2025
Next Review June 2027

Strategic Lead Claire Hughes – Director of Governance,

Housing and Communities

Member Lead Councillor Flo Clucas – Cabinet Member

Housing and Customer Services

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1.0 Introduction and Objectives

- 1.1 As a landlord, Cheltenham Borough Council (CBC) is responsible for carrying out fire risk assessments, and taking action to identify, manage and mitigate risks associated with fire within the common areas of buildings we own and manage.
- 1.2 The key objective of this policy is to ensure that our Cabinet, Leadership Team, employees, partners and tenants are clear on our legal and regulatory fire safety obligations. This policy provides the framework our staff and partners will operate within to meet these obligations.
- 1.3 This policy forms part of our wider organisational commitment to driving a health and safety culture amongst staff and contractors (as detailed within our Health and Safety Policy). It will be saved on our shared drive and distributed to all relevant members of staff.

2.0 Scope

- 2.1 This policy applies to the following property types:
 - Communal blocks.
 - Sheltered / independent living schemes.
 - Commercial buildings.
- 2.2 Some aspects of this policy also apply to individual domestic properties (houses, flats bungalows, and so on). Applicable items will be clearly referenced.
- 2.3 This policy is relevant to all our employees, tenants, contractors, stakeholders and other persons who may work on, occupy, visit, or use our premises, or who may be affected by our activities or services. Adherence to this policy is mandatory.

3.0 Roles and Responsibilities

- 3.1 CBC is the Responsible Person as defined by the legislation (see Section 4) because we own and manage homes and buildings where tenants and leaseholders live.
- 3.2 The Cabinet has overall governance responsibility for ensuring this policy is fully implemented to ensure full compliance with legislation and regulatory standards. As such, the Cabinet will formally approve this policy and review it every two years (or sooner if there is a change in legislation or regulation).
- 3.3 The Leadership Team (LT) will receive monthly performance reports in respect of fire safety and ensure compliance is being achieved. They will also be notified of any noncompliance issue identified.

- 3.4 The Property Compliance Manager has strategic responsibility for the management of fire safety, and ensuring compliance is achieved and maintained. They will oversee the implementation of this policy.
- 3.5 The Interim Capital Repairs Manager has operational responsibility for the management of fire safety and will be responsible for overseeing the delivery of these programmes.
- 3.6 Housing teams will provide support where gaining access to properties is difficult.

4.0 Legislation, Guidance and Regulatory Standards

- 4.1 **Legislation** The principal legislation applicable to this policy is:
 - Regulatory Reform (Fire Safety) Order 2005 (FSO).
 - Fire Safety Act 2021 came into force on 16 May 2022 and amends the FSO.
 - Fire Safety (England) Regulations 2022 came into force on 23 January 2023.
 - Building Safety Act 2022 (Section 156) came into force on 1 October 2023 and amends the FSO.
 - This policy also operates within the context of additional legislation, industry guidance and government policy direction (see Appendix 1).
- 4.2 **Regulatory standards** We must ensure we comply with the Regulator of Social Housing's regulatory framework and consumer standards for social housing in England; the Safety and Quality Standard is the primary one applicable to this policy.
 - The Social Housing (Regulation) Act 2023 changes the way social housing is regulated and may result in future changes to this policy.
- 4.3 **Sanctions** Failure to discharge our responsibilities and obligations properly could lead to sanctions, including prosecution by the Health and Safety Executive (the HSE) under the Health and Safety at Work Act 1974; prosecution under the Corporate Manslaughter and Corporate Homicide Act 2007; prosecution by the Fire and Rescue Service under the FSO; and via a regulatory judgement from the Regulator of Social Housing.

5.0 Obligations

5.1 Regulatory Reform (Fire Safety) Order 2005 (the FSO)

As the Responsible Person under the FSO (CBC) must:

- Carry out a fire risk assessment (FRA) in all workplaces, commercial buildings and non-domestic parts of multi-occupied residential buildings.
- The FRA should identify general fire precautions and other measures needed to comply with the FSO. Although under the FSO this requirement only applies to

common parts of premises, in practice the responsible person will need to consider the entire premises, including units of residential accommodation.

- Consider who may be especially at risk.
- Implement all necessary general fire precautions and any other necessary measures identified by an FRA to remove or reduce any risks.
- Implement a suitable system of maintenance and appoint competent persons to carry out any procedures that have been adopted.
- Periodically review FRAs in a timescale appropriate to the premises and/or occupation fire risk level. This timescale is determined by the fire risk assessor carrying out the FRA.

5.2 Fire Safety Act 2021

The Act amends the FSO by clarifying that in buildings with two or more sets of domestic premises, the FSO applies to:

- The structure and external walls of the building, including cladding, balconies and windows.
- All doors between the domestic premises and the common parts, for example, entrance doors to individual flats which open on to common parts.

CBC must ensure that FRAs comply with the criteria outlined above by appointing a competent person to review them (if the FRAs do not already comply). See Section 11 for competency requirements.

5.3 Fire Safety (England) Regulations 2022

CBC is required to carry out the following under these regulations:

- **All** buildings with two or more sets of domestic premises: provide tenants with fire safety instructions and information on fire doors.
- Buildings over 11 metres in height: undertake quarterly checks of communal fire doors and annual checks of flat entrance doors.

5.4 **Building Safety Act 2022 – Section 156**

Section 156 of the Building Safety Act amends the FSO and requires Responsible Persons to do the following:

- Record FRAs in full and record fire safety arrangements.
- Record the name of the individual and/or organisation undertaking the FRA and share with tenants.
- Identify other Responsible Persons/Accountable Persons and cooperate with them.

- Share relevant fire safety information with other Responsible Persons and tenants.
- Provide tenants with easy to understand, relevant fire safety information.

There will be an additional requirement to appoint a competent person to undertake and review FRAs which will come into force at a later date, which may result in future changes to this policy.

6.0 Statement of Intent

- 6.1 We acknowledge and accept our responsibilities under all the legislation set out in Section 4 and Section 5. We will endeavour to meet all the requirements of this legislation and set out how we will do this in our supporting procedures and process maps.
- 6.2 All our FRAs will be reviewed by a competent person to ensure they meet the requirements set out in the Fire Safety Act 2021 by December 2026.
- 6.3 Each property requiring an FRA will have one in place which has been carried out by a competent fire risk assessor, and which is compliant with the British Standards Institution's PAS 79-1:2020 and PAS 79-2:2020 specifications for non-residential and residential buildings respectively.
- 6.4 All FRAs will be reviewed no later than the review date set within the most recent FRA and in the event of:
 - A fire, fire safety incident or near miss.
 - Change in building use.
 - Change in working practices that may affect fire safety.
 - Following refurbishment works.
 - Change in applicable legislation.
 - If required following an independent fire safety audit.
- 6.5 Fire evacuation strategies will be determined on a building-by-building basis, in accordance with the recommendations of the competent fire risk assessor and with any guidance from Gloucestershire Fire and Rescue Service.
- 6.6 To comply with the Smoke and Carbon Monoxide Alarm (Amendment) Regulations 2022, which came into force on 1 October 2022, we will install, test and replace (as required) battery operated and/or hard-wired smoke alarms and carbon monoxide alarms as part of the annual gas safety check visit (or at void stage).
- 6.7 If we are made aware that a customer has an issue with mobility or a cognitive impairment, a person-centred fire risk assessment (PCFRA) will be completed.

- 6.8 Personal Emergency Evacuation Plans (PEEPs) will be carried out by a competent person, reviewed annually, and made available to the Fire and Rescue Service in the event of an evacuation, as follows:
 - For any disabled tenant and/or employee within any building where we provide care services and are the employer (i.e., sheltered or supported housing schemes); and
 - For any tenant within a building where we have a responsibility for carrying out an FRA, where we have been notified that they are storing oxygen in their home for medical use.
- 6.9 When letting properties, we may consider the suitability of the accommodation for the prospective tenant in respect of fire safety.
- 6.10 We are committed to working with Gloucestershire Fire and Rescue Service to create safer places to live and work.
- 6.11 We will advise all new tenants of the opportunity to request a free home fire safety check, provided by Gloucestershire Fire and Rescue Service.
- 6.12 We will operate robust processes to gain access should any tenant or leaseholder refuse access to carry out essential fire safety inspection and remediation works (as tested in the case Croydon Council v. Leaseholder 1st August 2014).
- 6.13 We will operate robust processes to gain access to properties where tenant vulnerability issues are known or identified (including hoarding), whilst ensuring we safeguard the wellbeing of the tenant.
- 6.14 We will operate effective contract management arrangements with the contractors responsible for delivering the service, including ensuring contracts/service level agreements are in place, conducting client-led performance meetings, and ensuring that contractors' employee and public liability insurances are up to date on an annual basis.
- 6.15 We will operate a robust process to manage immediately dangerous situations identified during fire safety programmes.
- 6.16 We will adopt a sterile environment approach in all internal common areas, requiring tenants to remove combustible materials from corridors and fire escape routes.
- 6.17 We will permit the storage of mobility scooters within specified areas, storage specifications will be in line with our mobility scooter policy.
- 6.18 We will establish and maintain a risk assessment for fire safety management and operations, setting out our key fire safety risks and appropriate mitigations.
- 6.19 To comply with the requirements of the Construction, Design and Management Regulations 2015 (CDM) a Construction Phase Plan will be in place for all repairs work to void and tenanted properties (at the start of the contract and reviewed annually thereafter), component replacement and refurbishment works.

- 6.20 To comply with the requirements of the Dangerous Substances and Explosive Atmospheres Regulations (DSEAR) 2002, we will consider the safety of our workplaces and plant/boiler rooms of our residential blocks.
- 6.21 We will operate robust processes to record and action any property fires and fire safety related near misses. A near miss is an unplanned event which does not result in an injury but had the potential to do so.

7.0 Programmes

- 7.1 **FRAs** We will ensure our communal blocks, schemes and commercial premises have an FRA in place where we have the legal obligation to do so.
- 7.2 We will undertake a new FRA in a timescale appropriate to the premises and occupation risk level. This timescale will be determined by the fire risk assessor and will be between one and three years. All higher-risk buildings will receive a new FRA annually.
- 7.3 All FRAs will be Type 3 surveys. Type 4 surveys will only be commissioned where it is deemed appropriate for a particular property.
- 7.4 We will carry out desktop reviews of FRAs every 12 months where the reassessment timescale is longer than every 12 months.
- 7.5 We will ensure that a pre-occupation FRA is carried out on all new build schemes or new acquisitions where we have an obligation to do so, followed by a post-occupation FRA, a maximum of three months after the first tenant moves in.
- 7.6 **Fire door checks** To comply with the Fire Safety (England) Regulations, we will undertake quarterly checks of communal fire doors and annual checks of flat entrance doors to all buildings over 11 meters in height.
- 7.7 For all other communal blocks and other properties with common areas, we will undertake a six-monthly check of all communal fire doors, and an annual check of all flat entrance doors.
- 7.8 **Servicing** We will carry out a programme of servicing, maintenance and testing, in accordance with all relevant British Standards and manufacturer's recommendations, to all fire detection, prevention and firefighting systems and equipment within buildings we own and manage.
- 7.9 **Regular inspections** We will carry out a programme of fortnightly inspections to all blocks and schemes.

8.0 Follow-up Work

8.1 We will ensure robust processes are in place to implement all general fire precaution measures identified by FRAs, in accordance with the following priorities and timescales:

- Intolerable Risk (Category 1) within 24 hours.
- High Risk (Category 2) within seven days
- Medium Risk (Category 3) within one month.
- Low Risk (Category 4) within six months or delivered as part of a planned programme within 12 months.
- 8.2 We will use the date the FRA was undertaken on-site as our timeframe to start completing FRA actions.
- 8.3 We will ensure there is a robust process in place to manage follow-up works arising from fire door checks, and servicing and maintenance checks to fire systems and equipment.

9.0 Data and Records

- 9.1 We will maintain a core asset register of all properties we own or manage, setting out which properties require an FRA. We will also set out which properties require fire safety servicing and maintenance regimes (for example, fire alarms, emergency lighting and smoke/heat detection).
- 9.2 We will operate a robust process to manage all changes to stock, including property acquisitions and disposals, to ensure that properties are not omitted from fire safety programmes and the programme remains up to date.
- 9.3 We will hold fire safety inspection dates, FRAs, FRA actions, and fire safety servicing records against all properties on each programme. These will be held in the QL system and Documotive.
- 9.4 We will keep fire safety logbooks electronically (or securely on site where practical), for all properties on the FRA programme.
- 9.5 We will keep all records and data, for the duration that we own and manage the property and will have robust processes and controls in place to maintain appropriate levels of security for all fire safety related data.

10.0 Tenant Engagement

- 10.1 We consider good communication essential in the effective delivery of fire safety programmes, therefore we will establish a tenant engagement strategy and communication programme. This will support tenants in their understanding of fire safety, advise them of how they can keep themselves and other tenants safe, and encourage them to report any fire safety concerns.
- 10.2 We also aim to successfully engage with vulnerable and hard to reach tenants. We will share information clearly and transparently and will ensure that information is available to tenants via regular publications and information on our website.

11.0 Competent Persons

- 11.1 The Compliance Manager will hold the NEBOSH National Certificate in Fire Safety and Risk Management (or equivalent), or Level 4 VRQ Diploma in Asset and Building Management. If they do not have this already, they will obtain it within 12 months of the approval of this policy.
- Only suitably competent contractors, fire risk assessors and fire engineers will undertake FRAs or works to fire safety equipment, systems and installations. These must be certified by BAFE and/or an IFSM member and be in line with the Fire Sector Federation's guidance on choosing a competent Fire Risk Assessor.
- 11.3 Only suitably competent fire safety consultants and contractors will provide third party technical quality assurance checks.
- 11.4 We will check that our contractors hold the relevant qualifications and accreditations when we procure them, and thereafter on an annual basis; we will evidence these checks and each contractor's certification appropriately.

12.0 Training

12.1 We will deliver training on this policy and the procedures that support it, including team briefings; basic fire safety awareness training; and on the job training for those delivering fire safety programmes, planned maintenance and repairs works as part of their daily job. All training undertaken by staff will be formally recorded.

13.0 Performance Reporting

- 13.1 We will report key performance indicator (KPI) measures for fire safety that follow the requirements set out in the Tenant Satisfaction Measures (TSMs) which came into force on 1 April 2023 and must be reported to the RSH on an annual basis.
- 13.2 We will report the following fire safety performance:

Report recipient	Frequency
Regulator of Social Housing	Annual
Leadership Team	Monthly
Cabinet	Quarterly
Tenants	Quarterly

13.3 We will also report the following:

Data - the total number of:

Properties split by category (communal blocks/schemes, commercial/ other).

- Properties on the FRA programme.
- Properties not on the FRA programme.
- Properties with a valid and in date FRA.
- Properties without a valid and in date FRA.
- Properties due a new FRA within the next 30 days.
- Completed, in-time and overdue follow-up works/actions (split by priority).

Narrative - an explanation of the:

- Current position.
- Corrective action required.
- Progress with completion of follow-up works.

In addition:

- Compliance with the fire safety equipment, systems and installations servicing and maintenance programme.
- The number of RIDDOR notifications to the HSE with regards to fire safety.
- Details of any enforcement notices from the Fire and Rescue Service or other enforcement bodies.
- Recording and reporting on property fires to identify trends and target awareness campaigns.

14.0 Quality Assurance

- 14.1 We will internally review 100 per cent of FRA surveys.
- 14.2 We will carry out property inspections to 20% of properties with an FRA to audit that all required management actions have been completed.
- 14.3 We will carry out post-inspections of FRA actions related to building fabric work.
- 14.4 We will carry out an independent audit of fire safety at least once every two years, to specifically test for compliance with legal and regulatory obligations and to identify any non-compliance issues for correction.

15.0 Significant Non-Compliance and Escalation

- 15.1 Our definition of significant non-compliance is any incident which has the potential to result in a potential breach of legislation or regulatory standard, or which causes a risk to health or safety, and which needs to be managed as an exception to routine processes and procedures.
- 15.2 All non-compliance issues will be reported and escalated as soon as possible, and no later than 24 hours after the incident occurred, or of a CBC employee becoming aware of it.

- 15.3 Any non-compliance issue identified at an operational level will be formally reported to the Interim Capital and Repairs Manager in the first instance, who will agree an appropriate course of corrective action with the Property Compliance Manager and report details of the same to the LT.
- 15.4 In cases of serious non-compliance, LT and Cabinet will consider whether it is necessary to disclose the issue to the Regulator of Social Housing as required by the regulatory framework, or any other relevant organisation such as the Health and Safety Executive.
- 15.5 We will ensure there is a robust process in place to investigate and manage all RIDDOR notifications made to the HSE in relation to fire safety and will take action to address any issues identified and lessons we have learned, to prevent a similar incident occurring again.

16.0 Glossary

- 16.1 This glossary defines key terms used throughout this policy:
 - BAFE: Is the independent register of quality fire safety service providers, who are certified to ensure quality and competence to help meet fire safety obligations.
 - **FRA:** A fire risk assessment is an assessment involving the systematic evaluation of the factors that determine the hazard from fire, the likelihood that there will be a fire and the consequences if one were to occur.
 - **FRA survey**: The FSO states that an FRA is required, however, it does not prescribe how intrusive or destructive this should be. There are four types of FRA:
 - Type 1 common parts only (non-destructive), basic level to satisfy the FSO.
 - Type 2 common parts only (destructive), element of destruction on sample basis.
 - Type 3 common parts and flats (non-destructive), considers means of escape and fire detection within at least a sample of flats.
 - Type 4 common parts and flats (destructive).
 - **IFSM:** The Institute of Fire Safety Managers.
 - PAS79: A publicly available specification published by the British Standards
 Institution which focuses on making sure that all the required information that
 pertains to both an FRA and its findings are recorded.
 - **PEEP:** A personal emergency evacuation plan is a bespoke escape plan for individuals who may not be able to reach an ultimate place of safety unaided or within a satisfactory period of time in the event of any emergency.

• **UKAS**: The National Accreditation Body for the United Kingdom, appointed by government to assess and accredit organisations that provide services including certification, testing, inspection and calibration.

Appendix 1 – Additional Legislation and Policy Direction

Legislation - This policy also operates within the context of the following legislation:

- The Defective Premises Act 1972
- Health and Safety at Work Act 1974
- The Occupiers' Liability Act 1984
- Furniture and Furnishings (Fire) (Safety) Regulations 1988
- Health and Safety (Safety Signs and Signals) Regulations 1996
- Gas Safety (Installation and Use) Regulations 1998
- Management of Health and Safety at Work Regulations 1999
- Dangerous Substances and Explosive Atmospheres Regulations 2002 (DSEAR)
- Housing Act 2004
- Licensing and Management of Houses in Multiple Occupation and Other Houses (Miscellaneous Provisions) (England) Regulations 2006
- Management of Houses in Multiple Occupation (England) Regulations 2006
- Building Regulations 2010: Approved Document B Fire Safety
- Homes (Fitness for Human Habitation) Act 2018
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- Construction (Design and Management) Regulations 2015
- Electrical Equipment (Safety) Regulations 2016
- Data Protection Act 2018
- Smoke and Carbon Monoxide Alarm (Amendment) Regulations 2022
- Social Housing (Regulation) Act 2023

Guidance – The principal guidance documents applicable to this policy are:

- Housing Fire Safety: Guidance on fire safety provisions for certain types of existing housing (Local Authorities Coordinators of Regulatory Services), August 2008.
- Fire safety in purpose-built blocks of flats. This guidance should be viewed as no longer comprehensive; the Home Office is currently working on a revised version but in the interim, it is continued to be made available as it contains relevant and useful information for purpose-built blocks of flats.
- Fire Safety in Specialised Housing (National Fire Chiefs Council), May 2017. This guidance covers sheltered schemes, supported schemes and extra care schemes.
- Housing Health and Safety Rating System Operating Guidance: Housing Act 2004
 Guidance about inspections and assessment of hazards given under Section 9 (Ministry of
 Housing, Communities & Local Government), February 2006.
- Housing Health and Safety Rating System Operating Guidance: Addendum for the profile
 for the hazard of fire and in relation to cladding systems on high rise residential buildings
 (Ministry of Housing, Communities & Local Government), November 2018.

• Guidance to support a temporary change to a simultaneous evacuation strategy in purpose-built blocks of flats (National Fire Chiefs Council), fourth edition, August 2022.

Additional guidance and policy direction – The following documents set out clear direction for landlords in respect of fire safety, and whilst not statutory guidance or approved legislation, there are certain recommendations or proposals which are applicable to this policy:

- Fire Sector Federation Approved Code of Practice: A National Framework for Fire Risk Assessor Competency (November 2020).
- Fire Sector Federation A Guide to Choosing a Competent Fire Risk Assessor (Version 3, October 2020).
- Grenfell Tower Inquiry: phase 1 report. Volume 1 4 (October 2019).
- Building a Safer Future Independent Review of Building Regulations and Fire Safety: Final Report (May 2018).



Asbestos Policy



Name Asbestos Policy

Owner Property Compliance Manager

Version 2

Last ReviewJune 2025Next ReviewJune 2027

Strategic Lead Claire Hughes – Director of Governance,

Housing and Communities

Member Lead Councillor Flo Clucas – Cabinet Member

Housing and Customer Services

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1.0 Introduction and Objectives

- 1.1 As a landlord, Cheltenham Borough Council (CBC) is responsible for maintenance and repairs to our homes, communal blocks and other properties we own and manage, many of which will have been constructed using asbestos containing materials. As such, we have a legal duty to manage asbestos in these buildings.
- 1.2 Homes or buildings built or refurbished before the year 2000 may contain asbestos. If an asbestos containing material is disturbed or damaged it can release asbestos fibres into the air which are a danger to health if inhaled. Workers who carry out repairs and maintenance work are at particular risk, however, building occupants could also be put at risk.
- 1.3 The key objective of this policy is to ensure our Cabinet, Leadership Team, employees, partners and tenants are clear on our legal and regulatory asbestos safety obligations. This policy provides the framework our staff and partners will operate within to meet these obligations.
- 1.4 This policy forms part of our wider organisational commitment to driving a health and safety culture amongst staff and contractors (as detailed within our Health and Safety Policy). It will be saved on our shared drive and distributed to all relevant members of staff.

2.0 Scope

- 2.1 This policy applies to the following property types:
 - Communal blocks.
 - Sheltered / independent living schemes.
- 2.2 Some aspects of this policy also apply to individual domestic properties (houses, flats bungalows, and so on). Applicable items will be clearly referenced.
- 2.3 This policy is relevant to all our employees, tenants, contractors, stakeholders and other persons who may work on, occupy, visit, or use our premises, or who may be affected by our activities or services. Adherence to this policy is mandatory.

3.0 Roles and Responsibilities

3.1 The Cabinet has overall governance responsibility for ensuring this policy is fully implemented to ensure full compliance with legislation and regulatory standards. As such, the Cabinet will formally approve this policy and review it every two years (or sooner if there is a change in legislation or regulation).

- 3.2 The Leadership Team (LT) will receive monthly performance reports in respect of asbestos safety and ensure compliance is being achieved. They will also be notified of any non-compliance issue identified.
- 3.3 The Property Compliance Manager has strategic responsibility for the management of asbestos safety, and ensuring compliance is achieved and maintained. They will oversee the implementation of this policy.
- 3.4 The Interim Capital and Repairs Manager has operational responsibility for the management of asbestos safety and will be responsible for overseeing the delivery of these programmes. The Compliance Manager will fulfil the role of the Appointed Person and will be the overall Responsible Person on behalf of Cheltenham Borough Council.
- 3.5 Housing teams will provide support for gaining access to properties as necessary.
- 3.6 Under the requirements of the Social Housing (Regulation) Act 2023 we have appointed the Deputy Chief Executive as our Health and Safety Lead.

4.0 Legislation, Guidance and Regulatory Standards

- 4.1 **Legislation** The principal legislation applicable to this policy is:
 - The Control of Asbestos Regulations 2012.
 - This policy also operates within the context of additional legislation (see Appendix 1).
- 4.2 **Approved Code of Practice (ACoP)** The principal ACoP applicable to this policy is:
 - ACoP L143 Managing and working with Asbestos (Second edition, 2013).
- 4.3 **Guidance** The principal guidance documents applicable to this policy are:
 - HSG227 A comprehensive guide to managing asbestos in premises (First edition, 2002).
 - HSG247 Asbestos: The licensed contractors' guide (First edition, 2006).
 - HSG264 Asbestos: The survey guide (Second edition, 2012).
 - INDG223 Managing asbestos in buildings: a brief guide (Revision 5, April 2012).
 - HSG210 Asbestos Essentials: A task manual for building, maintenance and allied trades and non-licensed asbestos work (Fourth edition, 2018).
 - HSG248 Asbestos: The Analysts' Guide (Second edition, 2021).
- 4.4 **Regulatory standards** We must ensure we comply with the Regulator of Social Housing's regulatory framework and consumer standards for social housing in England; the Safety and Quality Standard is the primary one applicable to this policy.

- The Social Housing (Regulation) Act 2023 changes the way social housing is regulated and may result in future changes to this policy.
- 4.5 **Sanctions** Failure to discharge our responsibilities and obligations properly could lead to sanctions, including prosecution by the Health and Safety Executive (the HSE) under the Health and Safety at Work Act 1974; prosecution under the Corporate Manslaughter and Corporate Homicide Act 2007; prosecution under the Control of Asbestos Regulations; and via a regulatory judgement from the Regulator of Social Housing.

5.0 Obligations

- 5.1 Under The Control of Asbestos Regulations 2012 (CAR 2012) CBC has a legal obligation under Part 2, Section 4 'Duty to manage asbestos in non-domestic properties' and is the 'Duty Holder' for the purposes of the legislation. We are required to:
 - Find out if asbestos containing materials (ACMs) are present, where we have an obligation to do so, presuming that materials contain asbestos unless we have strong evidence that they do not.
 - Identify the location and condition of any ACMs.
 - Assume asbestos is present if the property was built prior to the year 2000.
 - Keep an up-to-date record (an asbestos register) of the location and condition of ACMs or presumed ACMs.
 - Assess the risk from any ACMs found.
 - Prepare an Asbestos Management Plan that sets out how we will manage the risk from ACMs, and review and monitor its implementation.
 - Set up a system to provide information on the location and condition of ACMs to anyone who is liable to work on or disturb them.
 - Asses the reliability of information we receive relating to asbestos within the properties we own and manage. Anyone who has information on the whereabouts of asbestos within these properties is required to make this available to us.

6.0 Statement of Intent

- 6.1 We acknowledge and accept our responsibilities under CAR 2012 as outlined in Section 5, and we recognise that the main hazard in relation to asbestos is the non-identification of ACMs. As such, we will protect those persons potentially exposed to asbestos as far as is reasonably practical, through the use of appropriate control measures and working methods.
- 6.2 We will have an Asbestos Management Plan and will maintain an asbestos register.

- 6.3 We will ensure that information about ACMs (known or presumed) is provided to every person liable to disturb it, accidentally or during the course of their work. This includes employees, contractors and tenants.
- 6.4 We will generally not use asbestos labelling in domestic premises, however, in non-domestic premises and common areas of domestic blocks, labelling will be used where practicable.
- 6.5 We will provide appropriate personal protective equipment to our in-house delivery team where required.
- 6.6 We will ensure that there is a robust process in place to manage immediately dangerous situations identified during asbestos related works.
- 6.7 We will operate effective contract management arrangements with the contractors responsible for delivering the service, including ensuring contracts/service level agreements are in place, conducting client-led performance meetings, and ensuring that contractors' employee and public liability insurances are up to date on an annual basis.
- 6.8 We will use the legal remedies available within the terms of the tenancy and lease agreement should any tenant, leaseholder or shared owner refuse access to carry out essential asbestos related inspection and remediation works. Where tenant vulnerability issues are known or identified we will ensure we safeguard the wellbeing of the tenant.
- 6.9 We will establish and maintain a risk assessment for asbestos management and operations, setting out our key risks from asbestos and appropriate mitigations.
- 6.10 To comply with the requirements of the Construction (Design and Management)
 Regulations 2015 (CDM) a Construction Phase Plan will be in place for all repairs to void
 and tenanted properties (at the start of the contract and reviewed annually thereafter),
 component replacement works and refurbishment projects.

7.0 Programmes

- 7.1 **Non-domestic properties** All non-domestic properties (communal blocks/supported schemes/offices/depots) that we own or manage, built prior to the year 2000, will have an asbestos management survey that is compliant with CAR 2012 (dated after 6 April 2012 when this legislation came into effect).
- 7.2 We will maintain a programme of asbestos re-inspections for all properties that contain ACMs (known or presumed). Re-inspections will either be annual or in accordance with the risk level as identified by the previous survey. We will not re-inspect any properties where the initial asbestos management survey confirms that there are no ACMs.
- 7.3 **Domestic properties** We currently hold asbestos survey data on approximately 51% per cent of our domestic properties. Within the lifecycle of this policy, we will implement a risk-based approach to pro-actively carrying out surveys within domestic properties.

- 7.4 **Garages** We own or manage 659 garages, many of which may contain ACMs. We will carry out a risk-based programme of sample inspections to assess the location and condition of ACMs within these garages and implement a programme of remedial works as necessary.
- 7.5 **Repairs / planned maintenance** We will review existing asbestos survey information prior to carrying out any intrusive void work, day-to-day repairs, planned maintenance or refurbishment work. Where there is no asbestos information, prior to the work taking place, we will commission a refurbishment and/or demolition asbestos survey to the areas of the property that are likely to be disturbed as part of the proposed works. We will also undertake a management asbestos survey to the remainder of the property as part of the same refurbishment and/or demolition survey. Once completed, survey details will be provided to the relevant operatives or contractors.

8.0 Follow-up Work

- 8.1 Where asbestos is positively identified and removal, sealing or encapsulation is recommended by the competent person, this will be carried out as follows:
 - Non-licensed works (as defined in regulation 2 of CAR 2012) will be undertaken by a Licensed Asbestos Removal Contractor (LARC) licensed by the Health and Safety Executive in compliance with CAR 2012.
 - Notifiable non-licensed works (as defined in regulation 2 of the CAR 2012) will be undertaken by a LARC.
 - Licensed works (as defined in regulation 2 of CAR 2012) will be undertaken by a LARC.

9.0 Data and Records

- 9.1 We will maintain a core asset register of all properties we own or manage, setting out which properties are and are not required to be included on the asbestos re-inspection programme.
- 9.2 We will operate a robust process to manage all changes to stock, including property acquisitions and disposals, to ensure that properties are not omitted from asbestos programmes and the programme remains up to date.
- 9.3 We will keep an asbestos register in the QL system. The asbestos register will include details of ACMs in the properties we own or manage, with information on the type, address, location and condition. We will hold inspection dates, asbestos surveys, details of remediation works and evidence of completion of these works in the QL system and Documotive.

- 9.4 We will keep all of these records for the duration that we own and manage the property and have robust processes and controls in place to maintain appropriate levels of security for all asbestos related data.
- 9.5 We will keep air monitoring and health surveillance records for at least 40 years.

10.0 Tenant Engagement

- 10.1 We consider good communication essential in the effective delivery of asbestos safety, therefore we will establish a tenant engagement strategy and communication programme. This will support tenants in their understanding of asbestos, advise them of how they can manage any risk if there is asbestos within their property, and encourage them to report any asbestos safety concerns.
- 10.2 We also aim to successfully engage with vulnerable and hard to reach tenants. We will share information clearly and transparently and will ensure that information is available to tenants via regular publications and information on our website.

11.0 Competent Persons

- 11.1 The operational lead will hold a P405, P402, P407 or W504 qualification (or equivalent). If they do not have one of these, they will obtain this within 12 months of the approval of this policy.
- 11.2 Only competent contractors (as per HSG264) will carry out asbestos management surveys.
- 11.3 Only competent Licensed Asbestos Removal Contractors will carry out all work on asbestos, including non-notifiable non-licensed work, notifiable non-licensed work or licensed works.
- 11.4 Suitably competent persons will undertake asbestos re-inspections and the removal of non-licensed asbestos, under the supervision of persons who are suitably trained and competent to manage this work.
- Only suitably competent asbestos consultants and contractors will provide third party technical quality assurance checks.
- 11.6 We will check that our contractors hold the relevant qualifications and accreditations when we procure them, and thereafter on an annual basis; we will evidence these checks and each contractor's certification appropriately.

12.0 Training

12.1 We will deliver training on this policy and the procedures that support it, through appropriate methods including team briefings; basic asbestos awareness training; and on

the job training for those delivering the asbestos programme, planned maintenance and repair works as part of their daily job. All training undertaken by staff will be formally recorded.

13.0 Performance Reporting

- 13.1 We will report key performance indicator (KPI) measures for asbestos safety that follow the requirements set out in the Tenant Satisfaction Measures (TSMs) which came in to force on 1 April 2023 and must be reported to the Regulator on an annual basis.
- 13.2 We will report the following asbestos safety performance:

Report recipient	Frequency
Regulator of Social Housing	Annual
Leadership Team	Monthly
Cabinet	Quarterly
Tenants	Quarterly

13.3 We will also report the following:

Data – the total number of:

- Properties split by category (communal blocks/schemes, commercial/other).
- Properties with a post 2012 management survey.
- Properties without a post 2012 management survey.
- Properties on the re-inspection programme.
- Properties not on the re-inspection programme.
- Properties with a valid and in date re-inspection.
- Properties without a valid and in date re-inspection.
- Properties due to be re-inspected within the next 30 days.
- Completed, in-time and overdue follow-up actions arising from the surveys.

Narrative - an explanation of the:

- Current position.
- Corrective action required.
- Progress with completion of follow-up works.

In addition:

- The percentage of domestic properties with full asbestos data.
- The number of RIDDOR notifications to the HSE with regards to asbestos safety.

14.0 Quality Assurance

- 14.1 We will require external contractors to provide the results of their own five per cent quality assurance audit checks, as required by UKAS, on a monthly basis.
- 14.2 We will undertake ten per cent third party audits of asbestos removals and air monitoring.
- 14.3 We will commission an independent audit of asbestos management at least once every two years, to specifically test for compliance with legal and regulatory obligations and to identify any non-compliance issues for correction.

15.0 Significant Non-Compliance and Escalation

- 15.1 Our definition of significant non-compliance is any incident which has the potential to result in a potential breach of legislation or regulatory standard, or which causes a risk to health or safety, and which needs to be managed as an exception to routine processes and procedures.
- 15.2 All non-compliance issues will be reported and escalated as soon as possible, and no later than 24 hours after the incident occurred, or of a CBC employee becoming aware of it.
- 15.3 Any non-compliance issue identified at an operational level will be formally reported to the Interim Capital and Repairs Manager in the first instance, who will agree an appropriate course of corrective action with the Property Compliance Manager and report details of the same to the LT.
- 15.4 In cases of serious non-compliance, LT and Cabinet will consider whether it is necessary to disclose the issue to the Regulator of Social Housing as required by the regulatory framework, or any other relevant organisation such as the Health and Safety Executive.
- 15.5 We will ensure there is a robust process in place to investigate and manage all RIDDOR notifications made to the HSE in relation to asbestos safety and will take action to address any issues identified and lessons we have learned, to prevent a similar incident occurring again.

16.0 Glossary

- 16.1 This glossary defines key terms used throughout this policy:
 - Duty Holder: The owner of the non-domestic premises or the person or organisation that has clear responsibility for the maintenance or repair of nondomestic premises, for example through an explicit agreement such as a tenancy agreement or contract.
 - Management asbestos survey: A survey to enable the management of asbestoscontaining materials during the normal occupation and use of premises.
 - Refurbishment and/or demolition asbestos survey: A refurbishment and/or demolition survey (previously known as a type 3 survey) is a survey which is

necessary prior to any works which may affect the fabric of a building, and which is used to locate (as far as reasonably practicable) asbestos-containing materials. The survey may be within a localised area or cover the whole building.

• **UKAS:** The appointed national accreditation body for asbestos surveyors. Accreditation is a means of assessing, in the public interest, the technical competence and integrity of organisations offering evaluation services.

Appendix 1 - Additional Legislation

This policy also operates within the context of the following legislation:

- Defective Premises Act 1972
- Health and Safety at Work Act 1974
- Landlord and Tenant Act 1985
- Homes (Fitness for Human Habitation) Act 2018
- The Occupiers' Liability Act 1984
- The Workplace (Health Safety and Welfare) Regulations 1992
- Personal Protective Equipment at Work Regulations 1992
- The Asbestos (Licensing) (Amendment) Regulations 1998
- The Management of Health and Safety at Work Regulations 1999
- Control of Substances Hazardous to Health Regulations (as amended) 2002 (COSHH)
- Hazardous Waste (England and Wales) Regulations 2005 (Amendment 2009)
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- Construction (Design and Management) Regulations 2015
- Data Protection Act 2018
- Social Housing (Regulation) Act 2023



Water Hygiene Policy



Name Water Hygiene Policy

Owner Property Compliance Manager

Version 2

Last ReviewJune 2025Next ReviewJune 2027

Strategic Lead Claire Hughes – Director of Governance,

Housing and Communities

Member Lead Councillor Flo Clucas – Cabinet Member

Housing and Customer Services

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1.0 Introduction and Objectives

- 1.1 As a landlord, Cheltenham Borough Council (CBC) must meet the legal obligations which require us to deal with the risks associated with legionella bacteria within the properties we own or manage. Legionella bacteria can cause a potentially fatal form of pneumonia called Legionnaires' disease. People contract Legionnaires' disease by inhaling small droplets of water containing the bacteria.
- 1.2 As far as is reasonably practicable, we must introduce measures to reduce and/or control exposure to legionella bacteria, including managing the conditions that support the growth of the bacteria in water systems.
- 1.3 The key objective of this policy is to ensure that our Cabinet, Leadership Team, employees, partners and tenants are clear on our legal and regulatory water hygiene obligations. This policy provides the framework our staff and partners will operate within in order to meet these obligations.
- 1.4 This policy forms part of our wider organisational commitment to driving a health and safety culture amongst staff and contractors (as detailed within our Health and Safety Policy). It will be saved on our shared drive and distributed to all relevant members of staff.

2.0 Scope

- 2.1 This policy applies to the following property types:
 - Communal blocks.
 - Sheltered / independent living schemes.
- 2.2 Some aspects of this policy also apply to individual domestic properties (houses, flats bungalows, and so on). Applicable items will be clearly referenced.
- 2.3 This policy is relevant to all our employees, tenants, contractors, stakeholders and other persons who may work on, occupy, visit, or use our premises, or who may be affected by our activities or services. Adherence to this policy is mandatory.

3.0 Roles and Responsibilities

3.1 The Cabinet has overall governance responsibility for ensuring this policy is fully implemented to ensure full compliance with legislation and regulatory standards. As such, the Cabinet will formally approve this policy and review it every two years (or sooner if there is a change in legislation or regulation).

- 3.2 The Leadership Team (LT) will receive monthly performance reports in respect of water hygiene safety and ensure compliance is being achieved. They will also be notified of any non-compliance issue identified.
- 3.3 The Property Compliance Manager has strategic responsibility for the management of water hygiene safety, and ensuring compliance is achieved and maintained. They will oversee the implementation of this policy.
- 3.4 The Property Compliance Manager has operational responsibility for the management of water hygiene safety and will be responsible for overseeing the delivery of these programmes. The Property Compliance Manager is the Responsible Person.
- 3.5 The Compliance Officer is the Deputy Responsible Person who will provide cover to the Property Compliance Manager (Responsible Person) in their absence.
- 3.6 Housing teams will provide support where gaining access to properties is difficult.

4.0 Legislation, Guidance and Regulatory Standards

- 4.1 **Legislation** The principal legislation applicable to this policy is as follows:
 - The Health and Safety at Work Act 1974.
 - The Control of Substances Hazardous to Health Regulations 2002 (as amended) (COSHH).
 - This policy also operates within the context of additional legislation (see Appendix 1).
- 4.2 **Approved Code of Practice (ACoP)** The principal ACoP applicable to this policy is:
 - ACOP L8 Legionnaires' disease: The control of legionella bacteria in water systems (4th edition 2013).
- 4.3 **Guidance** The principal guidance applicable to this policy is as follows:
 - HSG274 Legionnaires' disease: Technical guidance Part 2: The control of legionella bacteria in hot and cold water systems (2014).
 - HSG274 Legionnaires' disease: Technical guidance Part 3: The control of legionella bacteria in other risk systems (2013).
 - INDG458 Legionnaires' disease: A brief guide for dutyholders (2012).
 - BS 8580-1:2019 Water quality, risk assessments for Legionella control Code of practice.
- 4.4 **Regulatory standards** We must ensure we comply with the Regulator of Social Housing's regulatory framework and consumer standards for social housing in England; the Safety and Quality Standard is the primary one applicable to this policy.

- The Social Housing (Regulation) Act 2023 changes the way social housing is regulated and may result in future changes to this policy.
- 4.5 **Sanctions** Failure to discharge our responsibilities and obligations properly could lead to sanctions, including: prosecution by the Health and Safety Executive (the HSE) under the Health and Safety at Work Act 1974; prosecution under the COSHH Regulations; prosecution under the Corporate Manslaughter and Corporate Homicide Act 2007; and via a regulatory judgement from the Regulator of Social Housing.

5.0 Obligations

- 5.1 The Health and Safety at Work Act 1974 places a duty on us, as an employer and landlord, to ensure our employees and others affected by our undertakings (for example, tenants), are not exposed to health and safety risks, including the risk from legionella.
- We have a legal obligation under COSHH to prevent or control exposure to biological agents, including legionella.
- 5.3 CBC is the 'Duty Holder' as defined by ACoP L8 and we must take necessary precautions to prevent, reduce or control the risks of exposure to legionella.
- 5.4 As the Duty Holder, we must:
 - Carry out a risk assessment for all hot and cold-water systems, cooling plant and any
 other systems that can produce water droplets to identify and assess potential risks.
 - Implement measures to either eliminate, reduce or control identified risks.
 - Appoint a Responsible Person to take managerial responsibility for:
 - Carrying out risk assessments.
 - Producing written schemes of control (a practical, risk management document used to control the risk from exposure to legionella).
 - o Implementing the written scheme of control.
 - Appoint a Deputy Responsible Person who will provide cover to the responsible person in their absence.
 - Keep associated records for five years.

6.0 Statement of Intent

6.1 We acknowledge and accept our responsibilities and obligations under the legislation outlined in Sections 4 and 5.

- 6.2 We will review legionella risk assessments using a risk-based approach. Schemes will be assessed as high, medium or low risk.
- 6.3 Written schemes of control will be in place for all properties risk assessed as requiring controls to manage the risk of legionella exposure.
- 6.4 When properties become void, we will drain and flush the water system, including any shower loop, before undertaking any work. The water system will then be flushed and recommissioned before the property is let, and the shower head replaced or sterilised.
- 6.5 We will carry out checks to identify pipework 'dead legs' and remove them within void properties and any properties where we are carrying out adaptations or planned investment work.
- 6.6 When we acquire properties (existing or new build) we will follow the same process as for void properties, and we will ensure that there are no pipework 'dead legs' present when we take possession of the property.
- 6.7 We will operate a robust process for the management of immediately dangerous situations identified from the legionella risk assessment, water testing/monitoring regime or suspected legionella outbreak.
- 6.8 We will use the legal remedies available within the terms of the tenancy and lease agreement should any tenant, leaseholder or shared owner refuse access to carry out essential water hygiene related inspection and remediation works. Where tenant vulnerability issues are known or identified we will ensure we safeguard the wellbeing of the tenant.
- 6.9 We will operate effective contract management arrangements with the contractors responsible for delivering the service, including; ensuring contracts/service level agreements are in place, conducting client-led performance meetings, and ensuring that contractors' employee and public liability insurances are up to date on an annual basis.
- 6.10 We will establish and maintain a risk assessment for water hygiene management and operations, setting out our key water hygiene risks and appropriate mitigations.
- 6.11 To comply with the requirements of the Construction, Design and Management Regulations 2015 (CDM) a Construction Phase Plan will be in place for all repairs work to void and tenanted properties (at the start of the contract and reviewed annually thereafter), component replacement works and refurbishment projects.

7.0 Programmes

7.1 **Communal blocks and other properties** – We will ensure all communal blocks and other properties (such as supported schemes) that we own or manage are subject to an initial visit to establish whether a legionella risk assessment (LRA) is required. Thereafter, if an

- LRA is required, the property will be included on the LRA programme. If an LRA is not required, we will record this on our core asset register.
- 7.2 For all properties on the LRA programme, we will undertake a risk-based approach to renewing the LRAs. This will be supplemented by an annual internal desktop review.
- 7.3 LRAs will be reviewed in the following circumstances:
 - Change in building use.
 - Change in internal layout of water system.
 - Change in building occupation that increases the risk due to health.
 - After a confirmed or suspected outbreak of Legionella.
 - Following a water hygiene audit (if required).
- 7.4 **Domestic properties** We will undertake an annual programme of five per cent sample legionella risk assessments in domestic properties. These will be prioritised according to the perceived level of risk (based on design, size, age and type of water supply).
- 7.5 **Testing and monitoring** We will undertake testing and monitoring (for example, monthly temperature checks) as set out within any written schemes of control.
- 7.6 We will ensure there is a robust process in place for the management of any follow-up works required following the completion of an LRA or ongoing monitoring (where the work cannot be completed at the time of the assessment or check).

8.0 Data and Records

- 8.1 We will maintain a core asset register of all properties we own or manage, setting out which properties require an LRA. We will also set out which properties require ongoing testing and monitoring as prescribed by the written control scheme (for example, monthly temperature checks).
- 8.2 We will operate a robust process to manage all changes to stock, including property acquisitions and disposals, to ensure that properties are not omitted from water hygiene programmes and the programmes remain up to date.
- 8.3 We will hold LRA inspection dates, LRAs, and testing and monitoring records against all properties on each programme. LRA inspection dates will be held in the QL system and Documotive. Testing and monitoring records are held on an Excel spreadsheet and the contractor portal.
- 8.4 We will keep water hygiene logbooks electronically (or securely on site where practical), for all properties on the LRA programme.

8.5 We will keep all records for at least five years or for the duration that we own and manage the property and have robust processes and controls in place to maintain appropriate levels of security for all water hygiene related data.

9.0 Tenant Engagement

- 9.1 We consider good communication essential in the effective delivery of water hygiene programmes, therefore we will establish a tenant engagement strategy and communication programme. This will support tenants in their understanding of water hygiene and legionella risk, advised them of how they can manage the risks within their properties, and to encourage them to report any concerns about water safety.
- 9.2 We also aim to successfully engage with vulnerable and hard to reach tenants. We will share information clearly and transparently and will ensure that information is available to tenants via regular publications and information on our website.
- 9.1 We will display written schemes of control in communal areas of buildings to inform occupants how the risk of exposure to legionella bacteria is being managed and controlled.

10.0 Competent Persons

- 10.1 As we should appoint a Responsible Person (Property Compliance Manager) and a Deputy Responsible Person (Compliance Officer), they should both be trained, instructed, and informed to the same level and should assist in the frequent monitoring of written control schemes. Therefore, they should hold a relevant qualification such as the BOHS P901 Management and control of building hot and cold water services, Level 2 Award in Legionella Awareness (or equivalent), or Level 4 VRQ Diploma in Asset and Building Management. If they do not have these already, they will obtain them within 12 months of the approval of this policy.
- 10.2 Only suitably competent consultants and contractors, registered with the Legionella Control Association (or equivalent), will undertake LRAs, prepare written schemes of control and undertake works in respect of water hygiene and legionella control.
- 10.3 Only suitably competent consultants and contractors, registered with the Legionella Control Association (or equivalent), will undertake third party technical quality assurance checks.
- 10.4 We will check that our contractors hold the relevant qualifications and accreditations when we procure them, and thereafter on an annual basis; we will evidence these checks and each contractor's certification appropriately.

11.0 Training

11.1 We will deliver training on this policy and the procedures that support it, through appropriate methods including: team briefings; basic water hygiene awareness training; and on the job training for those delivering the programme of LRAs and water hygiene testing and monitoring, as part of their daily job. All training undertaken by staff will be formally recorded.

12.0 Performance Reporting

- 12.1 We will report key performance indicator (KPI) measures for water hygiene safety that follow the requirements set out in the Tenant Satisfaction Measures (TSMs) which came into force on 1 April 2023 and must be reported to the RSH on an annual basis.
- 12.2 We will report the following water hygiene performance:

Report recipient	Frequency
Regulator of Social Housing	Annual
Leadership Team	Monthly
Cabinet	Quarterly
Tenants	Quarterly

12.3 We will also report the following:

Data – the total number of:

- Properties split by category (domestic, communal blocks/schemes, commercial/other).
- Properties on the LRA programme.
- Properties not on the LRA programme.
- Properties with a valid and in date LRA.
- Properties without a valid and in date LRA.
- Properties due an LRA within the next 30 days.
- Overdue follow-up works/actions (split by priority).

Narrative - an explanation of the:

- Current position.
- Corrective action required.
- Progress with completion of follow-up works.

In addition:

The number of RIDDOR notifications to the HSE with regards to water safety.

13.0 Quality Assurance

- 13.1 We will ensure there is a programme of third-party quality assurance audits to five per cent of LRAs. Annual audits will be undertaken to all systems identified as a high risk.
- 13.2 We undertake internal desktop audits to 100 per cent of all certification.
- 13.3 We will carry out an independent audit of water hygiene safety at least once every two years, to specifically test for compliance with legal and regulatory obligations and to identify any non-compliance issues for correction.

14.0 Significant Non-Compliance and Escalation

- 14.1 Our definition of significant non-compliance is any incident which has the potential to result in a potential breach of legislation or regulatory standard, or which causes a risk to health or safety, and which needs to be managed as an exception to routine processes and procedures.
- 14.2 All non-compliance issues will be reported and escalated as soon as possible, and no later than 24 hours after the incident occurred, or of a CBC employee becoming aware of it.
- 14.3 Any non-compliance issue identified at an operational level will be formally reported to the Interim Capital and Repairs Manager in the first instance, who will agree an appropriate course of corrective action with the Property Compliance Manager and report details of the same to the LT.
- 14.4 In cases of serious non-compliance, LT and Cabinet will consider whether it is necessary to disclose the issue to the Regulator of Social Housing as required by their regulatory framework, or any other relevant organisation such as the Health and Safety Executive.
- 14.5 We will ensure there is a robust process in place to investigate and manage all RIDDOR notifications made to the HSE in relation to water hygiene safety and will take action to address any issues identified and lessons we have learned, to prevent a similar incident occurring again.

15.0 Glossary

- 15.1 This glossary defines key terms used throughout this policy:
 - BOHS: British Occupational Hygiene Society.
 - Duty Holder: the owner of the non-domestic premises or the person or organisation that has clear responsibility for the maintenance or repair of non-domestic premises, for example through an explicit agreement such as a tenancy agreement or contract.

- **Legionellosis:** a collective term for diseases caused by legionella bacteria including the most serious Legionnaires' disease, as well as the similar but less serious conditions of Pontiac fever and Lochgoilhead fever.
- **LRA:** Legionella Risk Assessment an assessment which identifies the risks of exposure to legionella in the water systems present in a premises and the necessary control measures required.

Appendix 1 - Additional Legislation

This policy also operates within the context of the following legislation:

- The Defective Premises Act 1972
- Landlord and Tenant Act 1985
- Homes (Fitness for Human Habitation) Act 2018
- The Occupiers' Liability Act 1984
- Public Health (Infectious Diseases) Regulations 1988
- The Workplace (Health Safety and Welfare) Regulations 1992
- The Management of Health and Safety at Work Regulations 1999 (the Management Regulations).
- Water Supply (Water Fittings) Regulations 1999
- Housing Act 2004
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- Construction (Design and Management) Regulations 2015
- Water Supply (Water Quality) Regulations 2018
- Data Protection Act 2018
- Social Housing (Regulation) Act 2023

Lift Safety Policy



Name Lift Safety Policy

Owner Property Compliance Manager

Version

Last ReviewJune 2025Next ReviewJune 2027

Strategic Lead Claire Hughes – Director of Governance,

Housing and Communities

Member Lead Councillor Flo Clucas – Cabinet Member

Housing and Customer Services

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1.0 Introduction and Objectives

- 1.1 As a landlord, Cheltenham Borough Council (CBC) is responsible for maintenance and repairs to our homes, communal blocks and other properties we own and manage, some of which will contain domestic lifts, passenger lifts and other lifting equipment. We are responsible for maintaining these lifts and carrying out thorough examinations to ensure they continue to operate safely.
- 1.2 The key objective of this policy is to ensure our Cabinet, Leadership Team, employees, partners and tenants are clear on our legal and regulatory lift safety obligations. This policy provides the framework our staff and partners will operate within to meet these obligations.
- 1.3 This policy forms part of our wider organisational commitment to driving a health and safety culture amongst staff and contractors (as detailed within our Health and Safety Policy). It will be saved on our shared drive and distributed to all relevant members of staff.

2.0 Scope

- 2.1 This policy applies to the following property types:
 - Domestic properties (houses, flats bungalows, and so on).
 - Communal blocks.
 - Sheltered / independent living schemes.
- 2.2 This policy is relevant to all our employees, tenants, contractors, stakeholders and other persons who may work on, occupy, visit, or use our premises, or who may be affected by our activities or services. Adherence to this policy is mandatory.
- 2.3 We own and manage domestic properties which have been adapted with living aids such as stair lifts, through floor lifts and hoists to enable tenants to continue to live independently. We take responsibility for the lifts which have been installed within our domestic properties which we have been made aware of.

3.0 Roles and Responsibilities

3.1 The Cabinet has overall governance responsibility for ensuring this policy is fully implemented to ensure full compliance with legislation and regulatory standards. As such, the Cabinet will formally approve this policy and review it every two years (or sooner if there is a change in legislation or regulation).

- 3.2 The Leadership Team (LT) will receive monthly performance reports in respect of lift safety and ensure compliance is being achieved. They will also be notified of any non-compliance issue identified.
- 3.3 The Property Compliance Manager has strategic responsibility for the management of lift safety, and ensuring compliance is achieved and maintained. They will oversee the implementation of this policy.
- 3.4 The Interim Capital and Repairs Manager has operational responsibility for the management of lift safety and will be responsible for overseeing the delivery of these programmes.
- 3.5 Housing teams will provide support where gaining access to properties is difficult and will assist and facilitate any legal access process as necessary.
- 3.6 Under the requirements of the Social Housing (Regulation) Act 2023 we have appointed the Deputy Chief Executive as our Health and Safety Lead.

4.0 Legislation, Guidance and Regulatory Standards

- 4.1 **Legislation** The principal legislation applicable to this policy is as follows:
 - The Health and Safety at Work Act 1974.
 - The Lifting Operation and Lifting Equipment Regulations 1998 (LOLER).
 - The Provision and Use of Work Equipment Regulations 1998 (PUWER).
- 4.2 **Approved Code of Practice (ACOP)**—The principal ACoP applicable to this policy is:
 - ACOP L113 Safe use of lifting equipment: Lifting Operations and Lifting Equipment Regulations 1998 (2nd edition 2014).
 - ACOP L22 Safe use of work equipment: Provision and Use of Work Equipment Regulations 1998 (4th edition 2014).
- 4.3 **Guidance** The principal guidance applicable to this policy is as follows:
 - INDG422 Thorough examination of lifting equipment: A simple guide for employers (2008).
 - INDG339 Thorough examination and testing of lifts: Simple guidance for lift owners (2008).

4.4 **Regulatory standards** – We must ensure we comply with the Regulator of Social Housing's regulatory framework and consumer standards for social housing in England; the Safety and Quality Standard is the primary one applicable to this policy.

The Social Housing (Regulation) Act 2023 changes the way social housing is regulated and may result in future changes to this policy.

4.5 **Sanctions** – Failure to discharge our responsibilities and obligations properly could lead to sanctions, including prosecution by the Health and Safety Executive (the HSE) under the Health and Safety at Work Act 1974; prosecution under the Corporate Manslaughter and Corporate Homicide Act 2007; prosecution under LOLER or PUWER; and via a regulatory judgement from the Regulator of Social Housing.

5.0 Obligations

5.1 **LOLER**

Passenger lifts in workplaces (for example, offices) which are used by people during their course of work, fall within the scope of LOLER.

LOLER requires landlords to maintain lifts and ensure that they have thorough examinations:

- Before use for the first time.
- After substantial and significant changes have been made.
- At least every six months if the lift is used at any time to carry people or every 12 months if the lift is only carrying loads (or in accordance with an examination scheme).
- Following exceptional circumstances such as damage to, or failure of, the lift, long periods out of use, or a major change in operating conditions which is likely to affect the integrity of the equipment.
- Thorough examination reports must be kept for at least two years.

5.2 **Health and Safety at Work Act 1974**

Section 3 of the Health and Safety at Work Act makes employers, such as landlords, responsible for the health and safety of employees and people using or visiting their premises, so far as reasonably practicable (including tenants).

For passenger lifts in communal blocks and for tenanted properties with domestic lifts, duties may be adequately discharged by adopting the same provisions as applies to all other lifting equipment covered by LOLER (carrying out regular maintenance and thorough examination).

5.3 Provision and Use of Work Equipment Regulations 1998 (PUWER)

There is some overlap between LOLER and PUWER, which applies to all work equipment, including lifting equipment (such as hoists, lift trucks, elevating work platforms and lifting slings). The scope of this policy includes for lifts which are fixed within properties owned and managed by CBC (i.e., passenger/stairlifts/through floor lifts) and not mobile lifting equipment.

5.4 **Insurance**

Insurers may impose demands for similarly stringent levels of risk management to cover public liability.

6.0 Statement of Intent

- 6.1 We acknowledge and accept our responsibilities under the legislation outlined in Sections 4 and 5.
- 6.2 We will adopt the same principles to the management of lifts within communal blocks and domestic properties as for passenger lifts and any other lifts provided as work equipment. We will therefore carry out a programme of periodic servicing and maintenance and thorough examinations to lifts within domestic properties where these have been installed by us, or where our tenant has installed one and made us aware of it.
- 6.3 All lifts that we install in properties we own or manage will be fully accessible for disabled users, as per the requirements of the Equality Act 2010, and to the specifications outlined in Part M of the Building Regulations 2004.
- 6.4 We will endeavour to ensure that all lifting equipment will always be in full working order. Where we become aware of a breakdown, we will ensure our lift contractor attends within 24 hours.
- 6.5 We will operate robust processes to deal with entrapment situations. In the event of any persons becoming trapped in a lift we are responsible for we will ensure our lift contractor attends within one hour.
- 6.6 We will operate a robust process to manage and rectify immediately dangerous situations identified during a lift safety check or any other maintenance work.
- 6.7 All passenger lifts will have an intercom that dials directly to a dedicated call centre. Call handlers will contact emergency services if there is an urgent concern for a person's welfare.

- 6.8 We will operate a robust process to gain access to properties to undertake thorough examinations, lift safety/servicing visits and follow-on works. Where tenant vulnerability issues are known or identified we will ensure we safeguard the wellbeing of the tenant, whilst ensuring the organisation can gain timely access to any property to be compliant with this policy.
- 6.9 We will operate effective contract management arrangements with the contractors responsible for delivering the service, including ensuring contracts/service level agreements are in place, conducting client-led performance meetings, and ensuring that contractors' employee and public liability insurances are up to date on an annual basis.
- 6.10 We will establish and maintain a risk assessment for lift safety management and operations, setting out our key lift safety risks and appropriate mitigations.
- 6.11 To comply with the requirements of the Construction (Design and Management)
 Regulations 2015 (CDM), a Construction Phase Plan will be in place for all repairs
 work to void and tenanted properties (at the start of the contract and reviewed
 annually thereafter), component replacement works and refurbishment projects.
 This plan will detail what is required to reinstate lifts affected by the works, to ensure
 they are safe to use and continue to comply with relevant legislation.
- 6.12 We will ensure there is a robust process in place to investigate and manage all RIDDOR notifications made to the HSE in relation to lift safety, and we will take action to ensure any issues identified and lessons we have learned to prevent a similar incident occurring again.

7.0 Programmes

- 7.1 **Thorough examinations** all lifts, including domestic lifts, will be subject to a thorough examination:
 - Before being commissioned into use for the first time.
 - Every six months if the lift is being used to carry people.
 - Every 12 months if the lift only carries loads.
 - In accordance with an examination scheme (as prepared by a competent person) where there is one in place.
 - In accordance with our insurer's specification.
- 7.2 All domestic lifts will be subject to a thorough examination before a void property is re-let in to ensure it is safe for the next tenant. The new tenant will also be shown

- how to operate the lift safely. We will also consider the suitability of prospective tenants to ensure the property is appropriate if lifting equipment has been installed.
- 7.3 **Maintenance** All lifting equipment will be subject to routine servicing and maintenance in line with manufacturers' recommendations.
- 7.4 We will ensure there is a robust process in place for the management of any follow-up works required following the completion of a thorough examination or servicing and maintenance inspection (where the work cannot be completed at the time of the examination or servicing/inspection).

8.0 Data and Records

- 8.1 We will maintain a core asset register of all properties we own or manage, setting out which properties have lifts which require a thorough examination. We will also set out which properties have lifts which require ongoing servicing and maintenance. This register will also hold data against each property asset of the type, age and condition of lifting equipment in place.
- 8.2 We will operate a robust process to manage all changes to stock, including property acquisitions and disposals, to ensure that properties are not omitted from lift safety programmes and the programme remains up to date.
- 8.3 We will hold records of the following against all properties on each programme:
 - Thorough examination dates and reports.
 - Servicing and maintenance dates and reports.
 - Any examination schemes in place.
 - Evidence of completed remedial works.
 - Entrapment incidents.
- 8.4 All records and data as outlined above will be stored in the QL system and Documotive.
- 8.5 Where we install any stairlifts or other lifts to domestic properties or give approval for or become aware of any installation of such lifts, we will add them to the thorough examination and servicing programmes.
- 8.6 We will keep all records for at least five years or for the duration that we own and manage the property/in line with our document retention policy and have robust processes and controls in place to maintain appropriate levels of security for all lift safety related data and records.

9.0 Tenant Engagement

- 9.1 We consider good communication essential in the effective delivery of lift safety programmes, therefore we will establish a tenant engagement strategy and communication programme to support tenants in their understanding of lift safety.
- 9.2 This will assist us in maximising access to carry out periodic servicing and thorough examinations, encourage tenants to report any lift safety concerns, and help us to engage with vulnerable and hard to reach tenants.
- 9.3 We will share information clearly and transparently and will ensure that information is available to tenants via regular publications and information on our website.

10.0 Competent Persons

- Only suitably competent lift consultants and contractors, registered with the Lift and Escalator Industry Association (or equivalent), will be appointed to undertake thorough examinations, risk assessments, prepare examination schemes and undertake lifting equipment works. Lift engineers will have a minimum qualification of EAL QCF NVQ Level 3 Diploma or its equivalent in an appropriate discipline.
- 10.2 We will check that our contractors hold the relevant qualifications and accreditations when we procure them, and thereafter on an annual basis; we will evidence these checks and each contractor's certification appropriately.

11.0 Training

11.1 We will deliver training on this policy and the procedures that support it, through appropriate methods including team briefings; basic lift safety awareness training; and on the job training for those delivering the programme of lift inspections, planned maintenance and repair works as part of their daily job. All training undertaken by staff will be formally recorded.

12.0 Performance Reporting

- 12.1 We will report key performance indicator (KPI) measures for lift safety that follow the requirements set out in the Tenant Satisfaction Measures (TSMs) which came in to force on 1 April 2023 and must be reported to the Regulator on an annual basis.
- 12.2 We will report the following lift safety performance:

Report recipient	Frequency

Regulator of Social Housing	Annual
Leadership Team	Monthly
Cabinet	Quarterly
Tenants	Quarterly

12.3 We will also report the following:

Data – the total number of:

- Properties split by category (domestic, communal blocks/schemes, commercial/other).
- Properties on the thorough examination programme.
- Properties not on the thorough examination.
- Properties with a valid and in date thorough examination.
- Properties without a valid and in date thorough examination.
- Properties due to be examined within the next 30 days.
- Follow-up actions arising from the programme (in time and overdue, by priority).

Narrative - an explanation of the:

- Current position.
- Corrective action required.
- Progress with completion of follow-up works.

In addition:

- The number of entrapments within lifts (in month and year to date).
- The number of RIDDOR notifications to the HSE with regards to lift safety.
- Lift servicing programme.

13.0 Quality Assurance

- 13.1 We will ensure there is programme of annual third-party quality assurance audits of lifts that are not included on the thorough examination programme.
- 13.2 We will carry out an independent audit of lift safety at least once every two years, to specifically test for compliance with legal and regulatory obligations and to identify non-compliance issues for correction.

14.0 Significant Non-Compliance and Escalation

14.1 Our definition of significant non-compliance is any incident which has the potential to result in a potential breach of legislation or regulatory standard, or which causes

- a risk to health or safety, and which needs to be managed as an exception to routine processes and procedures.
- 14.2 All non-compliance issues will be reported and escalated as soon as possible, and no later than 24 hours after the incident occurred, or of a CBC employee becoming aware of it.
- 14.3 Any non-compliance issue identified at an operational level will be formally reported to the Interim Capital and Repairs Manager in the first instance, who will agree an appropriate course of corrective action with the Property Compliance Manager and report details of the same to the LT.
- 14.4 In cases of serious non-compliance, LT and Cabinet will consider whether it is necessary to disclose the issue to the Regulator of Social Housing as required by their regulatory framework, or any other relevant organisation such as the Health and Safety Executive.
- 14.5 We will ensure there is a robust process in place to investigate and manage all RIDDOR notifications made to the HSE in relation to lift safety, and we will take action to ensure any issues identified and lessons we have learned to prevent a similar incident occurring again.

15.0 Glossary

- 15.1 This glossary defines key terms used throughout this policy:
 - IOSH Managing Safely course The Institution of Occupational Safety and Health (IOSH) have designed the IOSH Managing Safely course for managers and supervisors of organisations in virtually all industry sectors, in order to give them all they need to know to effectively manage health and safety in the workplace.
 - **LEIA** The Lift and Escalator Industry Association is the trade association and advisory body for the lift and escalator industry.
 - **Thorough examination** A systematic and detailed examination of the equipment and safety-critical parts, carried out at specified intervals by a competent person who must then complete a written report.

Appendix 1- Additional Legislation

This policy also operates within the context of the following legislation:

- The Defective Premises Act 1972
- Landlord and Tenant Act 1985
- Homes (Fitness for Human Habitation) Act 2018
- Workplace (Health Safety and Welfare) Regulations 1992
- BS:7671: Requirements for Electrical Installations
- BS:5839: Fire Detection and Fire Alarm Systems for Buildings
- Provision and Use of Work Equipment Regulations 1998 (PUWER)
- Management of Health and Safety at Work Regulations 1999
- Housing Act 2004
- The Occupiers' Liability Act 1984
- Equality Act 2010
- Building Regulations 2010 Part M
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- Construction (Design and Management) Regulations 2015
- Data Protection Act 2018
- Social Housing (Regulation) Act 2023

Cheltenham Borough Council

Cabinet Housing Committee – 11 June 2025

Property Compliance Report

Accountable member:

Cllr Flo Clucas, Cabinet Member for Housing and Customer Services

Accountable officer:

Paul Leo – Interim Director of Housing Transformation

Executive summary:

The Property Compliance KPI Report (Appendix 1) outlines the compliance status as of 31 May 2025. It includes an explanation of actions together with proposed plans for addressing areas of non-compliance related to gas, electrical, water, fire, asbestos, lift safety, and the management of damp, mould, and condensation in council homes.

93 fire risk actions are now overdue. Of these, 17 are high risk. Mitigating actions have been taken to reduce the risks and increased monitoring of outstanding actions is taking place to ensure these actions are completed.

Recommendation:

To note and understand the position regarding compliance with statutory and regulatory requirements

1 Background

1.1 The Council's top priority is to ensure the health and safety of its residents. This commitment is demonstrated through compliance with relevant legislation and the updated Consumer Standards established by the Social Housing (Regulation) Act 2023, which took effect on 1st April 2024.

2 Compliance Report

- Appendix 1 presents the KPIs relating to the individual areas of compliance as at 31 May 2025, as follows:
- Gas safety Although Performance remains good, 1 boiler did not have an up to date gas safety
 certificate at 31 May. The gas supply is capped and an application for an injunction has been made

and is awaiting a court hearing date.

- Fire safety –The number of outstanding and overdue actions has reduced from 98 at end February
 to 93 at end of May and 17 of these are classed as high priority. Unfortunately, progress on
 completing the actions has not been satisfactory and increased active monitoring of each case has
 been instigated. Twice weekly meetings with the responsible officers are reviewing all outstanding
 actions. Additional surveyors have started and will focus on compliance issues.
- Measures to mitigate outstanding actions have been taken as appropriate. All locations with outstanding actions are being visited and checked in the next 21 days to ensure that the mitigation actions remain appropriate. A verbal update will be given at the meeting.
 - **Electrical safety** Progress has been made in gaining access to undertake electrical safety inspections based on a 5-year cycle. All void properties that do not have a hard-wired smoke detector are now having battery detectors installed temporarily to ensure compliance.
- Asbestos safety 33 properties are awaiting re-inspection. This number has increased during the
 period when a new contractor was mobilised. The outstanding re-inspections will be completed by
 mid-June.
- Water safety -There are no outstanding legionella risk assessments or actions.
- **Lift safety** All lift safety inspections remain in date, with no outstanding remedial actions.
- Damp mould and condensation (DMC) The number of cases has reduced as expected as the
 weather has become warmer and drier. There are no category 1 issues outstanding. The number of
 cases peaked at 352 during the first week of April and as of 31 May, it had reduced to 209. A more
 detailed breakdown of cases will be brought to a future meeting of the committee.

An update on the latest compliance position will be provided at the meeting.

3 Further Review of Compliance Policies and Information

- 3.1 A number of additional actions are in progress to provide additional assurance of the Council's compliance position.
- 3.2 Pennington Choices, a specialist consultancy, have been carrying out a review of all the Council's housing property compliance policies. A detailed workshop on current practice and future options has taken place and revised policies are presented to this committee as a later agenda item for consideration and recommendation to Cabinet. As part of this exercise, the compliance processes will also be reviewed and revised to improvement and ensure that they follow best practice.
- 3.3 Pennington Choices have also been commissioned to carry out a data validation exercise to:
 - verify that the Council's compliance programmes align with asset and data reporting,
 - ensure all required properties are included on relevant compliance programmes or have documented reasons for exclusion,
 - confirm the accuracy of inspection dates and records, ensuring the dates of the last and next due inspections are accurate

- o provide the leadership team and members with assurance on the robustness and accuracy of compliance data management.
- 3.4 Two external "critical friends" from Pennington Choices and Housing Quality Network are attending the regular compliance meetings to provide additional scrutiny of the compliance reporting.
- 3.5 Information for compliance reports is now being extracted directly from the QL Housing Management System for compliance reports to reduce manual intervention and to improve the turnaround of these reports. This is currently being implemented and will mean that the format of reports will change and improve over the next few months.

4 Key risks

4.1 Instances of non-compliance present an increased health and safety risk to residents, potential for Regulatory or legal action and as a result reputational risk. It is therefore essential that the extent and nature of any non-compliance is understood with supported robust plans in place to move to a position of compliance

Report author:

Paul Leo, Interim Director of Housing Transformation paul.leo@cheltenham.gov.uk

Appendices:

- i. Property Compliance KPI Report 31 May 2025
- ii. Risk Assessment

Appendix 2: Property Compliance KPI Report

Period of reporting: at 31st of May 2025

Please find below the report from all areas and owners of data / commentary.

Workstream		Total No. properties in programme	No. compliant properties	No. non-compliant properties	Compliance %	Direction of travel		
Gas safety	Domestic Boiler LGSR	4269	4268	1	99.97	Up		
	Commercial schemes LGSR	6	6	0	100.00	Down		
	TSM: Percentage of Gas Safety Checks Compliant (properties)	Including CBC & CBH properties	4425 (with the non- compliant property being of CBC ownership)	1	99.97	Down		
	Properties requiring gas safety check in next 3 months	475						
		No. tenanted homes capped	No. tenanted homes capped over 3 months					
	Properties with capped gas	65	34	tions raised to	Up			
		No. of overdue LGSR						
	Overdue LGSR <1 month	1		compliant was previously cappe		Up		
	Overdue LGSR 1-3 months	0	20.05.24. An application for an injunction for access is being processed by one legal, awaiting a court hearing date.					
	Overdue LGSR >3 months	0						

Workstream		Total No. properties in programme	No. compliant properties	No. non-compliant properties	Compliance %	Direction of travel				
Fire safety	FRAs - blocks	447	4	0	100.00	Static				
	TSM: Percentage of homes covered by compliant fire risk assessments	Compliance scorecard is reporting 2511	Compliance scorecard is reporting 2511	Compliance scorecard is reporting 0	100.00	Static				
		High risk actions	Med risk actions	Low/planned risk actions	Total					
	Overdue FRAs remedial actions < 3 months	1	2	0	3	Up				
	Overdue FRAs remedial actions 3-6 months	0	0	0	0	Static				
	Overdue FRAs remedial actions 6-12 months	0	0	0	0	Down				
	Overdue FRAs remedial actions >12 months	16	53	21	90	Up				
	Total	17	55	21	93	Up				
Comments	All required FRAs remain in date with none due for renewal until Oct 2025 47 FRA actions with contractor consisting of 77 door replacements plus 2 compartmentation works • 43 Fire doors fitted (The certification is being reviewed by specialist contractor to ensure compliance). The fitted doors that have been inspected have been found to be satisfactory. The risk rating for these actions will be reviewed to ensure they are appropriate. • 6 (1+5) Doors delivered and booked/being booked to fit									

- 20 Doors on order for deliver by 02/07/25 (contractor informed of 1 month delay)
- 3 To be ordered following further advice.
- 1 Doors on order for deliver by 16/06/25
- 3 Re-orders
- 1 Nr No Access CBC's RLO assisting Total 77

Compartmentation:

- 1 -Awaiting report from specialist contractor to confirm no work required
- 2 -Awaiting door replacement before work us undertaken (doors on order)

20 FRA actions relate to windows within escape routes. There are 76 windows needing replacing, one per flat. Architype surveys will identify where extract fans can be fitted to provide alternative means of ventilation. Electrical contractor will be instructed to install extract fans.

20 FRA's relate to fire stopping, compartmentation, misc. of which 9 to be delivered by specialist contractor to be procured via the framework. All other actions being reviewed at status meetings to ensure mitigation in place and required work is completed. An update -will be available at the meeting.

Workstream		Total No. properties in programme	No. compliant properties	No. non- compliant properties	Compliance %	Direction of travel			
Electrical checks	5-year EICR domestic testing cycle	4,630	4,612	18	99.61	Up			
	10-year EICR domestic testing cycle	8	8	0	100.00	Static			
	Communal EICRs	341	340	1	99.70	Up			
	EICRs overdue against 5-year cycle	<2 years	2 -3years	3-4 years	4 -5 years	>5 years			
		18	0	0	0	0			
		Overdue high risk C1 (danger to life)	Overdue med risk actions C2 (potentially dangerous)	Overdue high risk C1 (danger to life)					
	Overdue electrical remedials <3 months	0	0	0					
	Overdue electrical remedials 3-6 months	0	0	0					
	Overdue electrical remedials 6-12 months	0	0	0					
	Overdue electrical remedials >12 months	0	0	0					
	Electrical safety inspections due in next 3 months	None are due within the ne	None are due within the next 3 months						

Comments	4638 properties currently qualifying for and EICR test (10 and 5 year)								
		utstanding: Acquisition/Buybacks and the Work is plann		part of the void wo	rks				
		Total No. properties in programme	No. compliant properties	No. non- compliant properties	Compliance %				
Smoke and CO alarms	Smoke detectors/alarms	4646	4643	3	99.91	Down			
	CO detectors/alarms	4270	4260	10	99.76	Static			
	2nr – Properties are derelict, and confirmation is awaited so that these can be removed from this report 1nr – Property has a smoke alarm but there is a change of component. A request to add this component to the report has been sent to the relevant team								
	Carbon monoxide CO detectors/alarms								
	There are 10nr Properties without a CO Detector								
	2nr - Gas meter has been capped of for 2yrs+ (gas appliances not in use) 7nr - Gas meter has been capped off for 2yrs+ (no gas appliances in property) 1nr - New Acquisition VOID gas meter capped (no risk) - unable to access cupboard where boiler is located at present time to check								
PAT Testing	Temp furnished properties with up-to-date PAT tests	All x 21 up to date				Static			

Workstream		Total No. properties in programme	No. compliant properties	No. non-compliant properties	Compliance %	Direction of travel
Asbestos safety	Asbestos re-inspections – non-domestic areas - blocks	359	329	33	90.8	UP
	Asbestos re-inspections – garage blocks	77	77	0	100.00	Static
	TSM: % asbestos safety checks compliant (no properties affected)	2410				
	Overdue asbestos re- inspections <3 months	33		,		Up
	Overdue asbestos re- inspections 3-6 months	0				Static
	Overdue asbestos re- inspections 6-12 months	0				Static
	Overdue asbestos re- inspections >12 months	0				Static
	Asbestos block re- inspections due in next 3 months	24				Up
	Asbestos garage re- inspection -due in next 3 months	68				Up

Comment	329 surveys are in date with 33 overdue because of issues with the new surveying contractors facilitating the bulk of legacy orders raised with them. The number is reducing and will be completed by mid-June.
	We then expect the new contract arrangements will deliver all surveys within the target date going forward.

Workstream		Total No. properties in programme	No. compliant properties	No. Non - compliant properties	Compliance %	Direction of travel
Water safety	Legionella risk assessments	24	24	0	100.00	Static
	Legionella risk assessments due in the next 3 months	0	Current LRA's	s will not be due until Nov/De	ec 2025	Static
		No. high risk remedials	No. medium risk remedials	No. low risk remedials	Total	
	Overdue water safety remedial actions <3 months	0	0	0	100.00	Static
	Overdue water safety remedial actions 3-6 months	0	0	0	100.00	Static
	Overdue water safety remedial actions 6-12 months	0	0	0	100.00	Static
	Overdue water safety remedial actions >12 months	0	0	0	100.00	Static
	Total	0	0	0	100.00	Static
Comments						

Workstream		Total No. properties in programme	No. compliant properties	No. non-compliant properties	Compliance %	Direction of travel		
Lift safety	Passenger lifts (LOLER) servicing	16	16	0	100.00	Static		
	TSM: % lift safety checks compliant (no properties affected)	262	262	0	100.00	Static		
	No. stair lifts/through floor lifts with current LOLER certificate	70	70	0	100.00	Static		
	LOLER inspections due in the next 3 months	0	None	due over the next 3 months	onths			
		High Priority	Medium Priority	Low Priority	Total no. Overdue actions			
	Overdue remedial actions <3 months	0	0	0	0	Static		
	Overdue remedial actions 3-6 months	0	0	0	0	Static		
	Overdue remedial actions 6-12 months	0	0	0	0	Static		
	Overdue remedial actions >12 months	0	0	0	0	Static		
Comments		I	I	I				

Workstream		No. open cases	Open cases categorised as HHSRS Category 1	Direction of travel
Damp Mould & Condensation	Damp and mould cases	209	0	Down
Comments	There are currently no DM	IC HHSRS Cat 1 cases. Work is taking	place to provide a more detailed brea	kdown of the numbers.

Appendix 2: Risk Assessment

Risk ref	Risk description	Risk owner	Impact score (1-5)	Likelihood score (1-5)	Initial raw risk score (1 - 25)	Risk response	Controls / Mitigating actions	Control / Action owner	Deadline for controls/ actions
1	If statutory requirements in relation to property compliance are not met then in the event of an accident CBC could be held liable		3	3	9	Reduce	Improve performance monitoring	Paul Leo	September 2025
2	If fire safety actions are not completed then the risk of serious injury or death in the event of fire increases		4	3	12	Reduce	Complete outstanding actions and bring forward new FRAs to avoid actions going out of date	Alan Coates	Page 122
3	If overdue electrical checks are not undertaken there is a risk that there are electrical installations that are unsafe		4	2	8	Reduce	Progress with legal action to gain access	Paul Leo	July 2025
4	If gas safety checks are not undertaken, then there is a risk of unsafe		4	2	8	Reduce	Continue to take prompt action where safety checks are	Alan Coates	July 2025

R re	isk ef	Risk description	Risk owner	Impact score (1-5)	Likelihood score (1-5)	Initial raw risk score (1 - 25)	Risk response	Controls / Mitigating actions	Control / Action owner	Deadline for controls/ actions
		appliances						outstanding		
	5	If the asbestos register is incomplete or not appropriately shared		4	2	8	Reduce	Improve systems and sharing data with new contractors	Alan Coates	July 2025

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Cheltenham Borough Council

Cabinet Housing Committee - 11th June 2025

Housing Service Anti-Social Behaviour Policy

Accountable member:

Cllr Flo Clucas, Cabinet Member for Housing and Customer Services

Accountable officer:

Caroline Walker, Director of Housing, Communities & Customer Service

Ward(s) affected:

n/a

Key Decision: No

Executive summary:

The purpose of this report is to present the revised Housing Services Anti-Social Behaviour (ASB) policy to Cabinet Housing Committee for review.

The policy has been written to provide clear information about what constitutes ASB, how agencies work together to tackle ASB and the service the tenant can expect from the Housing Services ASB Team and their key partners.

The reading aged of the policy has been assessed as 'mid-teens', predominantly due to the inclusion of legislation and legal terminology. As it is essential to include the relevant legislation, a proposed summary document has been drafted and included with this report (appendix 2) with the intention of providing an overview of the key aspects of the policy that is accessible to a person with a lower reading age.

Recommendations:

 The Cabinet Housing Committee recommends that Cabinet adopt the Housing Service Anti-Social Behaviour Policy

1. Background

- 1.1 Further to the ASB service Improvement plan update provided to committee in April 2025, the revised Housing Services ASB Policy is now presented to committee for review.
- 1.2 The project to revise the policy has been focused on it talking to tenants and providing clear information around what constitutes ASB, how agencies work together to tackle ASB and the service the tenant can expect from the Housing Services ASB Team and their key partners.
- 1.3 By providing clear information in an accessible way our aim is also to increase tenant satisfaction with the ASB service by increasing knowledge about the service to reach a position where expectations and desired outcomes are realistic and proportionate to the ASB that is being reported.
- 1.4 The ASB team recognise that working in partnership with tenants and partners is key, and this is reflected in the consultation that has been carried out with internal and external partners to obtain feedback on the revised policy.
- 1.5 The feedback we have received has been very positive, particularly that received from a focus group held with tenants in November 2024 as part of ASB Awareness Week (see Appendix 3), and from our peers at Gloucester City Homes' ASB Team who are similar in their makeup and in the nature of the ASB reports received.
- 1.6 The requirement to meet the Regulator of Social Housing's consumer standard has been the other key focus of this revised policy.
- 1.7 The consumer standards relate directly to the delivery of ASB services, so the revised policy has naturally been based around them. The Neighbourhood and Community Standard requires landlords to work in partnership with appropriate local authority departments, the police and other relevant organisations to deter and ASB and hate incidents in the neighbourhoods where they provide social housing. The Tenancy Standard requires landlords to provide services that support tenants to maintain their tenancy and prevent unnecessary evictions. The Transparency, Influence and Accountability Standard requires landlords to be open with tenants and treat them with fairness and respect so they can access services, raise concerns, when necessary, influence decision making and hold their landlord to account.
- 1.8 One key area of expansion with the revised policy is around our approach to hate incidents / crimes in our communities which is understandably a key focus for the regulator and Housing Ombudsman alike.
- 1.9 The revised policy will form the basis of increased communication with our tenants around our ASB service in general, but also in respect of specific themes / trends in ASB. As discussed at committee in April 2025 this workstream forms part of the wider ASB service improvement plan.
- 1.10 The reading age of the revised policy has been as 'mid-teens', predominantly due to the inclusion of legislation and legal terminology. As it is essential to include the relevant legislation

within the policy, a proposed summary document has been drafted and included with this report **(Appendix 2)** with the intention of providing an overview of the key aspects of the policy that is accessible to a person with a lower reading age – this again will form part of the communication aspect of the ASB service improvement project.

2. Reasons for recommendations

Cabinet Housing Committee require oversight of the revised Housing Services ASB Policy to provide them with assurances that its content meets with legislative requirements, the relevant corporate priorities and crucially that it is supporting our overall compliance with the Consumer Standards.

3. Consultation and feedback

- 3.1 Internal
- Safeguarding & Equality Manager
- Environmental Health Team
- One legal
- 3.2 External
- Tenant panel See appendix 3
- Gloucestershire Police Local Policing Team & Hate Crime Lead
- Gloucester City Homes Peer Review

Report author:

Caroline Walker, Director of Housing, Communities & Customer Service.

Nick Such Tenancy Services Manager

Appendices:

Appendix 1 – Housing Services ASB Policy

Appendix 2 - Housing Services ASB Policy – Summary document

Appendix 3 - Feedback from tenant panel held on 20th November 2024.





Cheltenham Borough Council Housing Services - Anti-Social Behaviour Policy

Version control

Document name: Housing Services - Anti-Social Behaviour Policy

Version: 1.0

Responsible officer

Caroline Walker, Director of Housing, Customer Services and Communities

Approved by:

Next review date: June 2026 (or in the event of legislative changes)

Retention period:

Revision history

Revision date	Version	Description
date		

Consultees

Internal

- Cabinet Housing Committee
- Safeguarding & Equality Manager
- Environmental Health Team

External

- Tenant panel
- Gloucestershire Police Local Policing Team & Hate Crime Lead
- Victim Support
- GARAS
- Gloucester City Homes (Peer review)

Distribution

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1. Introduction and purpose of the policy

- 1.1. This policy sets out the way in which the Council delivers our housing related ASB service, by working with tenants, internal council teams and partner agencies. The purpose of this policy is to:
 - Ensure that ASB is tackled effectively within our housing stock, using a variety of approaches and tools.
 - Ensure tenants are aware of the service available from the housing ASB Team and understand the evidence needed to achieve successful outcomes.
 - Work with partners to ensure tenants and the communities in which they live are safe.

2. What is Anti-Social Behaviour (ASB)

- 2.1. The ASB, Crime & Policing Act 2014 defines ASB as;
- (a) conduct that has caused, or is likely to cause, harassment, alarm or distress to any person,
- (b) conduct capable of causing nuisance or annoyance to a person in relation to that person's occupation of residential premises, or
- (c) conduct capable of causing housing-related nuisance or annoyance to any person.

2.2. Common ASB reports:

Noise related nuisance			
Drug smells, use or apparent drug dealing			
Verbal abuse and intimidation			
Animal related nuisance			
Damage, rubbish dumping and item storage in communal areas			
'Cuckooing' – where a resident's property may have been forcibly taken over			
for criminal purposes or for advantage to be taken			
Hate related incidents – where a person is targeted due to a protected			
characteristic			
Domestic Abuse & Coercive Control			
Storing or selling of stolen goods			

2.3. The above lists what is commonly reported to us, however the list is not exhaustive, as what an individual considers to be 'anti-social' can vary greatly, dependent on tolerance levels and views of certain behaviours.

2.4. Consideration will be given to all reports of ASB, and we encourage tenants to report ASB so that an appropriate responses can be assessed.



- 2.5. We have a duty to prioritise the most serious reports and use our resources in the best way, taking a harm-centred approach, therefore priority will always be given to reports with the following characteristics:
 - Serious risk to person or property (usually relating to Domestic Abuse or Hate Crimes)
 - Serious violence or threats of serious violence
 - Breaches of existing Injunction Orders or Suspended Possession Orders
 - Serious disruption to the community
 - Where victims are considered to be particularly vulnerable
 - Violence or threats of violence to our staff or contractors.

3. What we cannot investigate from a housing perspective

- 3.1. ASB can be very wide-ranging, what is anti-social or nuisance behaviour will vary between individuals, dependent on their own resilience, tolerance level, morals and opinions. Sometimes something can cause a nuisance to an individual, however it does not necessarily mean it meets a threshold where action can be undertaken by the council, or by other partners.
 - 3.2. We will always take into consideration the impact of ASB on individuals and try to support tenants as far as possible, balanced against whether the behaviour is in breach of tenancy conditions, civil laws or criminal thresholds.
 - 3.3. We take great care not to unfairly label individuals as 'anti-social' unless there is sufficient evidence and threshold met to show that they are indeed causing a nuisance deliberately.
 - 3.4. Below is a list of some reports that we generally will not investigate as ASB:

Reported Issue	Examples
Noise issues created by children	Children running/jumping/crying
Noise created by a 'clash of lifestyle'.	Persons getting up early for work/coming home late/Family household vs. single person household
Noise created by normal household activity	Vacuuming/DIY/Washing
(unless late at night)	machine use
Civil disputes between neighbours	Parking disputes/boundary
	disputes
Cats	Roaming/Fouling



Disputes over communal areas	Communal lounge or kitchen usage or facilities/personal garden equipment usage
Feeding of birds	Use of bird tables of feeders attracting birds
Youths congregating (unless there is specific	Group standing around
associated anti-social activity)	talking/socialising
Social media related disputes (unless as part	Infrequent or one-off online
of a wider harassment issue)	comments

- 3.5. It is important to highlight that any **criminal incidents** must be reported to Police in the first instance, the general types of offences referred to are assaults, drug dealing, criminal damage, threats to kill. We cannot investigate a criminal matter in place of the Police.
- 3.6. Where the alleged criminality may have implications on an individual's tenancy, if they are convicted of the offence, we work in partnership with the Police to share information and ensure all tenancy related aspects are considered.

4. How we work in partnership to tackle ASB

- 4.1. The overall function of the housing ASB Team is to tackle incidents of ASB that involve tenants, whether the ASB is perpetrated by, or against, tenants and occurs inside, or within the locality of, their home.
- 4.2. In tackling ASB across Cheltenham it is vital that partnerships exist between tenants and those agencies that are responsible for finding solutions to, or enforcing, ongoing nuisance and ASB issues.
- 4.3. It can be confusing to know who to contact if you are affected by ASB incidents in some way. The below table details the partners that exist across Cheltenham, that are there to support and help residents in the tackling of ASB:



Partner	Main Responsibilities	Contact
Tenants	Report ASB witnessed and work with partners to help provide evidence.	
Police	Lead on investigation into criminal incidents.	999 (emergency) or 101
Housing ASB Team	-investigate ASB that affects tenants and is a potential breach of tenancy conditions -Issues that occur in, or in the locality of, council-owned housing	0800 408 0000 asbteam@cheltenham.gov.uk Customer Portal
CBC Neighbourhood Team	-Environmental ASB in public areas, such as fly-tipping, dog fouling and graffiti	01242 262626
CBC Environmental Protection Team	-Noise nuisance (potential statutory nuisance)	envhealth@cheltenham.gov.uk 01242 262626
Crimestoppers	-UK charity taking anonymous reports of crime.	0800 555 111

3.5. Often, criminal or anti-social incidents will interlink and involve the services of several partners.

Partnership working includes the following multi-agency approaches:

- Safer Gloucestershire Partnership
- Cheltenham Community Safety Partnership
- Multi-Agency Problem Solving (MAPS) Forum
- Cheltenham Safer Communities meeting
- Cheltenham Locality Multi-Agency Child Exploitation (MACE) meeting

3.6. in addition, ASB practitioners also regularly hold case meetings to share information and work together where needed to tackle specific issues.

3.7. We also hold specific information sharing agreements with partners, and data is treated in line with GDPR requirements, to ensure proportionality, and that information shared is specific and relevant to the investigation.



3.8. The below examples give details of how we have worked in partnership in a practical way, in relation to common issues and reports:

Example 1 – CBC Housing ASB Team received concerns from the local community relating to drug dealing within one of the flats that we manage. This information was passed on to Police as intelligence. Police subsequently executed a warrant and found illegal drugs at the property. The resident was arrested and criminally convicted for possession with intent to supply illegal drugs. Housing ASB Team requested the details of the criminal case through our information sharing agreement with the Police. We then used the evidence to obtain possession of the property due to the nature of the conviction also being a serious breach of tenancy.

Example 2 – CBC Housing ASB Team received a noise related complaint. We asked the complainant to keep an incident log and capture audio samples through the Noise App and we made the resident allegedly making excessive noise aware of the concerns. After two weeks, the noise incidents continued. We referred the details to the CBC Environmental Health Team, who conducted noise monitoring. A statutory noise nuisance was proven through the monitoring, and a Noise Abatement Notice served upon the household.

Example 3 – Reports were received by Police, SOLACE and CBC Housing ASB Team in relation to nuisance behaviour from a male resident, who was being abusive and threatening to members of the community. The property was council-owned. Police, SOLACE and the CBC Housing ASB Team shared the evidence and report details that we had received, and each provided statements of evidence in undertaking Injunction proceedings. The Court subsequently granted an Injunction Order with Power of Arrest in respect of the offender.

5. How to report ASB incidents to us

5.1. CBC is committed to ensuring that our ASB service is accessible to all and that it is easy to report any ASB incidents or concerns to us, in a variety of ways.



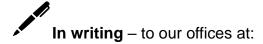
By telephone - to our Contact Centre on freephone number 0800 408 000. The Contact Centre lines are open between 8am – 5pm Monday to Friday. After this time, you can make reports to our out of hours provider through the same telephone number.

By Email – to <u>asbteam@cbh.org</u> This inbox is checked daily during office hours (8am – 5pm).

Customer Portal – You can register and log in to the My CBH Customer Portal using your tenancy reference number. There is facility to report ASB as part of the range of self-service options available.

CBH Website – Access the 'Do it online' section and you can complete a form to provide the details of your ASB concern.

Face-to-face – You can speak to a member of the ASB Team through an arranged visit or office meeting. Simply call via our Contact Centre, or email us, to request an appointment.



- Hesters Way Resource Centre, Cassin Drive, Cheltenham, GL51 7SU
- Oakley Resource Centre, 113 Clyde Crescent, Cheltenham, GL52 5QJ
- Municipal Offices, Promenade, Cheltenham, GL50 9SA

Anonymous reporting

We value your privacy and respect your decision to remain anonymous when reporting ASB to us. However, if you submit a report anonymously, we may not be able to address your concerns or provide updates on the situation fully.

Sharing your identity with us will help us work together towards finding a solution.

Rest assured that we will never disclose your personal information to anyone involved in the case without your consent.

6. What action do we take & what can you expect from us



- 6.1. When receiving an ASB report, we will contact the tenant within **1 working day for urgent matters**:
 - Hate Incidents
 - Domestic Abuse
 - Serious Violence
- 6.2. For all other reports, we will contact the tenant within 5 working days.
- 6.3. The ASB issue will be dealt with by a specific, named ASB Officer who is responsible for a neighbourhood.
- 6.4. We have a duty to ensure that we do not unfairly label tenants as anti-social without reasonable evidence. Where an ASB incident has occurred that may require further detail or evidence provision, we will open a **Triage Action**. Within this action, we will ask the tenant to document any further incidents over a two-week period. We will then contact the tenant within that two-weeks to assess the next steps. Where no or minimal further issues have occurred, we are likely to close the Triage Action. Where there is evidence of further issues, we will open an ASB Investigation case.
- 6.5. Where there is evidence of a persistent ASB issue that requires intervention from us, we will open an ASB Investigation Case. When a case is opened we will do the following:
 - Complete a Risk Assessment based on the details of the ASB and the tenant's personal circumstances and needs.
 - Agree an initial **Action Plan** with the tenant as to how we will investigate and look to resolve the ASB issue.
 - Contact the tenant on a Fortnightly basis to check in and update regarding the progress of the investigation. We will agree with the tenant the preferred method of contact.
- 6.6. It is vital that an ongoing relationship exists between the housing team and the tenant in the gathering of evidence, as any legal action, including possession proceedings, have to be presented to the County Court.
- 6.7. Our aim is to try and resolve ASB issues without the use of legal actions. Some examples of non-legal measures that we may use are:
 - Warnings written or verbal
 - Formal interviews
 - Use of practical measures to reduce the ASB e.g. headphones

- Support based interventions
- Mediation
- Acceptable Behaviour Contracts



- 6.8. Where we have attempted non-legal measures and the ASB is evidenced to be continuing, we can then consider legal options, which are commonly:
 - Anti-Social Behaviour Injunction
 - Extension of Introductory Tenancy
 - Demotion of Tenancy
 - Possession Proceedings
- 6.9. Dependent on the severity of the ASB, and/or where certain criminal offences have occurred in or around our properties, legal enforcement may happen without the non-legal steps, however generally, the non-legal measures are the most usual and appropriate.
- 6.10. Where ASB issues are resolved, we will agree with you that a Triage Action or ASB Investigation case can be closed.
- 6.11. Where a Triage Action or an ASB Investigation Case is closed, you will receive a short survey from us in order for you to be able to rate the service you have received. This information is vital in allowing us to improve our services.

7. Supporting tenants & supportive interventions

- 7.1. We are committed to delivering our ASB service in a person-centred way, being as flexible as possible around the needs of tenants, working to reduce harm and promote longer term wellbeing.
- 7.2. When discussing an ASB issue, we will also ask a tenant about any support in place or any unmet support needs. As part of investigating the ASB issue, we will also work with tenants to ensure access to support where possible.
- 7.3. We do this by ASB Officers referring to agencies, such as Victim Support, to provide tenants with extra care and contact around the ASB issue, or we may involve the councils housing service Tenancy Investment staff to meet with tenants ,provide advice and help to create a support network with the tenant, where required, to provide longer-term support.
- 7.4. As part of our response to ASB issues, we also look at the needs of the tenant causing the ASB issue.

7.5. Where an unmet support need may be a contributory cause to the ASB, for example poor mental health, we will work to get this support need met, working with our partner agencies. Where needs can be met, this often reduces or resolves the ASB issue.



7.6. The court expects all vulnerability or support related factors to have been taken into account prior to any case being brought before the court. We also have a duty to actively try to prevent homelessness.

8.0. Hate crime & hate incidents

Our position:

8.1. CBC strives to ensure that tenants feel as safe as possible in their homes, and we are committed to supporting persons that may be subjected to hate crimes or hate incidents.

We are also committed to taking the strongest possible action against any tenants that may be committing criminality, or causing distress, based on any hate related motivations and therefore breaching their tenancy conditions in the most serious way.

- 8.1 Whilst any hate crime or incident should be reported to the Police in the first instance, CBC have strong links with the Police and will work together where a criminal incident has occurred that will also constitute a serious tenancy breach.
- 8.2We will also work to ensure that the victims of hate crimes or incidents are signposted to specialist support.

What is a hate crime?

8.3 A hate crime is defined as a criminal offence which is perceived by the victim, or any other person, to be motivated by hostility or prejudice towards an individual based on a protected characteristic that the victim has, or is perceived to have.

What is a hate incident?

8.4 Hate incidents refer to incidences that are motivated by specific protected characteristics, or perceived to be motivated by specific protected characteristics, but do not constitute a criminal offence.

What are the protected characteristics?

- Age
- Race
- Religion or Belief

- Gender Reassignment
- Sex
- Sexual Orientation
- Disability
- Marriage of Civil Partnership
- Pregnancy or Maternity



Contacts for support around hate crimes & hate incidents

- 8.5 The below are some of the specialist agencies that provide hate crime or hate incident support:
 - Victim Support 0800 077 8460
 - Stop Hate UK 0800 138 1625
 - Equality Advice & Support 0808 800 0082
 - Galop (LGBTQ+ victims & survivors of abuse and violence) 0800 999
 5428
 - On Your Side (for persons who identify as East and Southeast Asian) 0808 801 0393

9 Consultation

9.1 This policy has been subject to an Equality Impact Assessment to help ensure that CBC is meeting the requirements of the public sector Equality Duty (introduced in 2011 under the Equality Act 2010) in respect of the ASB services we offer.

10 ASB Case Review

- 10.1 ASB Case Review's give victims, or victims' representatives, the right to ask local agencies to review how they have responded to previous ASB complaints. As well as considering what further actions might be taken where the behaviour persists
- 10.2 It is not a complaints procedure. Its purpose is to offer a 'safety net' for vulnerable victims and to help avoid individuals being passed between agencies without resolution.
- 10.3 Subject to meeting the threshold (listed below), anyone who is affected by ASB can ask for a Case Review. A Case Review can also be requested by someone acting on behalf of the victim, whether this is a family member, a carer, or councillor or MP, although written consent will be needed if it is not the victim.



- 10.4 Any victim or victim's representative (written consent is required), can activate an ASB Case Review if the criteria, or threshold, for submitting an ASB Case Review application is:
 - Three or more reported incidents of anti-social behaviour, including hate incidents, to relevant agencies
 - The incidents occurred within a six month period and were reported within a month of each incident happening
 - The anti-social behaviour is ongoing
- 10.5 Within Gloucestershire, case reviews are managed by the Office of the Police & Crime Commissioner (OPCC). To apply for an ASB Review, the below link takes you to the application process on the OPCC website:

 https://www.gloucestershire.police.uk/advice/advice-and-information/asb/dp/request-asb-case-review/
- 10.6 The legislation states that the following 'relevant bodies' must attend an ASB case review panel:
 - District/city council
 - Police
 - Health
 - Social housing providers
- 10.7 In Gloucestershire we also invite Solace (Solace joint Police/Council ASB Team), Gloucestershire's Fire and Rescue Service, the Youth Support Team, Probation and any other agency as appropriate. Importantly, the victims (and / or their representatives) are invited to attend the ASB case review.

11 Feedback & Learning

- 10.1 As an organisation we are committed to obtaining feedback from service users, to identify specific learning from casework and embed changes to policy and procedures with a culture of continual service improvement.
- 10.2 Where a Triage Action or an ASB Investigation Case is closed, tenants will receive an SMS text survey to rate the service you received. This information is vital to improve our services.
- 10.3 Feedback on ASB case management is also received through our quarterly customer satisfaction telephone survey.

12 Accessibility Statement



- 12.1 Cheltenham Borough Council (CBC) is committed to ensuring its Housing Services Anti-Social Behaviour (ASB)

 Policy is accessible and inclusive for all members of the community. This statement outlines our approach to accessibility, with a focus on compliance with relevant legislation, including the Equality Act 2010.
- 12.2 CBC recognises its statutory responsibilities under the Equality Act 2010, specifically the Public Sector Equality Duty (PSED), which requires public bodies to:
 - Eliminate discrimination, harassment, victimisation and any other conduct prohibited by the Act;
 - Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - Foster good relations between people who share a protected characteristic and those who do not.
- 12.3 In accordance with this, the ASB Policy and related services have been subject to an Equality Impact Assessment to:

identify and mitigate any potential disadvantages to tenants with protected characteristics.

- Are delivered in a person-centred, harm-focused, and trauma-informed manner, with flexible responses tailored to the needs of each tenant.
- Actively seek to reduce barriers to access for all, including those with disabilities, language or literacy needs.
- Include specialist support and signposting where required, particularly for victims of Hate Crime, Domestic Abuse, or residents with additional vulnerabilities.
- Are continually reviewed and informed by feedback from a wide range of stakeholders, including tenants and safeguarding professionals.
- 12.4 We ensure that tenant can report ASB in a variety of accessible ways, including:
 - Telephone, email, and online portal.
 - In-person visits and home appointments.
 - Alternative formats on request (e.g., large print, translated materials);
 - Language or British Sign Language (BSL) interpreters where required.
 - Support for third-party or representative reporting.

13.5 Supporting Inclusive Practice

Our staff receive training on equality and safeguarding. We work proactively with specialist agencies to ensure that support is in place for those experiencing ASB who may be disproportionately affected due to a protected characteristic under the Equality Act 2010, including:

Age

- Disability
- Gender reassignment
- Marriage and civil partnership
- Pregnancy and maternity
- Race
- · Religion or belief
- Sex
- Sexual orientation



13.5 Continuous Improvement

We are committed to continuous improvement and encourage all tenants to provide feedback on the accessibility and inclusiveness of ASB services. This is achieved through satisfaction surveys, tenant forums, and feedback from partner agencies.

This policy or related documents is available in alternative formats on request.



Cheltenham Borough Council

Anti-Social Behaviour (ASB) Policy

Summary Document

What Is This Leaflet About?

This summary explains how Cheltenham Borough Council (CBC) deals with Anti-Social Behaviour (ASB) in council housing. It tells you what ASB is, what CBC can do, and how you can get help.

X What Is Anti-Social Behaviour (ASB)?

ASB is behaviour that:

- Harasses, alarms, or upsets people
- Causes a nuisance or disturbance
- Makes communities feel unsafe

Examples of ASB:

- Loud noise or shouting
- Drug use or dealing
- Threats or verbal abuse
- Vandalism or fly-tipping
- Hate crimes

▼ What Isn't ASB?

Some things are not considered ASB, such as:

- Children playing
- Normal daily noise
- Disagreements over parking or gardens
- Cats roaming
- Occasional social media arguments

For serious crimes like assault or drug dealing, call the Police first (999 in emergency, 101 otherwise).

Who Handles ASB?

CBC works with other organisations to tackle ASB:

- Police
- Environmental Health

- **SOLACE** (Police & Council team)
- Support services and charities

To Report ASB

You can report ASB to CBC:

• Call: 0800 408 0000

• Email: asbteam@cheltenham.gov.uk

• Online: Through the customer portal

CBC will respond:

• Urgent cases (e.g. hate crime): within 1 working day

• All others: within 5 working days

% What Happens After You Report?

- You'll be assigned an ASB Officer
- You may be asked to record incidents (log or app)
- If the problem continues, an investigation will start
- CBC may use:
 - Warnings
 - Mediation
 - Support services
 - o Legal action (e.g., court orders or eviction)

Support For Everyone

CBC supports both:

- Victims (help, referrals, emotional support)
- Offenders (help with problems like mental health or addiction)

W Hate Crime

CBC will take strong action against any tenant who commits hate-related offences. Victims will be supported and referred to expert services.

ASB Case Review

If you report ASB 3 or more times in 6 months and nothing changes, you can ask for a Case Review.

All agencies will review your case

• It's not a complaint, it's a way to get results

Apply at:

gloucestershire.police.uk/asb-case-review

Feedback Matters

After your case is closed, you'll get a survey to rate our service. Your feedback helps us improve.

Need Help or More Info?

Contact CBC's ASB Team:

• **Phone:** 0800 408 0000

• Email: asbteam@cheltenham.gov.uk

• Website: cheltenham.gov.uk



Equality Impact Assessment

Introduction

An Equality Impact Assessment (EqIA) is a method for assessing the effects or impacts of a council policy or function on removing barriers to equality.

The Equality Act 2010 includes a public sector equality duty which requires public authorities to try and eliminate discrimination; advance equality of opportunity between persons who share a relevant protected characteristic and those who do not share it and promote equality and good relations across a range of protected characteristics.

The protected characteristics are:

Age	Disability	Gender Reassignment
Marriage and civil partnership	Pregnancy and maternity	Race
Religion or belief (including lack of belief)	Sex	Sexual orientation

An EqlA should be completed with the full range of protected characteristics considered during the initial stages of developing new strategies, policies, functions or services, prior to starting a procurement exercise and before decisions are made.

Examples of when an EqIA should be completed are:

 Any proposals to introduce or add to a service 	 Any proposals to adopt policy priorities, strategies and plans
 Any proposals to remove, reduce or alter a service 	 Changes to staffing structure where groups of employees are likely to be negatives affected
Any new policies or changes to policies	 Any proposals in relation to procured or commissioned services

Stage 1 - Equality Screening

Whenever a policy/service or function is reviewed, changed, developed or removed an initial equality impact assessment stage 1 will need to be undertaken. This is a screening template and will help establish whether a full assessment is needed. This should be done at an early stage of the process so that it is part of policy development.

Stage 2 - Equality Impact Assessment

This is the full EqIA and seeks to identify the equality considerations that have bene taken into account including any mitigating actions proposed and ensures decisions are based on evidence. The EqIA will need to be agreed with the appropriate Head of Service or Director and should be included on the decision making report, along with commentary on the assessment in the main body of the report.

STAGE 1 - Equality Screening

1. Identify the policy, project, function or service change

a. Person responsible for this EqIA	
Officer responsible: Nick Such	Service Area: Housing
Title: Tenancy Services Manager	Date of assessment: 24.05.2025
Signature:	

b. Is this a policy, function, strategy, service change or project?	Policy
If other, please specify:	

c. Name of the policy, function, strategy, service change or project

Housing Services ASB Policy

Is this new or existing?

Already exists and is being reviewed

Please specify reason for change or development of policy, function, strategy, service change or project

Policy has been reviewed as part of a wider service improvement project and in line with the consumer standards requirement and customer feedback.

d What are	the aims, objectives and intended outcomes and who is likely to benefit from it?
Aims:	 To ensure ASB is tackled effectively in council-owned housing. To support residents and promote safe, peaceful neighbourhoods. To respond to ASB in a fair, proportionate, and harm-centred way. To provide a service that considers the needs of both victims and perpetrators.
Objectives:	 Provide clarity on what ASB is and how to report it. Define the role of Housing Services and its partnerships. Describe how cases are managed and what support is available. Promote early intervention, fairness, and access to resolutions.
Outcomes:	Reduced incidence of ASB in council housing. - Improved resident satisfaction and safety. - Equitable access to services for all protected groups. - Better outcomes for vulnerable residents
Benefits:	 Improved neighbourhood relations and resident wellbeing. Clearer guidance for staff and residents. More effective use of resources. Compliance with statutory duties including the Equality Act 2010.

r ago ro				
e. What are the expected impacts?				
Are there any aspects, including how it is delivered or accessed, that could have an impact on the lives of people, including employees and customers.	Yes			
Do you expect the impacts to be positive or negative?	Positive			
Please provide an explanation for your answer:				
The policy takes a person-centred and harm-based approach and includes proactive support and safeguarding mechanisms.				
However, the enforcement aspect of the policy, must be carefully managed through a process of proportionality assessment and legal advice so that it disproportionately impact residents with mental health conditions or other vulnerabilities.				

If your answer to question e identified potential positive or negative impacts, or you are unsure about the impact, then you should carry out a Stage Two Equality Impact Assessment.

f. Identify next steps as appropriate	
Stage Two required	Yes
Owner of Stage Two assessment	Nick Such
Completion date for Stage Two assessment	24 th May 2025

Please forward this completed form to [add email address] and move on to Stage 2 if required.

STAGE 2 – Full Equality Impact Assessment

2. Engagement and consultation

The best approach to find out if a policy etc, is likely to impact positively or negatively on equality groups is to look at existing research, previous consultation recommendations, studies or consult with representatives of those equality groups.

a. Research and evidence

List below any data, consultations (previous, relevant, or future planned), or any relevant research, studies or analysis that you have considered to assess the policy, function, strategy, service change or project for its relevance to equality.

Consultation carried out with a panel of tenants that included ASB service users, non ASB service users, persons who have been recorded as being both victims and perpetrators and also a member of the Syrian refugee community and member of the LGBTQIA community who has experienced housing based ASB.

b. Consultation

Has any consultation be conducted?

Yes

Describe the consultation or engagement you have conducted or are intending to conduct. Describe who was consulted, what the outcome of the activity was and how these results have influenced the development of the strategy, policy, project, service change or budget option. If no consultation or engagement is planned, please explain why.

Consulted with internal teams (Environmental Health, Safeguarding), external partners (Police, Victim Support, Tenant Panel), and considered customer feedback from ASB focus group. Findings helped shape policy aims and prioritisation of high-harm cases.

3. Assessment

a. Assessment of impacts

For each characteristic, please indicate the type of impact (positive – contributes to promoting equality or improving relations within an equality group, neutral – no impact, negative – could disadvantage them).

Page 153
Please use the description of impact box to explain how you justify the impact and include any data and evidence that you have collected from surveys, performance data or complaints to support your proposed changes



Protected Characteristic	Specific Characteristic	Impact	Description of impact	Mitigating Action
AGE	Older people (60+)	Positive	Targeted support available through agencies like Victim Support; prioritisation of vulnerable residents	Maintain strong referral pathways and include Age in risk assessments
	Younger People (16- 25)	Positive	Support needs of young tenants considered; policy enables Acceptable Behaviour Contracts and youth intervention	Maintain partnership with Youth Support Team
	Children (0-16)	Neutral	Indirectly affected via household ASB; not service users directly	Ensure risk assessments consider children in households
DISABILITY A definition of disability under the Equality Act 2010 is available here. See also carer	Physical disability	Positive	Service user with sensory impairment may struggle to report ASB / provide evidence through traditional methods.	Multiple reporting methods Use of advocates Use of alternative reporting methods – Dictaphones etc. Home visits Special requests in court proceeding
responsibilities under other considerations.	Sensory Impairment (sight, hearing)	Positive	Service user with sensory impairment may struggle to report ASB / provide evidence through traditional methods.	Multiple reporting methods Use of advocates Use of alternative reporting methods Dictaphones etc. Homes visits Special requests in court proceedings
	Mental health	Positive and negative	Enforcement activity could disproportionately impact residents with mental health conditions or other vulnerabilities.	Maintain emphasis on early intervention and mental health referrals Enforcement action is carefully managed through a process of proportionality assessment and legal advice so that it disproportionately impact residents with mental health conditions or other vulnerabilities.
	Learning Disability	Positive	Service user with learning difficulties may struggle to report ASB / provide evidence through traditional methods and understand proceeses.	Maintain staff training in equality and safeguarding. Maintain links with social care and specific learning disabilities team at GCC

	-			
				Use of advocates Provision of alternative reporting methods and evidence gathering tools Special request in court proceedings
GENDER REASSIGNMENT		Neutral	equality principles apply	Clear signposting and our service provision is gender-inclusive. Maintain links with Police Hate Crime lead to ensure ongoing knowledge of trends / best practice.
MARRIAGE & CIVIL PARTNERSHIP	Women	Neutral	No specific impact identified	
	Men	Neutral		
	Lesbians	Negative		
	Gay Men	Neutral		_
PREGNANCY & MATERNITY	Women	Positive	Recognition that Impact of ASB on pregnant women my be greater and carry a higher risk.	Include pregnancy in case risk assessments
RACE* Further information on the	White	Choose an item.		155
breakdown below each of these headings, is available here. For example Asian, includes Chinese, Pakistani and Indian etc	Mixed or multiple ethnic groups	Positive	Strong links with GARAS and Hate Crime policy sections support ethnic minorities Policy has a Clear statement on accessibility & hate crime and access to support	Strong links with GARAS and Hate Crime policy sections support ethnic minorities Translation of policy and other documents into most prevalent languages as identified by QL reporting
	Asian	Choose an item.		
	African	Choose an item.		
	Caribbean or Black	Choose an item.		
		Choose an item.		

RELIGION & BELIEF** A list of religions used in the census is available here	See note	Positive	Recognition of how practicing religion belief can lead to clashes of lifestyle.	Strong links with GARAS with regard to refugee communities that provides opportunity for expert advice and education around specific religious practices and beliefs.
SEX (GENDER)	Men	Positive	Policy and service is gender inclusive	Clear signposting to services and community groups
	Women	Positive	Policy and service is gender inclusive.	Clear signposting to services and community groups, Ongoing engagement with violence against women and girls forum
	Trans Men	Positive	Policy and service is gender inclusive	Maintain links with Police Hate Crime lead and local groups to ensure ongoing knowledge of trends / best practice.
	Trans Women	Positive	Policy and service is gender inclusive	Maintain links with Police Hate Crime lead and local groups to ensure ongoing knowledge of trends / best practice.
SEXUAL ORIENTATION	Heterosexual	Positive	Policy is inclusive of all sexual orientations with a Clear statement on accessibility & hate crime and access to support	practice. age 156
	Lesbian	Positive	Clear statement on accessibility & hate crime and access to support	Continue engagement with LGBTQ+ organisations & Police Hate Crime lead
	Gay	Positive	Clear statement on accessibility & hate crime and access to support	Continue engagement with LGBTQ+ organisations Police Hate Crime lead
	Bisexual/Pansexual	Positive	Clear statement on accessibility & hate crime and access to support	Continue engagement with LGBTQ+ organisations Police Hate Crime lead
Other considerations				
Socio-economic factors (income, education, employment, community safety & social support)		Positive	ASB processes are person centred and holistic allowing for recognition of other potential factors relating to ASB that is being reported	Consider wider debt housing and welfare needs when working with victims and perpetrators of ASB and continue appropriate referrals
Rurality		Neutral		

i.e. access to services; transport; education; employment; broadband		
Other (e.g. caring responsibilities)	Neutral	

^{*} To keep the form concise, race has not been included as an exhaustive list, please augment the list above where appropriate to reflect the complexity of other racial identities.



^{**} There are too many faith groups to provide a list, therefore, please input the faith group e.g. Muslims, Buddhists, Jews, Christians, Hindus, etc. Consider the different faith groups individually when considering positive or negative impacts. A list of religions in the census is available here

4. Outcomes, Action and Public Reporting

a. Please list the actions identified through the evidence and the mitigating action to be taken.

Action	Target completion date	Lead Officer
Translation of ASB policy and other key documents into most prevalent languages within our customer bases	End of Q4 2025/26	N.Such
Incorporate pregnancy into ASB risk assessment	July 2025	N.Such

b. Public reporting

All completed EqIA's are required to be publicly available on the Council's website once they have been signed off. EqIA's are also published with the papers for committee and full council decisions.

Please send completed EqIA's to [email address]

5. Monitoring outcomes, evaluation and review

The Equalities Impact Assessment is not an end in itself but the start of a continuous monitoring and review process. The relevant Service or Lead Officer responsible for the delivery of the policy, function or service change is also responsible for monitoring and reviewing the EqIA and any actions that may be taken to mitigate impacts.

Individual services are responsible for conducting the impact assessment for their area, staff from Corporate Policy and Governance will be available to provide support and guidance, please email xxxx if you have any questions.

6. Change log

Name	Date	Version	Change

Cheltenham Borough Council

Cabinet Housing Committee – 11 June 2025

Q4 2024/25 Housing Complaints & Compliments Report

2024/25 Annual Housing Complaints and Compliments Report

Accountable member:

Cllr Flo Clucas, Cabinet Member for Housing and Customer Services

Accountable officer:

Caroline Walker, Director of Housing, Customer Services and Communities

Executive summary:

This report provides an overview of housing related complaints and compliments received during quarter 4 2024/25 and the 2024/25 Annual Housing Complaints and Compliments report.

Recommendations:

1. That the report and next steps are noted by Cabinet Housing Committee

1 Background

- 1.1 Complaints data is collected monthly and reported quarterly and annually, this allows for monitoring of service areas and levels of customer
 - dissatisfaction as well as the identification of learning and service improvements. This reporting allows for performance monitoring to ensure we are compliant with the Housing Ombudsman Complaints Handling Code in respect of complaint management and response timescales.

2 Main content

2.1 In quarter 4, 64 complaints were received and accepted at stage one of the housing complaints process, 43 complaints have been responded to with 33 upheld either in their entirety or in part and 10 were not upheld.

8 cases were escalated to stage two of the complaints process and 4 have been responded to within this period. All of the stage two complaints responded to were upheld either in their entirety or in part.

16 compensation payments, totalling £3,388.52 have been paid to customers. 4 complaints that were offered compensation have escalated to stage 2 of our complaints policy.

The greatest dissatisfaction areas for this quarter are arising from service delays such as not returning call backs within agreed timescales and completion of works agreed with customers and poor communication.

There has been a continued reduction in complaints with regard to staff attitude

29 compliments have been received during this guarter, with the majority for Repairs (12)

2.2 In 2024/25, 244 complaints were received and accepted at stage one of the housing complaints process, 217 complaints have been responded to with 171 upheld either in their entirety or in part and 46 were not upheld.

21 complaints were escalated to stage two of the complaints process and 14 have been responded to within this period. 11 of these complaints have been resolved and 3 stage two complaints have been escalated to the Housing Ombudsman. Of the 11 complaints resolved, 10 were upheld either in their entirety or in part and 1 was not upheld.

At stage 1, 47 compensation payments totalling £12,145.04 have been paid to customers and at stage 2, £10,853.56 has been paid to customers, one customer has not accepted their offer of £1000 compensation and is one of the cases escalated to the Housing Ombudsman.

The greatest area of dissatisfaction for the 12 months of 2024/25 is as a result of service delays and Contractor works.

156 compliments have been received in the last 12 months.

3 Key risks

3.1Failure to comply with the Housing Ombudsman Complaint Handling Code and the Council Housing Complaints Policy, failure to manage complaints appropriately may result in a maladministration decision from the Ombudsman, intervention and financial penalty.

Report author:

Caroline Walker, Director of Housing, Customer Services and Communities, caroline.walker@cbh.org

Appendices:

- i. Q4 2024/25 Housing Complaints and Compliments Report
- ii. 2024/25 Housing Complaints and Compliments Annual Report

Appendix 1: Risk Assessment

Risk ref	Risk description	Risk owner	Impact score (1-5)	Likelihood score (1-5)	Initial raw risk score (1 - 25)	Risk response	Controls / Mitigating actions	Control / Action owner	Deadline for controls/ actions
	Maladministration decision from The Housing Ombudsman Reputational damage arising from a complaint	Caroline Walker, Director of Housing, Customer Service and Communities	4	3	12	Reduce the risk	Complete annually the Housing Ombudsman Selfassessment form Ensure CBC Housing complaints policy is in line and following guidance form the Housing Ombudsman Code.	Natasha Dhillon, Complaints Officer	Annually Page 161 Every 3 years or more frequently if any legislative changes

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Housing Complaints and Compliments Report

Q4 January to March 24/25

Natasha Dhillon, Complaints Officer

Natasha.Dhillon@cbh.org



In this period:

STAGE 1	Compliments	Complaints Opened	Complaints responded to
January	10	18 (2 Withdrawn)	7
February	12	22 (2 Withdrawn)	17
March	7	24	19

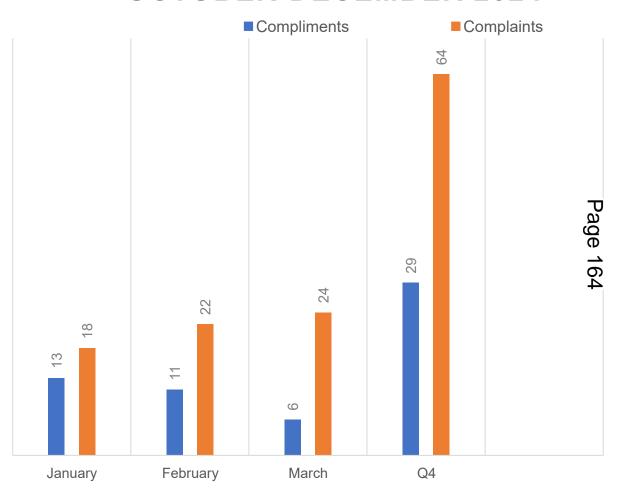
STAGE 2	Complaints Opened	Complaints responded
		to
January	2	0
February	2	2
March	4	2

In quarter 4 for 2024/25, 64 complaints were initiated at Stage 1, with 4 of these subsequently being withdrawn or closed due to no tenant contact. During this period, responses were provided for 43 complaints at Stage 1 and 4 complaints at Stage 2.

When compared to the same quarter for 2023/24, the figures show stability with similar numbers of complaints. However, there has been a notable increase in Stage 2 complaints, with 2 escalating from a stage 1 complaint in Q3 23/24 compared to 7 in this current quarter.

Within the period it has been identified that there is a pattern of complaints arising from works that had been agreed and not completed. Poor communication regarding these works is also highlighted. This pattern is the reason for some of the Stage 2 escalations.

OCTOBER-DECEMBER 2024



The period for this report is between $01/01/2025\ 00:00:00 - 31/03/2025\ 23:59:59$ (inclusive)

Q4 OVERVIEW STAGE 1: January to March 2024/25

64 complaints were opened in Q4, January to March 2025 and 43 of these were responded to. Four complaints were withdrawn or closed due to no tenant contact. 27 out of the 43 complaints responded to were within 10 working days. 1 complaint was responded to outside of target. 16 complaints had agreed Stage 1 extensions, three of these were responded to outside of their extended timescale.

The average number of days taken to investigate all closed complaints was 13 days.

16 complaints had formal extensions agreed with the complainant, in line with the Housing Ombudsman code.

The average time taken to respond to complaints that were not extended was 8.1 days.

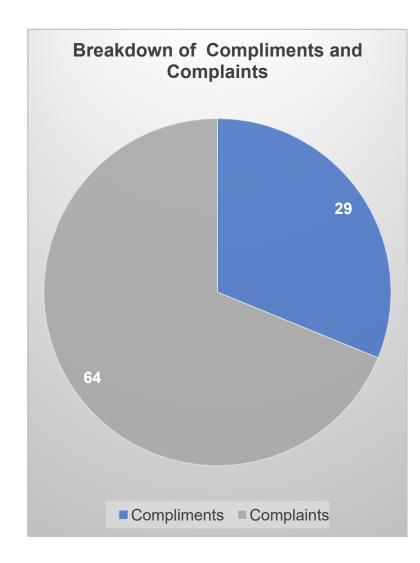
Compensation: Of the 43 stage 1 responses sent, 17 (39.5%) of these were offered compensation.

CBC declined six complaints, those complaints were responded to initially via a phone call if possible and all by letter to advise why the complaint was not accepted in line with our complaints policy.

RESOLVED AT STAGE 1	ESCALATED TO STAGE 2
35	8

UPHELD	PARTLY UPHELD	NOT UPHELD
25	8	10

There was a 75.7% success rate at resolving complaints at Stage 1, this has declined from the previous quarter which was 91.5%



Q4 OVERVIEW Stage 2: January to March 2024/25

Number of complaints escalated to Stage 2: In this period 8 complaints were escalated to Stage 2.

4 complaints were responded to at Stage 2 and all were responded to with their agreed target date.

Compensation: Of the 4 Stage 2 responses sent, 3 were offered compensation:

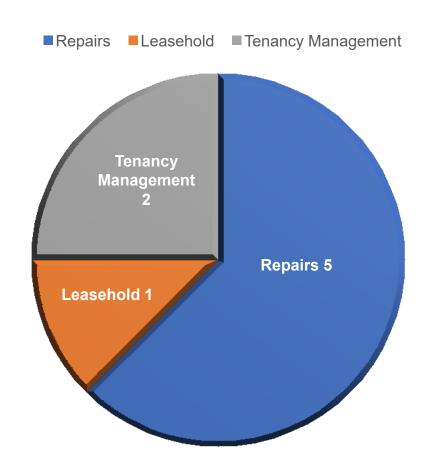
- £5000
- £1000
- £2,800.56

RESOLVED	ESCALATED
AT STAGE 2	TO OMBUDSMAN
3 (1 is still ongoing despite the stage 2 letter being sent)	2 (historic cases)

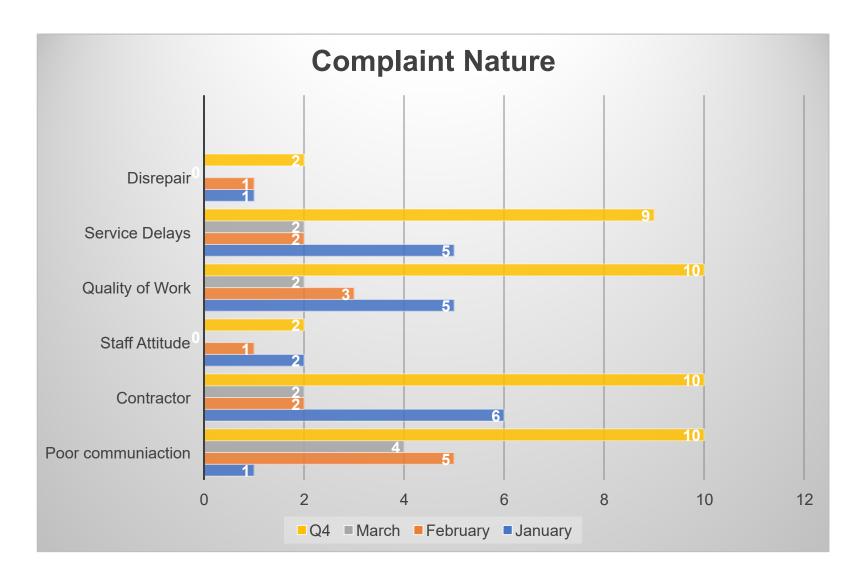
UPHELD	PARTLY UPHELD	NOT UPHELD
3	1	0

There has been a notable rise in Stage 2 escalation requests compared to 2023/24 (6 were escalated in this period). In the current financial year, the total number of Stage 2 escalation requests has reached 20. This increase may be attributed to the demands placed on managerial staff in addressing Stage 1 complaints, potentially resulting in insufficient time and attention devoted to responses at that initial stage. There is also a delay in responding to or completing promises that have arisen from complaints.

BREAKDOWN OF STAGE 2 COMPLAINTS ESCALATED IN THE PERIOD BY SERVICE AREA



Breakdown of Complaint Nature for complaints responded to



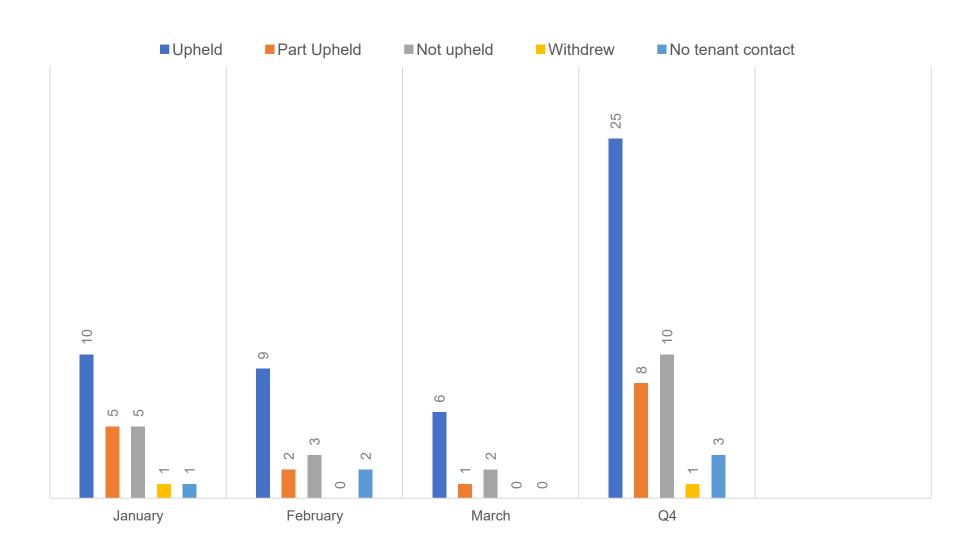
After review, it was shown that the most frequent reason for complaints at Stage 1 were "quality of work, Contractors and poor Communication".

Ineffective communication is frequently associated with contractor-related complaints, as residents experience a noticeable disconnect regarding projects overseen by external contractors. Additionally, complaints often arise from delays in addressing callbacks and responding to enquiries.

There is a continued reduction in complaints relating to staff attitudes, similar to the improvements observed in the previous quarter

Service delays is also a main factor, this is a result of delays regarding kitchens, bathrooms and works to external buildings e.g. sheds and garages.

Complaint Outcomes

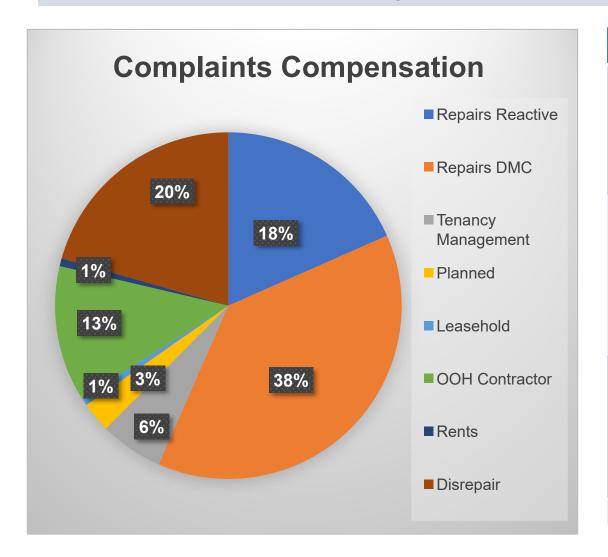


33 out of 42 complaints that were addressed in Stage 1 were partially and fully upheld.

To help CBC carry out additional internal investigations with the appropriate departments, learning records are kept for every complaint that is responded to and the Complaints Officer works wit the service areas required to monitor learning.

There are complaints that are notes responded to due to no tenant contact. Tenants are contacted on three occasions by phone and sent an email if we have a recorded email address. Customers are able to re open a complaint after a period of no contact.

Complaints Compensation – Stage 1



Month	Amount	Department	Total
January	£100 - escalated to Stage 2 £380 £100 - escalated to Stage 2 £50 £96	Repairs OOH contractor Repairs OOH contractor Technical and Investment	£726 offered
February	£25 £100 £1047.52 off rent account and £150 £200 - escalated to Stage 2 £100 £70	Off rent account Repairs DMC Repairs DMC Tenancy Management Repairs Repairs	£1,692.52 offered Page 169
March	£200 £25- escalated to Stage 2 £45 £500 £200	Repairs Leasehold Repairs Disrepair Disrepair	£970 offered
Total			£3,388.52

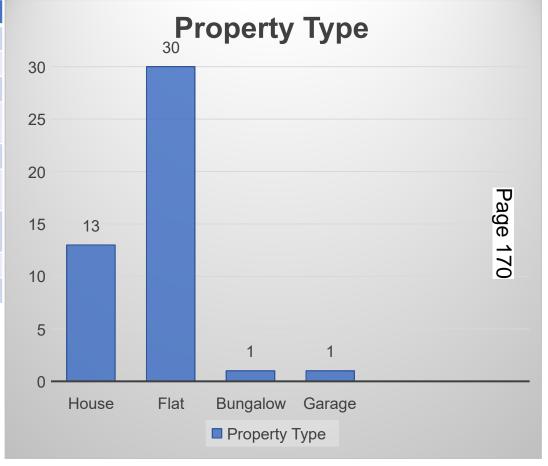
Complainant Profile

Property Type

Age Category	Total
No Age Data	6.2%
16-24	3.1%
25-34	12.3%
35-44	33.8%
45-54	21.5%
55-64	10.8%
65-74	9.2%
75-84	3.1%
Total	100%

Ethnic Origin	Total
White British	75.4%
No Data	10.8%
White Other	6.2%
Asian or Asian British Other	1.5%
Mixed White and Asian	1.5&
Asian or Asian British Indian	1.5%
Black or Black British Other	1.5%
Other Ethnic Group	1.5%
Total	100%

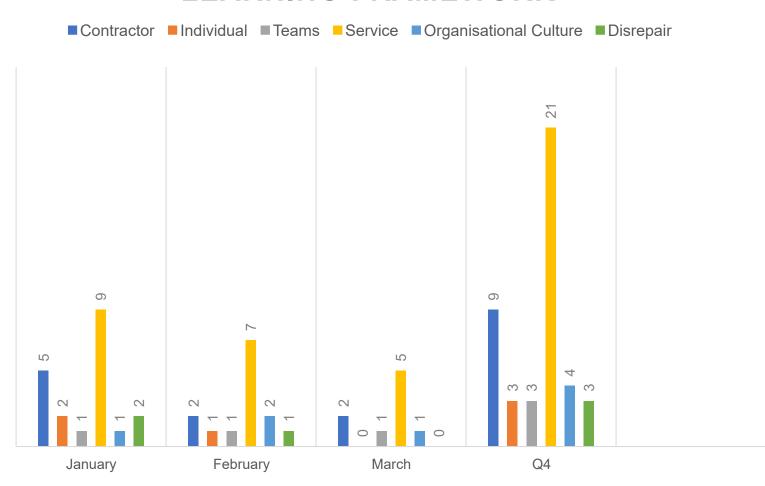
Total	Gender	Total
12.3%	No Data	6.2%
31.5%	Female	69.2%
6.2%	Male	24.6%
100%	Total	100%



Disability Flag	Total
Disabled	12.3%
Not Disabled	81.5%
No Data	6.2%
Total	100%

LEARNING FROM COMPLAINTS - January - March

LEARNING FRAMEWORK

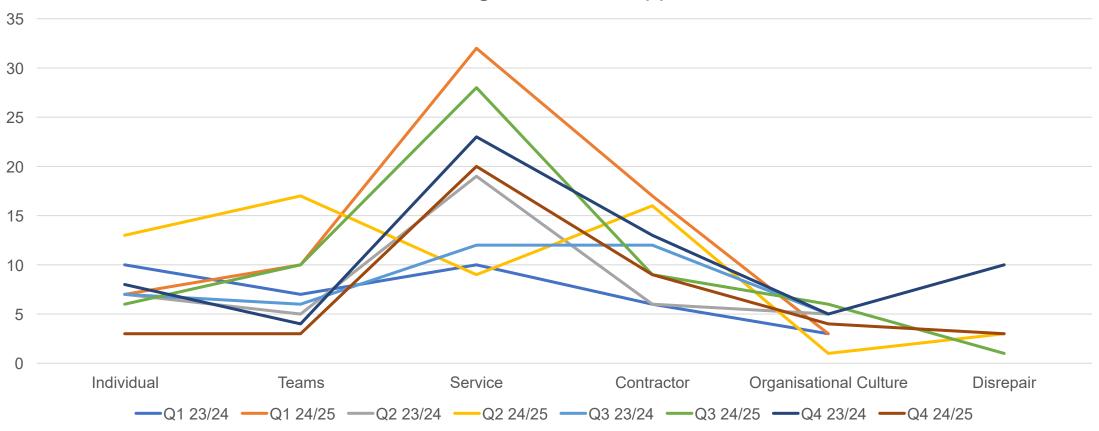


The primary message from the concerns raised this quarter is complaints relating to the service we offer; this is a continual pattern.

The complaints have arisen because our customers haven't received the services or work that we promised them. This increase has been caused by several variables, some of which may be related to the present problems we are having with contactors and procurement delays. Further compounded with resource in high demand areas such as reactive repairs and planned maintenance.

Ongoing work is being done to review and progress the promises and commitments made at stage 1.

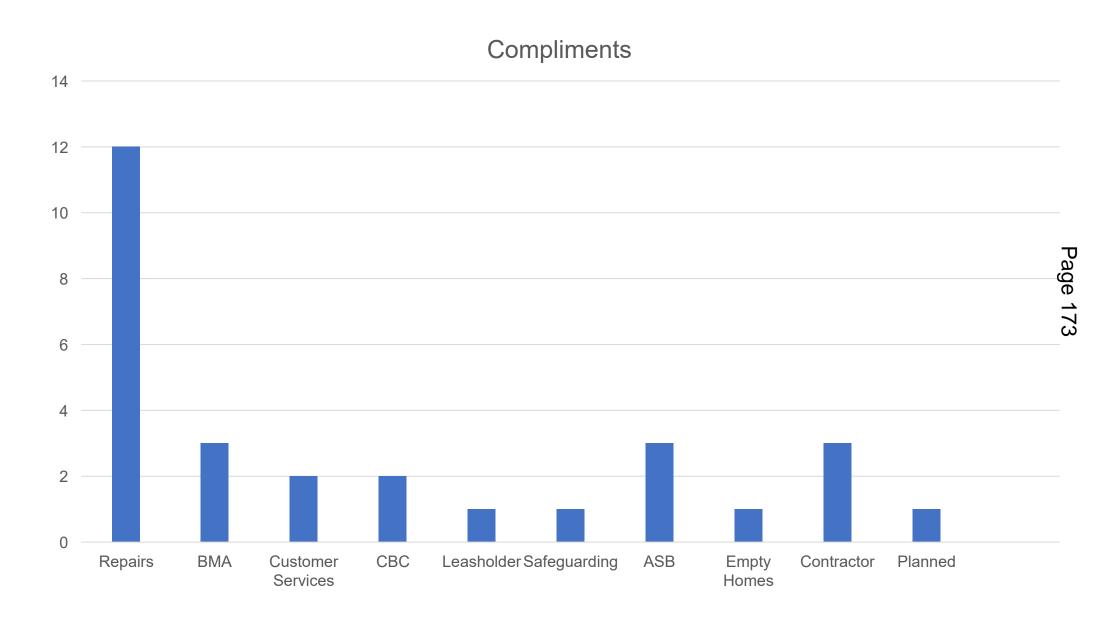
Learning Framework Applied



Since the appointment of the Complaints Officer in February 2023, we have gathered two years' worth of data for comparative analysis. As previously illustrated, a significant correlation exists between the application of the learning framework and the complaints received. The patterns highlighted indicate a consistent trend. The primary issue identified from the complaints pertains to the service provided to our residents, this trend has not shown improvement despite the learning opportunities discussed and made available to service managers. This matter will be addressed in the learning meetings following Quarter 4 and the annual report on complaints.

The Complaints Officer will conduct further analysis of complaints concerning service delays following an increase in such complaints. Subsequently, they will collaborate with relevant managers to assess the implementation of identified learning and improvement actions and determine if further measures are necessary.

Compliments



IN THE LAST 3 MONTHS

- We have successfully communicated and managed requests from the Housing Ombudsman within their timeframes
- Successfully managed works required following sensitive and in-depth Stage 2 complaints, these works are ongoing but have seen an improvements in communal gate works and improving resident satisfaction and resolving some complaints at this stage.

NEXT STEPS

- To review and analyse the results of SMS customer satisfaction surveys which are sent out following complaint closure
- To analyse data to identify any learning points in complaints escalating to stage 2 of our process, could they have been resolved at stage 1 with a more in depth investigation and response
- To collate learning data ready for quarterly meetings with service leaders



Annual Complaints & Compliments report

2024-2025



INTRODUCTION

- CBC Housing is committed to providing a high standard of service to customers. As part of our continuing effort to improve services provided, we welcome complaints as we recognize this is important feedback from customers.
- We want to know when we get it right, so standards can be maintained or improved, and we want to know when our service provision has failed so that we can learn from this.
- CBC Housing completed the annual self assessment in June 2024 in line with Housing Ombudsman Complaint Handling Code
- We have responded to the changes in guidance and mirrored these changes within our own internal policies and procedures to ensure we are compliant with the Housing Ombudsman Complaint Handling Code.
- We have introduced new QL system actions to ensure we are maximizing the data we can get from complaints to enable positive change within the organisation.



2024 - 25

Stage 1

244 complaints received in 2024/25. This shows a steady increase from 207 in 23/24. As of 1st April 2025, 217 complaints have been responded to. 21 cases were withdrawn or closed as no tenant contact. 6 cases received in 24/25 have closure dates in 25/26.

97.7% of complainants were responded to within 10 days or within the extended timescale agreed. 5 complaints of the 217 responses sent were not responded to within agreed timescales, 1 in Q3 and 4 in Q4.

Average number of days taken to investigate and close a complaint was 12.8 days v the Housing Ombudsman mandated timescale of 10 days (This includes 76 cases that had agreed extensions) this has increased from last years average of 9.6 days, there has been an increase in number of cases that have had extensions from 42 to 76 which has in turn affected the increase of average days to respond.

UPHELD	PARTLY UPHEL D	NOT UPHELD
123	48	46

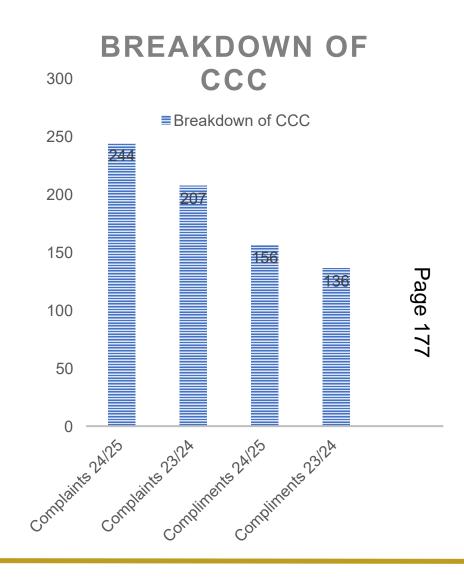
RESOLVED	RESOLVED	ESCALATED
AT STAGE 1	AT STAGE 2	TO OMBUDSMAN
196	11	3

Stage 2

There were 21 Stage 2 escalation requests, which has increased from 9 in 23/24, this is 8.6% of stage 1 complaints responded to. More noticeable 15 of these have been during Q3 and Q4.

One Stage 2 request was withdrawn. Of the 21 escalated 14 have been responded too. 11 were resolved at Stage 2 and 3 have escalated to The Housing Ombudsman.

CBC have received one determination in the period and are currently working with the Housing Ombudsman and the resident to resolve this.





Stage 1 – Compensation Offered

Quarter	Amount	Service Area
Quarter 1	£5,336.52	Technical and Investment – 4 Repairs – 4 Disrepair – 1 Tenancy Management - 2
Quarter 2	£1,770	Repairs – 1 Disrepair – 2 ASB – 2 Development – 3
Quarter 3	£1,650	Repairs -6 Technical and Investment – 1 Tenancy Management – 2 ASB – 1 Multi Department – 1
Quarter 4	£3,398.52	Repairs – 9 Technical and Investment – 1 Tenancy Management – 1 Leasehold – 1 Disrepair – 2 Rents – 1 Customer Services – 2

Stage 2 – Compensation Summary

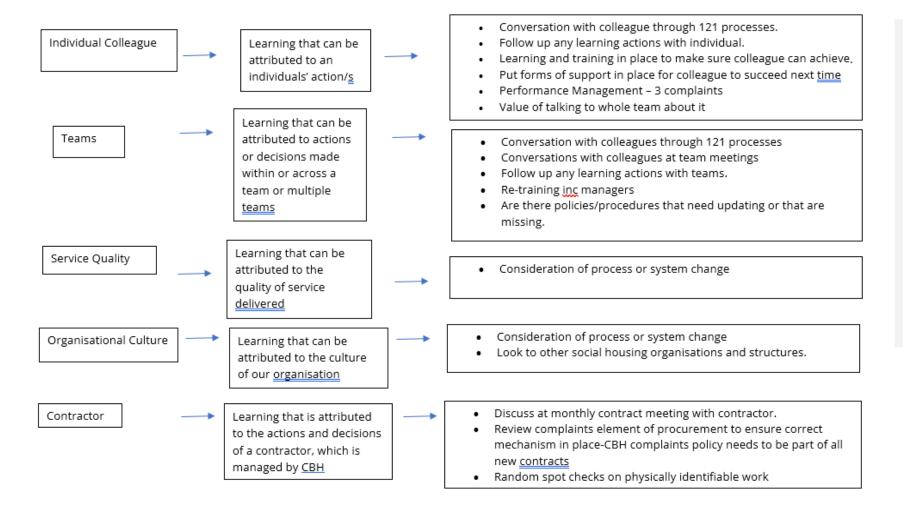
Quarter	Amount	Service Area
Quarter 1	£1000 not accepted	Tenancy Management/Repairs
Quarter 1	£1103	Repairs
Quarter 1	£400	Repairs
Quarter 2	£50	Development
Quarter 3	£1500	Repairs
Quarter 3	£2800.56	Tenancy Management/Empty Homes
Quarter 4	£5000	Repairs

Of the 217 responses sent, 47 Stage 1 complaints were offered compensation at Stage 1 (22%). This is from a combination of service areas, however the repairs service made up 20 of those complaints offered compensation.

All Stage 2 complaints are reviewed to investigate reasons for escalation and to identify any preventative measures that can be taken to minimise the recurrence of complaints themes.



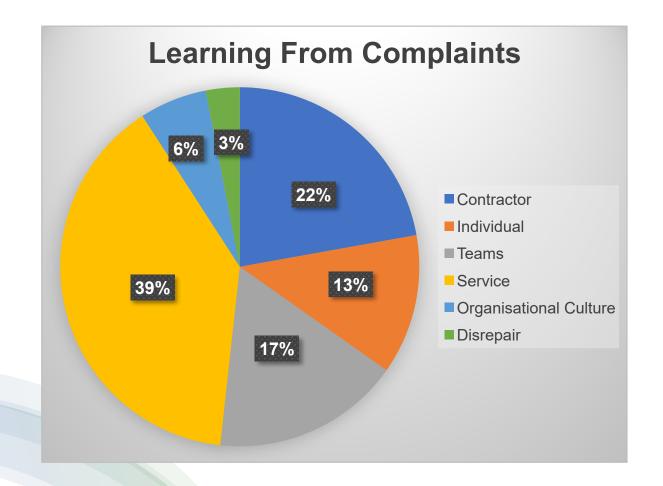
LEARNING FRAMEWORK



The Complaints Officer has developed and implemented a learning framework to aid Investigating Officers in identifying meaningful 'lessons learnt' from complaints, and to guide them in implementing appropriate actions.

This has been shared with all investigating officers and will be monitored by the Complaints Officer.





Having the framework in place has allowed us to evaluate complaints and breakdown areas of learning across CBC.

Moving forward we will continue to analyse the trends and pattens available to us to improve services across the business.

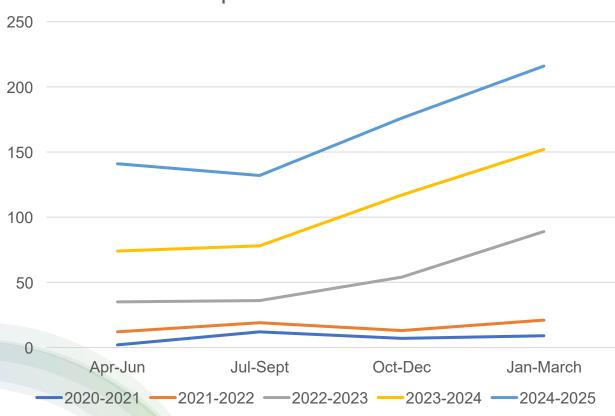
Learning from complaints has resulted in identification of projects to bring positive changes. These ongoing projects include:

- Introduction and review of decant policy
- Introduction and review of mutual exchange policy and procedure
- Review and amendments to out of hours script
- Contractor fact sheets updated



LAST 12 MONTHS

Complaint Annual Patterns



In 2024/25 we have seen a 17.9.% increase in complaints responded to from the previous year. This has been an increasing trend since the introduction of the Complaints Handling Code since 2021.

As illustrated, there is an increase following the introduction of the Housing Ombudsman Complaints Handling Code and our work around accessibility to our complaints process. Quarters three and four clearly show a spike in complaints. This can sometimes be as a result of more complaints regarding damp, mould and condensation as well as disrepair cases which are managed through the complaints process.



The trade went above and beyond, was very thorough, very helpful, explained what he was doing while he was doing the job. Went into further detail and inspected the leak further to find the root of the problem.

Thank you for your ongoing and relentless assistance in providing the plethora of leaseholder documentation, in a timely manner.

I just wanted to email to say how lovely the communal floor area looks after it was cleaned this week. The floor had become most unclean and unhygienic; however it is now clean and smells much fresher. It gives peace of mind. With thanks and appreciation.

I would like to let you know the result of my job hunting. Finally, I've received an offer for a 5 weeks temp roles from a Digital marketing company. The job will start from tomorrow. I am responsible for managing voucher order and process delivery requirements. But I still don't know it's part-time or full-time yet. Many thanks for your help and support on my job hunting. I wish you all the best.

Q1	63 Compliments
Q2	34 Compliments

Q3 30 Compliments

Q4 29 Compliments

Tenant wanted to say that he was very pleased, and they have done a wonderful job. He's very happy.

This is to commend the electricians, They were polite, friendly, fast and efficient

Resident called regarding work that has been carried out at her property today and wanted to pass on the message that both workers were great, well done.

Thank you for getting in touch with me so soon concerning the above complaint. I am very pleased with the outcome. Thank you once again, I felt I was being ignored but after our meeting I was confident that my complaint was being taken seriously. THANK YOU

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NEXT STEPS

- To improve our response times for stage 1 complaints and work with service leaders to get back to our 100% in target response rate from 23/24
- To review the complaints policy
- To attend quarterly tenant panel meetings to present complaints data and updates
- Review capacity and resource for managing complaints across all service areas with a view to reducing the number of stage 1 extensions
- To continue to review Stage 2 complaints received in the period
- To continue to develop our approach to learning from complaints
- To continue our relationship with the Housing Ombudsman and improve the quality of information shared during any investigation

Governance Response to the Annual Report

Cheltenham Borough Council Cabinet Housing Committee are committed to ensuring that customer complaints are handled effectively and in a timely manner, and that as an organisation we identify learning to deliver a great customer experience.

The committee routinely scrutinise complaints performance data, and this has been enhanced through the appointment of Councillor Flo Clucas, Cabinet Member for Housing and Customer Service, into the role of Member Responsible for Complaints ('MRC').

This appointment will ensure that there is a strong awareness of complaint performance within the Housing Committee and wider members, and that there is scrutiny of complaints handling and of emerging themes.

The Committee recognise that further improvements are required in repairs and planned maintenance, and the ASB service as these are Page 184 the key drivers for complaints, and this will be a focus over the next 12 months.

The MRC and Housing Committee aim to both challenge and support colleagues to embed a culture of positivity and learning from complaints by identifying themes and implementing changes to ensure continuous improvement.

Tenant Engagement Update, Housing Services, Cheltenham Borough Council June 2025

Tenant Panel

Resident Engagement Officer: Liam Pem is now in post. Ellen Pollicott will be working closely with him to develop measurable actions against the tenant voice plan. He has been introduced to the panels.

The Tenant Panel met on 15th May

- The Panel was introduced to Liam Pem, new Resident Engagement Officer
- A new annual workplan was developed by the group
- We reviewed changed to the CBC customer promises, feedback has been offered to Hope Richardson

The new workplan:

Work Plan 2025- 2026

fonth	Theme	Guest Speaker?
lay 16th	Customer promise	
	Workplan for the year	
	Introduction to Liam Pem	
	Review of current scrutiny	
ıne 20th	Repairs Scrutiny Begins	
ıly 18th	Property Compliance report	
•	Performance report	
	Consumer Standard programme	
	update	
	Quarterly Complaints report	
	Customer Satisfaction survey	
	update	
ugust 22nd	Repairs Scrutiny	
eptember	Repairs Scrutiny Ends	
9th		
	B	
ctober 24th	party carrier repair	
	Performance report	
	Consumer Standard programme	
	update	
lovember	Quarterly Complaints report EDI Scrutiny	
lovember 1st	EDI Scrutiny	
lecember lecember	Scrutiny and Celebrations	
ecember 2th	Scrutiny and Celebrations	
anuary 23rd	Property Compliance report	
anuary 23rd	Performance report	
	Consumer Standard programme	
	update	
	Quarterly Complaints report	
	Customer Satisfaction survey	
	update	
ebruary	EDI Scrutiny Ends	+
eoruary Oth	EDI SCIULITY ETIUS	
March 20 [±]	Annual Report	

Report for Cabinet Housing Committee, 11 JuPage 186

The Tenant Panel have also been consulted on the compliance strategy and policies. An update will be provided at the committee meeting.

Leaseholder Panel

The Leaseholder Panel is scheduled to meet on the 4th June, an update will follow.

Meeting		Title	Objective	Format
16 July 2025	•	CEO/Director Briefing (if required) (Verbal)	An update from the Chief Executive/Director on key issues which may be of interest to the Cabinet Housing Committee.	Verbal
	•	End of Year 2024-25 Housing Revenue	To provide a monitoring position statement for the HRA against the budget	Information/Discussion
		Account (HRA) Budget Monitoring Report	approved by Council on 23 February 2024, highlighting any key variances.	Paper
	•	Property Compliance Performance -	To provide the Committee with an understanding of our property compliance	Information/Discussion
		Quarter 1	status and the planned improvements needed to address areas of non-compliance.	Paper
	•	Housing Performance Report - Quarter 1	To provide the Committee with key performance information relation to voids, arrears, day to day repairs, ASB and complaints.	Information/Discussion Paper
	•	Customer Engagement Strategy	To provide committee with an opportunity to review and feedback on the Customer Engagement Strategy before it is submitted to Cabinet.	Decision (for referral to Cabinet/Council)
	•	Tenancy Policy	To provide committee with an opportunity to review and feedback on the Tenancy Policy before it is submitted to Cabinet.	Decision (for referral to Cabinet/Council)
	•	6 Monthly Tenant Satisfaction	Feedback and insight from the phone surveys with tenants carried out on behalf	Information/Discussion
		Measures (TSMs) Tracker Update	of CBC by Acuity. These surveys provide our results for the perception-based Tenant Satisfaction Measures.	Paper
	•	Housing Complaints and Compliments	To provide an overview of housing related complaints and compliments,	Information/Discussion
		Report - Quarter 1	identifying key areas of dissatisfaction and areas for learning and service improvement.	Paper
	•	Housing Improvement Plan update	To provide committee with an update on the Housing Improvement Plan.	Information/Discussion Paper
	•	Updates from the Tenant and	To highlight the ongoing activities of the Tenant and Leaseholder Panels and	Information/Discussion
		Leaseholder Panels	provide an additional opportunity for tenant and leaseholder voices to be heard.	Paper
	•	Review of the Housing Committee	To provide the Committee with opportunities to identify any additional areas they	
		Forward Plan	may wish to scrutinise.	Paper
		Briefing Note - Housing Sector Insight	To provide the Committee with an overview of recent developments in the housing sector and provide opportunities for horizon scanning.	Briefing Note
24 September 2025	•	CEO/Director Briefing (if required)	An update from the Chief Executive/Director on key issues which may be of	Verbal
		(Verbal)	interest to the Cabinet Housing Committee.	1
	•	Housing Improvement Plan	To provide the Committee with a progress update on the Improvement Plan	Information/Discussion
			developed to resolve areas of non-compliance with the Regulator of Social	Paper
			Housing's Consumer Standards.	-
	•	Impact of Right to Buy Legislative	To provide committee with an update on the impact of the Right to Buy legislative	Information/Discussion
		Changes	changes.	Paper

	•	Housing Risk Register	To review the strategic risks relating to housing from the Council's Risk Register.	Information/Discussion Paper
	•	Updates from the Tenant and	To highlight the ongoing activities of the Tenant and Leaseholder Panels and	Information/Discussion
		Leaseholder Panels	provide an additional opportunity for tenant and leaseholder voices to be heard.	Paper
	•	Review of the Housing Committee	To provide the Committee with opportunities to identify any additional areas they	Information/Discussion
		Forward Plan	may wish to scrutinise.	Paper
	•	Briefing Note - Housing Sector Insight	To provide the Committee with an overview of recent developments in the housing sector and provide opportunities for horizon scanning.	Briefing Note
26 November 2025	•	CEO/Director Briefing (if required)	An update from the Chief Executive/Director on key issues which may be of	Verbal
		(Verbal)	interest to the Cabinet Housing Committee.	
	•	Property Compliance Performance -	To provide the Committee with an understanding of our property compliance	Information/Discussion
		Quarter 2	status and the planned improvements needed to address areas of non-compliance.	Paper
	•	Housing Complaints and Compliments	To provide an overview of housing related complaints and compliments,	Information/Discussion
		Report - Quarter 2	identifying key areas of dissatisfaction and areas for learning and service improvement.	Paper
	•	Housing Performance Report - Quarter	To provide the Committee with key performance information relation to voids,	Information/Discussion
		2	arrears, day to day repairs, ASB and complaints.	Paper
	•	Anti-Social Behaviour Improvement	To provide the committee with an update on the progress of the ASB	Information/Discussion
		Project - Update	Improvement Project.	Paper
	•	Updates from the Tenant and	To highlight the ongoing activities of the Tenant and Leaseholder Panels and	Information/Discussion
		Leaseholder Panels	provide an additional opportunity for tenant and leaseholder voices to be heard.	Paper
	•	Review of the Housing Committee	To provide the Committee with opportunities to identify any additional areas they	
	_	Forward Plan	may wish to scrutinise.	Paper
	•	Briefing Note - Housing Sector Insight	To provide the Committee with an overview of recent developments in the housing sector and provide opportunities for horizon scanning.	Briefing Note
21 January 2026	•	CEO/Director Briefing (if required)	An update from the Chief Executive/Director on key issues which may be of	Verbal
		,	interest to the Cabinet Housing Committee.	
	•	HRA draft budget proposal for 2026/27	To review and feedback on the HRA draft budget proposal.	Information/Discussion
		and updated budget monitor for		Paper
		2025/26	To provide a monitoring position statement for the HRA against the budget	
			approved by Council on 21 February 2025, highlighting any key variances.	
	•	Property Compliance Performance -	To provide the Committee with an understanding of our property compliance	Information/Discussion
		Quarter 3	status and the planned improvements needed to address areas of non-compliance.	Paper

	•	6 Monthly Tenant Satisfaction	Feedback and insight from the phone surveys with tenants carried out on behalf	Information/Discussion
		Measures (TSMs) Tracker Update	of CBC by Acuity. These surveys provide our results for the perception-based	Paper
			Tenant Satisfaction Measures.	
	•	Housing Complaints and Compliments	To provide an overview of housing related complaints and compliments,	Information/Discussion
		Report - Quarter 3	identifying key areas of dissatisfaction and areas for learning and service	Paper
			improvement.	
	•	6 Monthly 2025-26 Housing Revenue	To provide a monitoring position statement for the HRA against the budget	Information/Discussion
		Account (HRA) Budget Monitoring	approved by Council on 21 February 2025, highlighting any key variances.	Paper
		Report		
	•	Updates from the Tenant and	To highlight the ongoing activities of the Tenant and Leaseholder Panels and	Information/Discussion
		Leaseholder Panels	provide an additional opportunity for tenant and leaseholder voices to be heard.	Paper
	•	Review of the Housing Committee	To provide the Committee with opportunities to identify any additional areas they	Information/Discussion
		Forward Plan	may wish to scrutinise.	Paper
	•	Briefing Note - Housing Sector Insight	To provide the Committee with an overview of recent developments in the	Briefing Note
			housing sector and provide opportunities for horizon scanning.	
25 March 2026	•	CEO/Director Briefing (if required)	An update from the Chief Executive/Director on key issues which may be of	Verbal
		(Verbal)	interest to the Cabinet Housing Committee.	
	•	Housing Improvement Plan	To provide the Committee with a progress update on the Improvement Plan	Information/Discussion
			developed to resolve areas of non-compliance with the Regulator of Social	Paper
			Housing's Consumer Standards.	
	•	Housing Risk Register	To review the strategic risks relating to housing from the Council's Risk Register.	Information/Discussion
				Paper
	•	Updates from the Tenant and	To highlight the ongoing activities of the Tenant and Leaseholder Panels and	Information/Discussion
		Leaseholder Panels	provide an additional opportunity for tenant and leaseholder voices to be heard.	Paper
	•	Review of the Housing Committee	To provide the Committee with opportunities to identify any additional areas they	Information/Discussion
		Forward Plan	may wish to scrutinise.	Paper
	•	Briefing Note - Housing Sector Insight	To provide the Committee with an overview of recent developments in the	Briefing Note
			housing sector and provide opportunities for horizon scanning.	
	•	Counter Fraud and Enforcement Unit	To provide the Committee with an overview of the Counter Fraud Enforcement	Information/Discussion
		Report	Unit's work on housing and tenancy fraud over the previous year.	Paper
			and to the state of the state of the provided your	. ap -:
01 June 2026	•	CEO/Director Briefing (if required)	An update from the Chief Executive/Director on key issues which may be of	Verbal
		(Verbal)	interest to the Cabinet Housing Committee.	

	•	Property Compliance Performance -	To provide the Committee with an understanding of our property compliance	Information/Discussion
		Quarter 4	status and the planned improvements needed to address areas of non- compliance.	Paper
	•	Housing Compliments and Complaints	To provide an overview of housing related complaints and compliments,	Information/Discussion
		Report - Quarter 4	identifying key areas of dissatisfaction and areas for learning and service improvement.	Paper
	•	Updates from the Tenant and	To highlight the ongoing activities of the Tenant and Leaseholder Panels and	Information/Discussion
		Leaseholder Panels	provide an additional opportunity for tenant and leaseholder voices to be heard.	Paper
	•	Review of the Housing Committee	To provide the Committee with opportunities to identify any additional areas they	Information/Discussion
		Forward Plan	may wish to scrutinise.	Paper
	•	Briefing Note - Housing Sector Insight	To provide the Committee with an overview of recent developments in the	Briefing Note
			housing sector and provide opportunities for horizon scanning.	
29 July 2026	•	CEO/Director Briefing (if required)	An update from the Chief Executive/Director on key issues which may be of	Verbal
		(Verbal)	interest to the Cabinet Housing Committee.	
	•	Property Compliance Performance -	To provide the Committee with an understanding of our property compliance	Information/Discussion
		Quarter 1	status and the planned improvements needed to address areas of non-compliance.	Paper
	•	6 Monthly Tenant Satisfaction	Feedback and insight from the phone surveys with tenants carried out on behalf	Information/Discussion
		Measures (TSMs) Tracker Update	of CBC by Acuity. These surveys provide our results for the perception-based Tenant Satisfaction Measures.	Paper
	•	Housing Complaints and Compliments	To provide an overview of housing related complaints and compliments,	Information/Discussion
		Report - Quarter 1	identifying key areas of dissatisfaction and areas for learning and service improvement.	Paper
	•	End of Year 2025-26 Housing Revenue	To provide a monitoring position statement for the HRA against the budget	Information/Discussion
		Account (HRA) Budget Monitoring	approved by Council on 21 February 2025, highlighting any key variances.	Paper
		Report		
	•	Updates from the Tenant and	To highlight the ongoing activities of the Tenant and Leaseholder Panels and	Information/Discussion
		Leaseholder Panels	provide an additional opportunity for tenant and leaseholder voices to be heard.	Paper
	•	Review of the Housing Committee	To provide the Committee with opportunities to identify any additional areas they	
		Forward Plan	may wish to scrutinise.	Paper
	•	Briefing Note - Housing Sector Insight	To provide the Committee with an overview of recent developments in the	Briefing Note
			housing sector and provide opportunities for horizon scanning.	

Briefing Note

Committee name: Cabinet Housing Committee

Date: 11 June 2025

Responsible officer: Claire Hughes, Director of Governance, Housing and

Communities, claire.hughes@cheltenham.gov.uk

This note provides information to keep Members informed of matters relating to the work of the Cabinet or a committee but where no decisions from Members are needed.

If Members have questions relating to matters shown, they are asked to contact the officer indicated.

Government Strategy and Announcements

- a. The Chancellor, Rachel Reeves MP, delivered the Spring Statement to the House of Commons on the 26 March, setting out the economic and fiscal picture ahead of a full Spending Review due in June 2025. Key announcements on housing include:
 - Confirmation of the Government's investment of £2 billion in social and affordable housing for 2026–27. This funding has been framed as a "down payment" to bridge the gap between the end of the Affordable Homes Programme 2026, and the next funding round to be detailed in the Spending Review. The funding is intended to deliver 18,000 homes to buy and rent by March 2027 as part of the Government's overarching ambition to build 1.5 million homes during this Parliament.
 - A £625 million construction skills package intended to expand workforce capacity across the sector.
 - A new Long-Term Housing Strategy will be published later this year, alongside announcements on the location of new towns, as part of the Government's wider plan to reform housing and planning systems.
- b. The Government has published a new Green Paper, Pathways to Work: Reforming Benefits and Support to Get Britain Working. The Green Paper includes some proposals that are not open to consultation, which include:
 - Abolishing the work capability assessment,
 - Rebalancing the Universal Credit (UC) standard allowance and the 'health element',
 - Making the criteria for eligibility for Personal Independence Payment (PIP) (daily living component) tougher.

A number of other proposals are open to consultation (which will end on the 30 June 2025), including:

- Guarantee of personalised employment, health and skills support for anyone on out of work benefits who wants it with a work-limiting health condition or disability,
- A new unemployment insurance benefit through the reform of contributory working-age benefits,
- Improving peoples' experience and trust in the benefits systems,
- Changes to the access to work scheme,
- Delaying access to the health element of UC until someone is aged 22,
- Raising the age at which people transition from disability living allowance for children to adult PIP from 16 to 18.

Housemark have warned that if just 5% of the planned welfare savings result in unpaid rent social landlords could face a £240 million rise in rent arrears and have encouraged landlords to strengthen support for tenants and help residents access unclaimed benefits and entitlements in preparation. They have also warned that these cuts are likely to hit the 59% of social housing tenants who live with a disability or long-term illness particularly hard.

- c. The Housing, Communities and Local Government (HCLG) Committee has called for the Government to establish an independent national oversight mechanism to ensure the implementation of the recommendations from the Grenfell Tower Inquiry.
 - Amongst a list of other recommendations, the Committee suggested the immediate appointment of an independent panel on the future of building control with statutory status to develop a strategy to boost the recruitment and retention of building control professionals and fire engineers. They have requested a formal Government response to their recommendations before the 22 July.
- d. At the start of April, the HCLG Select Committee also published a report following its inquiry into children in temporary accommodation. The report highlighted the appalling conditions in some temporary accommodation which have a serious detrimental impact on children's development, wellbeing, and health and have been identified as a contributing factor in the deaths of at least 74 children in the last 5 years. It also raised concerns that families are staying in temporary accommodation for far too long. The Committee have called for the MHCLG to "require all local authorities in England to carry out mandatory inspections of housing before it is first used as temporary accommodation, and whenever new residents are placed in the property." It has also called on the Government's forthcoming homelessness strategy to eliminate the use of temporary accommodation for families, starting by reducing and eliminating placements of over six weeks.
- e. The Government announced £1.8 billion in funding in March to improve the energy efficiency of up to 170,000 homes across England, with a focus on low-income households and social housing tenants. The investment, allocated through the Warm Homes: Local Grant and the Warm Homes: Social Housing Fund, will support local authorities and social housing providers in delivering key energy saving measures,

including insulation, double glazing, solar panels, and heat pumps.

- f. The Government has confirmed that the Building Safety Levy intended to raise £3.4 billion over ten years to fund the remediation of unsafe mid-rise residential buildings will be delayed until autumn 2026. The delay was presented as part of the Government's ongoing Remediation Acceleration Plan and will give the housing sector, local authorities, and the Building Safety Regulator additional time to prepare. The levy will apply to all new residential buildings in England requiring building control approval with the exemption of affordable housing, supported housing, small developments under 10 units, and community facilities. Developments on brownfield land will benefit from a 50% discounted rate, recognising higher construction costs on previously developed sites. The levy will be collected by local authorities and passed to central Government on a quarterly basis, with non-payment resulting in withheld or rejected building control completion certificates.
- g. The Government has responded to a report by the HCLG committee, published in May 2024, into the sustainability and finances of the social housing sector. They have confirmed that preferential borrowing rates from the Public Works Loan Board (PWLB) will remain in place until at least 2026, allowing local authorities to borrow at lower rates to build and maintain social housing. They have also repeated their commitment to a long-term rent settlement from 2026, with the current proposal allowing social rents to increase by up to CPI +1% annually over a five-year period.
- h. The Minister for Housing and Planning, Matthew Pennycook MP, confirmed in response to a written question that future Mayoral Strategic Authorities will have the power to set the strategic direction for affordable housing in their areas, including tenure mix and priority development sites supported by grant funding. He also stressed that local authorities must ensure that their management and maintenance of housing continues to meet regulatory standards throughout the local reorganisation process.
- i. The Ministry of Housing, Communities and Local Government (MHCLG) has said it will strengthen the powers of local councils to issue Empty Dwelling Management Orders (EDMOs) to properties to bring them back under council control. Currently councils can only issue an EDMO once a property has been empty for at least 2 years and with approval from an independent property tribunal. Representatives of the Local Government Association (LGA) have called for the period to be lowered to 6 months. Further details of the proposed reforms are awaited.

Regulator of Social Housing (RSH)

j. The Regulator of Social Housing (RSH) has warned that the use of long-term, inflexible lease structures for specialised support housing exposes social landlords to significant financial and governance risks. They have found that few providers using lease-based arrangements consistently meet regulatory standards. The RSH noted that landlords often commit to inflation-linked lease payments over long periods while shouldering responsibility for upkeep and occupancy risks leading to an unbalanced risk between the landlord and freeholder. It also highlighted issues with poor governance, limited capacity to manage maintenance and voids, and instances of

landlords taking on properties without fully understanding tenant needs. They have suggested that reforms to the lease structures may be needed to ensure sustainability and protect tenants.

Housing Ombudsman

k. The Housing Ombudsman's latest severe administration report highlights significant shortcomings in the handling of emergency repairs by social landlords. The report identifies issues where poor triaging led to emergencies being mislabelled leading to delays and where vulnerabilities within a household should have necessitated a more urgent response. The report concludes that common causes of these failures include inadequate record-keeping and communication, poor coordination with other parties, and the deployment of inappropriate tradespeople for specific repair tasks.

Developments that may impact tenants

I. From the 30 April the Department for Work and Pensions (DWP) has reduced the maximum deduction rate for repaying debt from 25% to 15% within the Universal Credit rules. The 'Fair Repayment Rate' is forecasted to deliver an average annual boost of £420 per household and is expected to benefit around 1.2 million of the UK's lowest-income households, including 700,000 households with children. It will apply to deductions previously taken from UC for debts such as advance payments or overpayments and will be automatically implemented for any assessment period beginning on or after 30 April.

Research and Campaigns

- m. The Local Government Association (LGA) has warned that severe financial pressures on Housing Revenue Accounts (HRAs) are forcing councils to choose between maintaining existing housing stock and building new homes. The LGA found that many councils are caught between running their HRAs into deficit or failing to meet statutory repair obligations, including those introduced under Awaab's Law. Rising demand, inflationary pressures and new regulatory requirements are found to have all contributed to rising costs. According to the LGA survey:
 - 72% of councils with an HRA expect to draw on reserves to balance their budgets in 2025/26,
 - 100% anticipate raising social rents within the CPI+1% cap,
 - Only 38% are confident they will be able to invest in new-build housing programmes,
 - 57% expect to reduce spending on repairs and maintenance,
 - 67% expect cuts to supervision and management.
- n. Led by Southwark Council, 112 councils have called on the Government to fund a 'Green and Decent Homes Programme' to make council homes safer, healthier and more sustainable for residents. The coalition has asked for at least £12bn over the next five years to upgrade council homes, along with long-term funding certainty over 20 years, noting that councils currently lack the long-term funding needed to improve

homes and meet growing regulatory demands. The policy proposal lists the following core principles of the standard:

- One single, integrated housing standard,
- Long-term, multi-year capital funding commitment,
- Funding allocation based on need,
- Strategic investment by landlords focused on clear outcomes,
- A progressive and ambitious benchmark,
- Regularly updated to reflect innovation and best practice,
- Transparent, outcomes-based reporting,
- Flexibility for landlords no arbitrary restrictions,
- · Realistic delivery timelines,
- Investment in replacement homes as part of the standard.
- o. Following the launch of the Government's consultation on its plans to implement measures set out in the Supported Housing (regulatory Oversight) Act 2023, more than 150 organisations signed a letter that was hand-delivered to Downing Street calling on the Government to 'Save Our Supported Housing'. The letter highlighted the need to tackle the financial crisis in the supported housing sector and the risk this posed to the Government's missions:

The letter states: "Supported housing is a vital national resource that delivers homes and services to half a million people. It boosts wellbeing, health and employment prospects, and enables people to live independently with the right support. Supported housing plays an indispensable role in cutting NHS waiting list backlogs, and reducing pressure on social care, temporary accommodation, and other vital public services. By providing homes for prison leavers, it reduces the risk of reoffending. And by reducing the disadvantage faced by Armed Forces veterans it helps public authorities meet their statutory duties under the Armed Forces Covenant.

However, the future of supported housing is at risk because of the dire financial situation facing the sector. Following years of funding cuts under the previous government, local authorities have been forced to decommission vital services. Rising costs alongside reduced funding have rendered many services unviable, forcing many to close, while demand for supported housing continues to rise."

The campaign calls for:

- Long-term and increased funding for housing-related support of at least £1.6bn per year for local authorities.
- A commitment to deliver more supported homes by 2040, with clear funding in the Affordable Homes Programme, and ensuring supported homes form part of the government's 1.5m housebuilding target.
- Ensuring that the long-term housing strategy and homelessness strategy encompass the vital role of supported housing.
- p. The i Paper have warned that England is on course for its largest Right-to-Buy (RtB) council housing sell-off in two decades. Analysis of a sample of 20 local authorities found that RtB application rates surged following the announcement of significant reductions in RtB discounts in the Autumn Budget. This is expected to lead to 18,510

RtB sales in 2025/26, a 162% increase compared to 2023/24. Councils have raised concerns that whilst they can retain all capital receipts from the sales, these will not be sufficient to replace the sold homes. The Local Government Association (LGA) in response to the report said that the RtB discount reduction could have positive effects in the longer term by reducing the number of homes sold but cautioned that the immediate spike in sales would worsen homelessness challenges and deplete social housing stock when demand is already high.

q. The National Housing Federation (NHF), Crisis and Shelter have issued a joint warning after new analysis showed that families in some parts of England face waiting times exceeding 100 years for a family-sized social home. The amount of time stated is how long it would take to clear the current waiting list for these homes within each area at the average letting rate over the last three years (rather than reflecting the average wait time). According to the analysis, in 32 local authority areas the wait for a 3-bedroom social home exceeds 18 years.

Shelter has also used historical trends and government data to estimate how many households could be living in temporary accommodation by 2029. They have warned that the use of temporary accommodation could rise by 44% to 182,000, including 206,000 children at a potential cost of £3.9 billion annually by 2029 based on rising costs. The analysis also factored in the impact of the ban on Section 21 no-fault evictions, using the pandemic eviction ban as a guide, as well as recent funding increases. Shelter urged the government to announce in June's Spending Review its commitment to build a new generation of social rented homes to ensure that every family has a safe and secure place to live.

The report comes alongside two recent reports from the Child Poverty Action Group (CPAG) and the Resolution Foundation which concluded that abolishing the two child cap on Universal Credit would be the most cost efficient and effective method to reduce child poverty. The report projects that, without changes, 4.8 million children (34% of all children) will be living in poverty by 2029-30, with half of all children in large families affected.

- r. Housemark's analysis of landlords' year-end performance, covering 2024-25, has revealed a "modest improvement" in tenant satisfaction of 1.7% compared to 2023-24. They have forecast a median result of 72% to 73% based on the tenant satisfaction measures (TSMs). Other key findings from the research include:
 - New anti-social behaviour (ASB) case volumes rose by 14% in March reflecting regulatory changes.
 - Rent arrears returned to pre-pandemic levels closing the year at a median of 2.5%.
 - Landlords completed an improved average of 3.3 repairs per property in 2024-25 and transactional satisfaction remained consistently high, averaging around 87% for much of the year.
 - Resolution rates for complaints remained strong in March, with 95% of formal stage one and two complaints resolved within published timescales. This was despite a 55% rise in complaints reporting.
- s. The former chief executive of the Audit Commission, Steve Bundred, published an article in the Guardian in April calling on the Government to make social housing

providers accountable for the treatment of their tenants. Whilst he welcomes the proposed 'Renters' Rights Bill' for the private sector he urged that accountability in the social housing sector be similarly strengthened. He proposed a range of reforms including granting local authorities' powers to summon providers to public scrutiny meetings, enabling councils to bring super-complaints to the Housing Ombudsman, and extending the Freedom of Information Act to cover housing associations. He also called for tougher financial penalties for persistent non-compliance and legislative changes to make it easier for councils to recover the cost of emergency repairs.

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