Report for:	Housing, Planning and Development Scrutiny Panel- 17 November
Title:	**Fire Risk Assessment Actions Report**
Report authorised by:	Kristian Melgaard, Director of Housing
Lead Officer:	Scott Kay, Assistant Director Repairs & Compliance
Report for Key/ Non Key Decision:	For information.

1. Describe the issue under consideration

1.1. This report is to provide the Housing, Planning and Development Scrutiny Panel with an update on fire safety, specifically around the Council's Fire Risk Assessment (FRA) action programme, the overall fire safety compliance position and the number of overdue fire safety actions.

1.2. This report sets out the work in progress to reduce the total number of outstanding and overdue fire safety actions, through the Council's current Fire Risk Action Delivery and Recovery Plan, setting out the key workstreams.

1.3. This report also sets out how fire risks are being identified and mitigated as part of the Council's responsibilities as a landlord, but how in specific buildings the risk to residents is being actively managed whilst actions remain outstanding.

2. Recommendations

2.1. The Housing, Planning and Development Scrutiny Panel is asked to:

a) Note the contents of this report.
b) Note the current FRA action performance.
c) Note future delivery plans to improve the current position.

3. Background

<u>FRA Process</u>

3.1. The Council has statutory responsibilities to ensure the safety of residents within its housing stock and associated communal areas. The Council completes FRAs for all residential buildings that fall under the scope of the Regulatory Reform (Fire Safety) Order 2005. The extent and nature of any assessment will depend

upon the building and its use and be determined in consultation with the competent fire risk assessor.

3.2. FRAs will identify measures that need to be taken to properly address fire safety concerns. The FRAs may also trigger more intrusive compartmentation or external wall surveys and/or a destructive FRA (where destructive sample occurs – e.g. walls, ceilings or floors are opened up).

3.3. The Council manages actions arising from FRAs in line with its Fire and Structural Safety Policy (May 2025). To support the Policy, the Council is developing a Fire Safety Management Plan that will support officers and other relevant stakeholders and interested parties to better understand their responsibilities, and the Council's approach, and actions to be taken, to manage and control fire risk in accordance with the commitments set out in the Fire & Structural Safety Policy. The plan is in the process of going through Housing's internal governance processes with an aim to have it finalised by January 2027.

3.4. Closure of FRA Actions is structured through the Council's delivery and recovery programmes, which adopt a risk-based methodology and focus on:

- Prioritisation of highest-risk actions
- Reduction of overdue actions
- Better data quality
- Improved action tracking
- Completing new actions and within their target time
- Enhanced contractor performance
- Stronger governance and assurance

3.5. Actions arising from FRAs are allocated to the appropriate team for completion, such as Housing Management, Asset Management or Repairs & Compliance. Repair actions are delivered through a mixture of responsive works, batched, planned or programmed works, or major investment works, such as the Better Homes Improvement and/or Fire Door or Automatic Fire Detection (AFD) Programmes.

3.6. The monitoring of FRA Actions is undertaken through the Council's digital compliance system, Compliance 365 (C365). This system receives the FRA, and scans it to extract, allocate, record, monitor, and report on open and overdue actions, removing the need for spreadsheets and manual intervention apart from for the quality assurance and removal of duplicate actions stages. This ensures that no actions are overlooked and there is a single source of truth to establish the true action count.

3.7. Action numbers fluctuate daily as new FRAs are uploaded and completed on the system by the responsible teams. Completed actions are recorded, and evidence is uploaded, on the system. The system is fully auditable and allows forensic analysis of changes should the need arise, to ensure all actions are appropriately managed and identify training needs where necessary.

3.8. The table below shows the Council's target timescales for completing actions as set out within the draft Fire Safety Management Plan. Although there are no statutory timescales for completion of actions, the following is consistent with other Registered Housing providers, based on a small peer group review, and is used to measure the Council's performance.

Priority of remedial work	Description	Timescale
Urgent/phone call	When an unacceptable risk to fire safety is present	24 hours
High	Within 3 months. These items are regarded as important but a lead time to organise is recognised to be necessary	< 3 months
Medium	Within 6 months. These items are regarded as important but a lead time to organise is recognised to be necessary	< 6 months
Low	Within 24 months. These items are regarded as important but a lead time to organise is recognised to be necessary	< 24 months
Recommended	Works to be considered in future improvements or ongoing/rolling maintenance programmes.	Planned/ Programme work

3.9. Fire Risk Assessors classify actions based on their assessment in relation to many variables and in line with their experience, qualifications and code of practice BS 9792:2025, specific to risk assessments for Housing, (formerly PAS79 which remains for commercial buildings). The Assessor will look at anything that provides an ignition source, a fuel or allows the spread of fire and effects escape routes. They will consider the building type and construction, its occupancy, maintenance regimes, access and security, layout, use, and history of fires or other impacts such as anti-social behaviour. On this basis, two identical issues can have different risk ratings due to different contexts as everything has to be assessed on its own particular circumstances. The Council does not overrule the classifications or risk rating, but as the Responsible Person under the Regulatory Reform (Fire Safety) Order 2005 (RRFSO), the Council

prioritises risks for action based on assessed urgency, using available resources and/or any mitigations that can or have been put in place.

Outcome of the Regulator of Social Housing Inspection

3.10. Following its inspection of the Council against the Consumer Standards between April and August 2026, the Regulator of Social Housing (RSH) awarded the Council a C4 grading in its judgement published on 28 October 2026, identifying serious failings across multiple aspects of service delivery and governance. The judgement specifically noted “serious failings in the delivery of landlord health and safety requirements”.

3.11. The RSH noted that at the time of inspection, almost 4,000 remedial actions identified during FRAs were overdue, of which more than 1,400 of these were categorised as high risk.

3.12. The RSH noted that the Council is taking steps to reduce this backlog and mitigate risks, however the RSH stated that “the scale and persistence of the issue raises concerns about its ability to maintain compliance and prevent recurrence”.

3.13. The Council accepts that the volume of remedial actions that are overdue represents a serious failing against the Consumer Standards, particularly considering the previous engagement had with the RSH. The Council in response to the RSH findings are commissioning an urgent independent review into why incomplete information regarding FRA actions was provided to the RSH in 2025. This is in addition to an investigation into the root causes of the regulatory failings identified by the RSH, to determine factors across Housing and the Council more widely that may have contributed to those failings.

3.14. Both the independent review and root cause investigation will identify areas for improvement, where these will help form a refreshed Housing Transformation Plan to ensure that change is made and provides for sustainable improvement that focuses on preventing the issue from arising again.

3.15. The information provided within this paper is to provide assurance that whilst there are overdue FRA actions, the risk to residents is being actively managed and mitigated. In addition, programmes are in place to clear the outstanding and overdue FRA actions, with performance reporting indicating positive movement.

4. Performance

FRAs

4.1. The total of FRAs in the 12 months prior to September 2026 is 1,626. Each FRA on average identified 9 new actions, which equates to an average of 1,162 new actions per month. Over the same 12-month period 13,949 actions were raised and 24,953 actions were closed.

FRA Actions

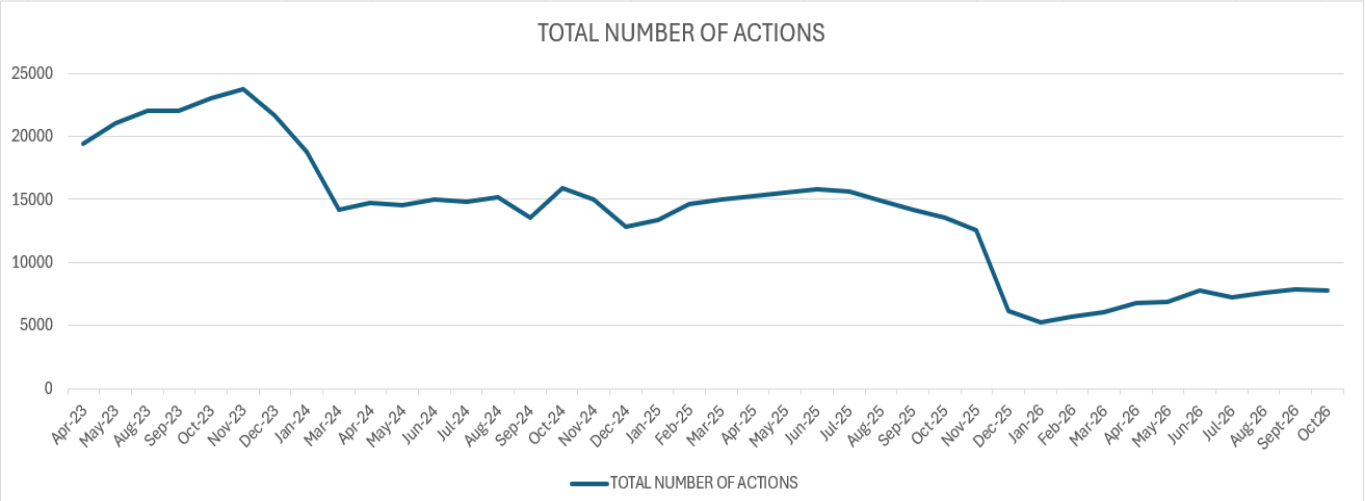
4.2. The total number of FRA actions that are open as of the end of September 2026 is 7,898. This number a year ago in September 2025 was 14,138 and at the point of self-referral in January 2023 there were 19,105 actions outstanding.

4.3. As at the end of September 2026 there 4,639 actions overdue, of which 1,661 of these are high risk. 74% of the overdue high-risk actions are allocated for completion as part of a targeted programme such as delivery of the Better Homes and Fire Door programmes. Of the total 7,898 actions that are open, 73% of these are awaiting completion through delivery of such programmes.

4.4. For a more detailed breakdown of FRA actions, risk and overdue levels, and planned programmes, please see Appendix A.

Action trends

4.5. The following chart shows the overall trend against the total number of all actions outstanding, showing a decline since April 2023.



4.6. The peak in action numbers in November 2023 was due to the collation of all data and completion of new FRAs leading to significant numbers of duplicated actions, some re-profiling of the FRA programme, to ensure a smoother profile for future years, and the introduction of newly outsourced Fire Risk Assessors in April 2023.

4.7. The slight rise in actions over quarter two of 2025 was due to the uploading of all remaining actions to C365 in early 2025 which again required further validation and removal of duplicates etc. leading to the significant drop in numbers at the end of 2025.

4.8. The more recent upward trend from January 2026 was due to the number of actions identified earlier in the year exceeding closure rates. This in turn was due to the mobilisation of new contractors, and changes in the fire safety team's resource capacity.

4.9. One of the best performing contractors reached their contract value earlier than anticipated in February 2026, due to the speed at which they mobilised and carried out the work. This reduced capacity to three contractors, of which, the Council have had to put works on hold at various stages for two of them, pending asbestos incident investigations. Both have been resolved and the contractors are working through actions again.

4.10. The Council's in-house repairs service was responsible for delivering fire safety actions, however capacity reduced due to staff turnover and it was difficult to recruit suitable replacement operatives with the required skills and competencies. Therefore, the Council became more reliant on HRS sub-contractors which slowed down completion of actions, due to limited contractor availability. The Council has since transferred the repairs team leader into the Fire Safety Team to support the procurement and mobilisation of a new long-term contract.

4.11. The Fire Safety Team lost an additional experienced resource who was brought in as part of the Voluntary Undertaking, due to budget pressures and focus on reducing agency staff. This post had focused on action closures and was key to ensuring focus by the wider delivery services responsible for action closures. The work is currently being picked up by an existing manager within the Compliance Team; however, this will impact the delivery of other improvements until a new permanent role is recruited under a proposed new structure.

4.12. There are two Fire Safety Surveyor roles within the team that are currently vacant. Two previous agency staff left during 2025, and the Council were able to recruit one permanent surveyor during that year. Unfortunately, that surveyor left in early 2026 and the Council have been unable to replace them through permanent or fixed term recruitment and this route must be exhausted through repeat attempts before re-engaging agency staff can be considered again. The Council are therefore currently relying on Fire Safety Consultants to cover aspects of work that surveyors would otherwise deliver including specifications for works and quality assurance for action closures.

4.13. Work on closures, along with revised Fire Risk Assessor working practices in the latter half of this financial year, will reverse the current trend and further reduce the overall number of actions.

Notice of (fire safety) deficiencies

4.14. A Notification of Fire Safety Deficiencies (often called a Notice of Deficiency or NOD) is an informal, written document issued by the London Fire Brigade (LFB) after a fire safety inspection. Whilst not a 'legal' notice, it identifies breaches of the Regulatory reform (Fire Safety) Order and sets out suggested remedial actions and a timescale for follow up inspections.

4.15. There are currently 22 blocks managed by the Council with a Notice of Deficiency (NOD) of which:

- Three are on blocks due for demolition at Love Lane
- Two are currently going through Building Safety Regulator's Gateway process, which are Kenneth Robins House and Thomas Hardy House, for door replacements as part of the better homes programme
- Fifteen cover the blocks at Hamilton Close which are prioritised this year in the fire door programme
- Two are currently in the tender process for works due to complete early in 2027.

4.16. The Council maintains dialogue with the LFB enforcement team who are made aware of the work and programmes regarding the above buildings through direct contact and updates from the Fire Safety Manager.

5. Governance and reporting arrangements

5.1. FRAs, FRA Actions and mitigations are reported to and discussed at Housing's internal Building Safety and Compliance Board monthly, and the Corporate Property Compliance Board quarterly. However, prior to the RSH inspection, whilst FRA performance was included within the Housing Key Performance Indicator (KPI) information, the resulting actions were not. FRA actions performance was previously a part of the KPI information however it was not included from the beginning of 2025/26 although FRA actions continued to be reported to the Building Safety & Compliance Board. This was agreed by the Housing Senior Management Team and the reasoning behind this will be further explored during the review on transparency around FRA actions.

5.2. This is particularly relevant as the Housing KPIs are circulated to varying internal senior officer and/or members boards, such as Housing Board, Housing Improvement Board, and the Resident Voice Board, in addition to public committees such as the Housing, Planning and Development Panel. All of these boards and committees are a key part of providing sufficient scrutiny and

assurance and in the absence of being provided with information on FRA actions their ability to do so has been limited.

5.3. This has since been rectified and FRA Actions since June 2026 are now reported on as part of the Housing KPI information to ensure sufficient senior officer and member oversight. Responsibility for FRA compliance and oversight ultimately sits with the Chief Executive as outlined in the Fire and Structural Safety Policy. As the Council's Responsible Person under the Regulatory Reform (Fire Safety) Order 2005 and Principal Accountable Person under the Building Safety Act, the Chief Executive is responsible for ensuring that appropriate governance arrangements and sufficient resources are in place to enable the effective delivery of fire and structural safety measures.

6. Fire Risk Action Delivery and Recovery Plan

6.1. The delivery and recovery plans to reduce all types of overdue actions and to prevent any new backlog is set out below, formed primarily of 4 strands as follows:

a) Management - Allocated to Housing Management, to engage with residents and notify, advise, prevent, and/or enforce tenancy breaches where necessary, to remove or mitigate actions such as clearing communal areas and removing items from balconies.
b) Property - Allocated to Repairs, Asset Management, or Mechanical and Electrical to deliver maintenance, repairs or improvements to the buildings through flexible and appropriate programming and supply chains.
c) Documents and training - To confirm that appropriate documentation and evidence of servicing, inspection or risk assessment, is in pace or is carried out and evidenced as identified by the risk assessor and/or internal audit.
d) Oversight and assurance - Ensuring that responsibility of the programme and the appropriate oversight are clear and the mechanisms in how they will be assured are understood and reviewed through appropriate governance arrangements.

6.2. Tenancy Services and Estates & Neighbourhoods within Housing Management continue to deal with the remaining overdue actions within their remit, which have significantly reduced through increased focus.

6.3. Actions that were not in planned programmes or for housing management were historically delivered by the Repairs services, however due to staff turn-over, the volume of actions, and a lack of supply chain and appropriate management system, the delivery was not sufficient allowing a significant backlog of actions

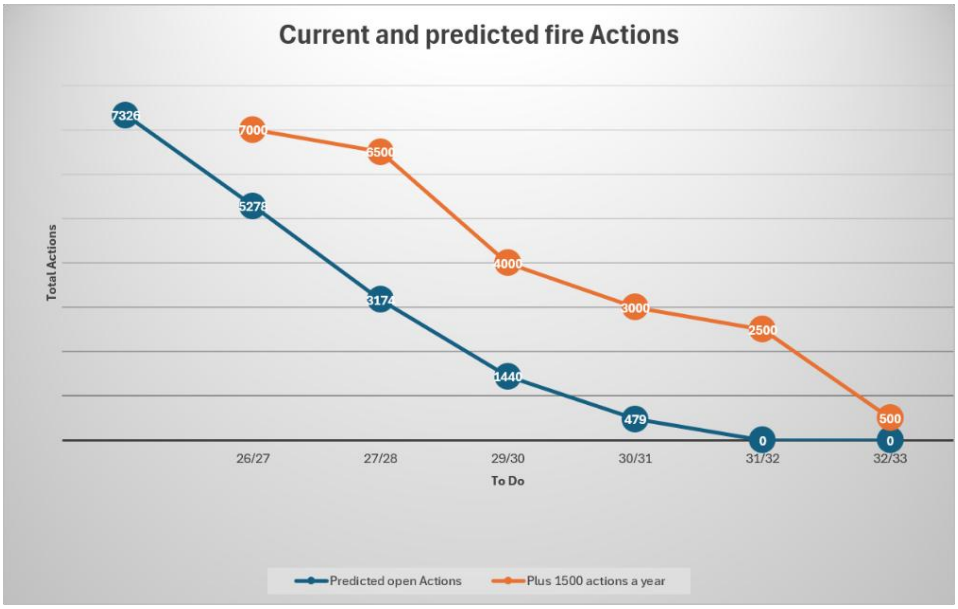
to develop. These actions and the associated backlog have become the responsibility of the Fire Safety Delivery Team who have put in place short to medium term contracts over the past two years to reduce the historic backlog of actions to the current levels.

6.4. Work to procure a long-term FRA works contract is underway to be put in place in 2027 to ensure a more appropriate and flexible delivery of remaining historic overdue actions and newer actions within the target timescales. This long-term contract will deliver any remaining overdue non-major works actions from the current backlog but will also ensure capacity to deliver new actions within their intended timescales.

6.5. Planned programme actions are allocated to either the Fire Door or Automatic Fire Detection programme but are also delivered by Asset Management or the Fire Safety Team as part of the Better Homes Investment Programme.

6.6. The total number of FRA actions within a planned programme is 5,764, of which 67% are overdue. Please see Appendix B for more detailed information by workstream.

6.7. For the planned programmes, the projected profile for the completion of all current actions by project is provided in Appendix C. The below graph outlines the reduction profile of FRA actions on delivery of the planned programmes, allowing for new actions raised over this time.



7. Mitigations to manage the risk to residents

<u>Day-to-day management</u>

7.1. The Council adopts a risk-based approach to fire safety, with enhanced fire risk assessments undertaken in higher risk category buildings as defined by the Building Safety Regulator, which is at least 18 metres high or have at least 7 storeys (measured from ground level to the floor surface of the top storey), and contains at least 2 residential units. They will also undergo regular inspections by Building Safety Managers to monitor compliance and identify emerging issues. Additional controls include building-specific fire safety information for residents, permit-to-work arrangements for contractors, and targeted fire safety communications to raise awareness of resident responsibilities.

7.2. Key measures include:

- Type 3 and Type 4 FRAs in HRBs where required
- Monthly formal inspections of HRBs by Building Safety Managers
- Permit-to-work processes introduced to manage fire safety risks during works
- Resident fire safety information displayed on dedicated noticeboards and communicated through dedicated resident engagement strategies for HRBs, newsletters and the Council website
- Ongoing partnership with the LFB to provide home fire safety visits, particularly for vulnerable residents and HRBs.

7.3. A programme of Person-Centred Fire Risk Assessments (PCFRA) and Residential Personal Emergency Evacuation Plans (PEEP) in line with the Fire Safety (Residential Evacuation Plans) (England) Regulations 2025 has been implemented for HRBs and buildings of more than 11m in height that operate a simultaneous evacuation strategy, and buildings where fire risk assessments are identified specific issues are prioritised. The Council have committed to completing PCFRAs and PEEPs with residents in other types of buildings subject to the dedicated role outlined in paragraph 7.11. More information on this process is provided from paragraph 7.7.

7.4. Fire alarm systems are tested weekly for properties with communal fire alarm systems and maintained in accordance with British Standards, with temporary alarms, revised evacuation arrangements and Waking Watch services deployed where immediate risks require additional mitigation.

7.5. Estate and tenancy management functions support fire safety by maintaining clear communal areas, addressing hazards, enforcing tenancy conditions, and engaging residents. Inspection frequencies are increased where risks are identified, supported by resident engagement, targeted enforcement activity and CCTV monitoring.

7.6. Key measures include:

- Enforcement of the Clear Communal Areas Policy (CCAP), supplemented by Safer Estates CCTV monitoring
- Removal of refuse and management of fire safety concerns in communal areas
- Zero-tolerance enforcement of combustible materials stored on balconies
- Formal annual estate inspections, plus quarterly and weekly inspections all by different job roles
- Resident engagement through forums, letter drops, and tenancy handbooks to promote fire safety compliance.

7.7. The Council's Housing Fire Safety Team maintains a fire incidents log which enables the team to recall events notified to them by either teams within the Council and/or the LFB. This is not currently used as a tracker to follow activities associated with the incident from initial notification or to set out or collate any learning for reasons as set out below. Instead, tracking and implementing learning outcomes and improvements is done in several ways.

7.8. Firstly, incidents will initiate a review of the Fire Risk Assessment (FRA) (as per the Policy). The review of an FRA will be carried out on the following triggers:

- Following a fire
- Following a change of use or occupancy type
- Following a significant change of fire safety legislation or code of practice
- In any case, tolerable buildings will undergo a desktop review in year two.

7.9. The Risk Assessor or the Manager will undertake an initial desk-top review involving cross referencing the cause and effect of the fire to ensure it remains fit for purpose. This is often only available if and when shared by the LFB. The review would not necessarily result in any update or re-write of the FRA unless a significant gap or issue is identified. The Council also ensures that current Electrical, gas and where applicable, other inspection certificates are in place and reviewed accordingly.

7.10. FRAs are all written in accordance with the relevant industry standard (PAS79) and undergo a quality assurance review on production and are re-done every 12 months in all but very low-risk buildings.

7.11. As part of incident management, the Fire Safety Team review any outstanding actions to confirm if the action was in any way connected with the fire. They will also review the Electrical and Gas certificate where applicable. In serious cases such as what happened at Kenneth Robins House in 2023, Emergency Planning procedures are initiated, and these cases involve a formal case management and oversight with a de-brief and recommendations are identified toward the

end of the process. Where appropriate such issues are escalated through silver and gold levels.

7.12. The primary driver for any more detailed review or improvement actions at team level, comes from the LFB who produce an incident report which they publish and is reviewed when available. Issues that affect either the management of the building or the management of tenancies is evaluated and appropriate action taken.

7.13. In the event the LFB have any concerns regarding the Council's buildings or their management of them, they will contact the Council directly and either advise of what they have found and make advisory suggestions or follow this up formally via a Notice of Deficiency.

Managing personal circumstances and evacuation

7.14. In accordance with the Fire Safety (Residential Evacuation Plans) (England) Regulations 2025, applicable from 6 April 2026, the Council, as the responsible person for higher-risk residential buildings has sought to:

- Identify residents who may struggle to self-evacuate
- Offer a Person-Centred Fire Risk Assessment (PCFRA)
- Agree an emergency evacuation statement known as a Personal Emergency Evacuation Plan (Residential PEEP) where appropriate
- Review arrangements regularly.

7.15. A PCFRA is an assessment focused on the individual resident rather than the building. It considers how a person's health, mobility, behaviour, support needs, vulnerabilities or living circumstances may affect their fire risk and ability to respond to an emergency. 168 PCFRAs have been completed since April 2026 with low number of mitigations. Although the Council has written to all residents in the 53 HRBs previously, the response has been low. This is because there is no legal requirement for residents to notify their landlord and/or engage in completing risk assessments. The Council's approach is outlined in paragraph 7.10.

7.16. A PEEP is a personalised plan that sets out how a person who may have difficulty evacuating a building will get to safety during an emergency, such as a fire. It is tailored to the individual's needs and identifies any assistance, equipment, or arrangements required. In summary, the PCFRA identifies the risk, while the PEEP records the evacuation solution.

7.17. PCFRAs and PEEPs are offered at the point a tenant signs their tenancy, at tenancy audits, and if officers recognise that one is needed on any visit then tenants are encouraged to partake. In addition, these risk assessments are reviewed when 12 months old or sooner should circumstances require,

supplemented by vulnerability data. Going forward, there is a rolling quarterly programme to review all PCFRA's and PEEPs so that annual reviews and arising actions are implemented in a timely manner. The Council is writing to all residents in November 2026 residing in HRBs, to invite an annual review of their PCFRA and PEEP or carry out new assessments where needed. This will be cross checked with tenant vulnerability records to ensure follow up with known vulnerable residents.

7.18. The Housing Management team has received allocated grant funding for a new post, titled Building Safety Housing Officer, to manage the PEEPs and PCFRA process and increase uptake as these are currently completed by Housing Officers with other tenancy management responsibilities. Interviews are taking place in the first week of November. Tenancy Management and Building Safety will be accelerating the work on these fire risk assessments over the next few months following recruitment. This post will directly respond to requests received and own the plan to manage new assessments and reviews to ensure compliance.

Specific mitigations

7.19. Blocks with outstanding fire risk actions are actively managed through a range of measures including enhanced oversight, in the form of new or increased inspections by Building Safety Managers (BSM) and Estates Services Staff, strengthened resident engagement through provision of fire safety advice, information about fire door safety, building specific Resident Engagement Strategies and Building Safety Noticeboards in high rise buildings which confirms contact details for the BSM.

7.20. Building Specific Resident Engagement meetings have been held regarding the Fire Door replacement programme, with an FAQ document being issued regarding the door replacement process, and the Council's dedicated resident Liaison Officer will be regularly visiting sites during the programme; holding 'surgeries' and knocking on doors to both support access and offer any advice and support and/or address any concerns. This is aimed at ensuring residents are both informed, able to raise any concerns directly with the delivery teams and feel safer in the knowledge that the work is progressing and will enhance the safety of their home. Residents involved in smaller programmes of work, receive direct communications and written information and advice about their programme, and are provided with direct contact details for the relevant project manager or staff member.

7.21. The following provides information on specific buildings where additional mitigation has been put in place to reduce the risk presented by the known fire risks identified during the risk assessment. Not all buildings with known risks require additional mitigation as the existing structure, layout, use, evacuation

strategy, and management arrangements, including for example on going gas and electrical safety checks may be considered suitable.

7.22. The below examples set out mitigations in buildings where specific issues identified, required additional mitigation over and above the standard safety management systems that are in place: Daily monitoring is also in effect with estate services operatives actively monitoring the communal area and associated CCAP Policy, ensuring expedient reporting of any adherence issues.

Stellar House

7.23. Following an assessment of the external walls and testing of the window panels (spandrel panels) and a further review of the FRA taking these tests into account, the evacuation strategy for Stellar House was changed from 'Stay Put' to Simultaneous Evacuation in 2022, in consultation with the LFB and the residents.

7.24. These changes initially required the implementation of a Waking watch until the installation of a comprehensive fire alarm system was completed in 2023, which is tested, serviced, and maintained by competent engineers. Monthly block inspections are carried out by a qualified Building Safety Manager have also been implemented.

Moselle, Charles, and Ermine House

7.25. Fire safety actions to the buildings include the need to upgrade fire doors however the buildings are also being decanted for future regeneration which the LFB are aware of. Due to this, heightened anti-social behaviour and unauthorised access into void properties across the estate was identified, posing additional fire safety risks.

7.26. Security and safety measures were implemented and included boarding up all windows and doors of all vacant flats and capping gas and water utilities in over 100 properties. These proactive measures have significantly reduced unauthorised break-ins, while mitigating the secondary risks of gas leaks or water damage.

Northumberland Park and Broadwater Farm

7.27. This area compromises of 13 blocks, of which two are HRBs. To address high levels of ASB and unauthorised entry, enhanced security infrastructure has been deployed across these locations. The Safer Estates CCTV network has been upgraded to improve oversight, as well as standard drop-key functions being removed and replaced with high-security Gerda emergency access boxes.

7.28. The Metropolitan Police have granted formal closure orders for the communal areas and provide law enforcement with the powers of arrest for any individuals loitering inside the communal areas without a legitimate reason. This is also

supported by the Neighbourhood Patrol Service who are deployed in this area to identify issues, contact Police, and reassure residents.

Hamilton Close

7.29. Following more intrusive risk assessments, due to the timber-framed construction of the block the evacuation strategy transitioned to a simultaneous evacuation strategy in January 2025. During the critical period between notification and the final installation of the active fire alarm systems started in January 2025, the Council deployed a 24/7 waking watch to guarantee immediate resident safety.

7.30. Similar blocks (Ben Tillet House and Leabank View) did not require this change of strategy, however increased surveillance with estates operatives and raising resident awareness of the risk by letters have been sufficient mitigation when considering other aspects of these buildings and their use.

Campbell Court

7.31. A breach of the sprinkler system was identified in August 2025 and was reported directly to the Building Safety Regulator via a Mandatory Occurrence Report. The breach directly compromised the building's sprinkler system, creating a risk of rapid-fire spread.

7.32. Due to the severity of the infrastructure failure, a waking watch and dedicated security team were immediately stationed at the block. This mitigation remained actively in place for several days until specialised replacement parts were sourced, delivered, and fitted.

8. Resourcing and finance

Finance

8.1. The Housing Revenue Account (HRA) capital and revenue budgets will ensure delivery of the programmes, such as the fire door programme, to close actions and improve council homes for 2026/27, and future budget and resource requirements to continue delivery of the reduction programme have been identified and put forward as part of budget planning for next year. The current projected spend on fire safety across both revenue and capital investment for the current financial year to March 2027 is approximately £9.5m.

Fire and Building Safety Staffing Resources

8.2. There are a number of Fire Safety related dedicated roles within the Building Safety Team. The team is responsible for ensuring compliance with fire safety, asbestos management and building safety legislation across the housing portfolio, delivering risk assessment programmes, managing remediation works, maintaining building safety records, supporting resident engagement and providing assurance that homes remain safe for residents.

8.3. Fire and Building Safety is a corporate, all staff and resident responsibility. However, the team responsible for leading on this life safety critical service area sits with the Repairs & Compliance department of Housing. The department is led by the Assistant Director of Repairs & Compliance supported by the Head of Residential Building Safety. Three sections with the team comprise of a Fire Safety manager, a Fire Safety Programmes manager and a Senior Building Safety Manager. These managers and their specialist technical teams ensure the Council remain compliant primarily with the Building Safety Act, The Fire safety Act, and The Regulatory Reform (Fire Safety) Order.

8.4. The teams are supported by in-house fire risk assessors, and third-party specialist Fire Safety Consultants who both undertake the Council's residential Fire Risk Assessments, provide technical guidance and advice, undertake quality assurance inspections and support the specification, procurement and delivery of fire safety investment programmes.

8.5. Those involved in the programmes are required to hold or achieve minimum levels of qualification such as NEBOSH Fire Safety certificate and/or CIOB Level 6, Fire & Building Safety. Senior leaders hold relevant degree level qualifications and are required to demonstrate suitable and creditable experience and knowledge of their subject area and hold a membership of a relevant professional body.

8.6. Leaders and managers are encouraged in active attendance and involvement in sector events, technical briefings, seminars, and conferences as part of their continued professional development and to ensure the Council remains well informed and up to date on current relevant statutory duties, legislation and regulatory requirements and thereby ensure policies and procedures are fit for purpose.

9. Risk

9.1. The below tables outline the risks to the management and delivery, the FRA programme, existing safety measures and/or action remediation programmes.

ID	Risk	Impact	Controls	Further Actions	Owner
FS 01	Fire risk assessments overdue	Regulatory breach, lack of understanding and potential risks to residents	Program monitoring; FRA policy process & Procedure and a mix of in-house and outsourced resource.	Minimise overdue FRAs due to no-access where non-suited or additional locks have been installed through appropriate process and programme planning.	Fire & Asbestos Safety Manager

FS 02	Actions not completed	Resident harm; enforcement action	Action tracking system, delivery programmes, and implementing appropriate mitigations where necessary and advised or agreed with the Risk Assessor and/or LFB	Monthly reporting and recovery plan, allocation of additional resources where required, and interim mitigation measures.	Head of Residential Building Safety
FS 03	Defective fire doors	Compartment ation failure	Inspection program and carrying out minor repairs/upgrades	Replace failed or non-compliant doors to achieve modern standards	Fire Programs Manager
FS 04	Compromised compartmentat ion	Rapid fire spread	Surveys, inspections and immediate remediation where possible	Targeted remediation and inclusion in wider major works programmes	Fire Programs Manager
FS 05	Emergency lighting and/or fire detection and alarm systems failure	Unsafe evacuation	Planned maintenance and component replacement	Upgrade legacy systems to current standards	Electrical Contracts Manager
FS 06	Communal area obstruction	Blocked escape routes	Estate inspections, contravention notices issued and items removed	Resident engagement, advice and guidance	Estates Services Manager
FS 07	Resident non-compliance	Increased fire likelihood	Tenancy engagement and where necessary, enforcement	Fire safety campaigns	Tenancy Services Manager
FS 09	Inaccurate, incomplete and / or out of date compliance data	Poor oversight, assurance and reporting	Data capture and validation	System improvements for integration, functionality and reporting.	Compliance Performance & Data Manager.

9.2. Whilst there are many types of risks identified across the Council's Housing stock, the above represents how the majority of actions are managed, remediated and/or where applicable, mitigated. For example, there has been no external wall fire safety failures requiring mitigation other than one block which was identified and mitigated in 2022.

9.3. It should also be noted that the work around fire safety and the reduction of FRA actions will overlap with the wider improvement actions taken by the Council in response to the RSH's regulatory judgement and associated reviews. Work around fire safety and compliance more widely will be aligned with the wider Transformation Plan but progress in these areas will not be delayed and it remains a key priority.

10. Use of Appendices

10.1. Appendix A – Table demonstrating total actions, overdue actions totals and by risk, and the proportion of actions allocated to planned programmes.

10.2. Appendix B – All actions and high-risk overdue actions by workstream and quantity

10.3. Appendix C – Planned major works delivery programme

11. Background papers

11.1. The Council's Fire and Structural Safety Policy May 2025: https://haringey.gov.uk/sites/default/files/2025-05/fire-and-structural-safety-policy.pdf

Appendix A – Table demonstrating total actions, overdue actions totals and by risk, and table showing the proportion of actions allocated to planned programmes.

Overdue figures **excluding** those assigned to the Major Works investment programme (AKA the Better Homes, Fire Door and other planned programmes)	**Total – all actions**	**Total Overdue**	**High Risk overdue**	**Medium Risk overdue**	**Low Risk overdue**
Position at end of September 2026	7,898	759	437	314	8
Position at end of September 2025	14,138	3,065	756	2,074	235
Position at Self-Referral on 24th January 2023	19,105	8,237	4,120	2,529	1,588
Position reported for Pennington's Health Check - December 2022	18,762	8,378	4,432	2,460	1,486

Planned programmes (major works) by Risk Level and Overdue			
Risk Level	**Planned**	**Planned Overdue**	**% Overdue**
High	1,492	1,224	82%
Medium	3,450	2,485	72%
Low	822	171	21%
Totals	**5,764**	**3,880**	**Average - 67%**

Appendix B – All actions and high-risk overdue actions by workstream and quantity

NOTE: Numbers may fluctuate slightly between tables due to the system numbers changing on a live basis.

All actions by workstream and quantity:

High-Level Category	Included Workstreams	Total Actions	Completion Year
Fire Doors & Compartmentation	Communal Door Replacement, Communal Door Repair, Fire Stopping Install, Loft Compartmentation Work, Air Transfer Grilles/Fire-Rated Dampers, Fire Rated Enclosures	2,750	2030
Fire Detection & Alarm Systems	Automatic Fire Detection Install, Automatic Fire Detection Repair, Fire Alarm Install, Fire Alarm Repair Replace, Smoke Domestic Install, Smoke Domestic Repair Replace	547	2029
Emergency Lighting & Electrical Safety	Emergency Lighting Install Survey, Emergency Lighting Repair, PAT Testing, Mechanical & Electrical (Electrical Team), Electrical Repairs	682	2029
Means of Escape & Fire Safety Measures	Flat Entrance Door Replacement, Flat Entrance Door Repair, Notices & Signage, Communal Clearance, Security Gates & Grilles	2,708	2030
Building Fabric & General Repairs	General Repairs, Glazing Repairs, Flooring Repairs, Communal Redecorations, Bin Chutes, Staircase Maintenance	426	2028
Mechanical & Building Services	Mechanical & Electrical (Mechanical Team), Mechanical & Electrical (Gas Works), Lifts	126	2028
External Wall / Cladding	External Wall Cladding	33	2030
Management & Administrative Actions	Technical Review, Resident Contact, Staff Training, Person-Centred Fire Risk Assessment (PCFRA)/ Personal Emergency Evacuation Plan (PEEPs), Premises Information Boxes (PIBs)	457	2027
Total		**7,729**	

High-Risk Overdue actions by work stream:

Category of high risk actions	Included Workstreams	Total Actions
Fire Doors & Compartmentation	Communal Door Replacement, Communal Door Repair, Fire Stopping Install, Loft Compartmentation Work, Air Transfer Grilles/Fire-Rated Dampers, Install Fire Rated Enclosure	453
Fire Detection & Alarm Systems	Automatic Fire Detection Install, Automatic Fire Detection Repair, Fire Alarm Install, Fire Alarm Repair Replace, Smoke - Domestic Install, Smoke - Domestic Repair Replace	405
Emergency Lighting & Electrical Safety	Emergency Lighting Install Survey, Emergency Lighting Repair, PAT Testing, M&E Electrical, Electrical Repairs	62
Means of Escape & Fire Safety Measures	Flat Entrance Door Replacement, Flat Entrance Door Repair, Notices and Signage, Communal Clearance, Security Gates & Grilles	520
Building Fabric & General Repairs	General Repairs, Glazing Repairs, Flooring Repairs, Bin Chutes Install, Bin Chutes Repairs	56
Mechanical & Building Services	M&E Mechanical, Lifts	12
External Wall / Cladding	External Wall Cladding (Fire Risk Assessments of External Walls)	12
Management & Administrative Actions	Technical Review, Resident Contact, Staff Training, Person Centred Fire Risk Assessment/Personal Emergency Evacuation Plan, Premises Information Boxes	164
Total		**1,684**

Appendix C – Planned major works delivery programme

		Closed actions per year					
Programme	**Total number of Actions**	**26/27**	**27/28**	**29/30**	**30/31**	**31/32**	
AFD Install - (Awaiting Tender)	383		100	100	100	83	
AFD Repair	11	11					
Air Transfer Grilles/Fire-Rated Dampers	64	10	15	15	15	10	
Bin Chutes Repairs/Install	7	7					
Communal Clearance	161	60	60	41			
Communal door repair	652	100	300	300	52		
Communal door replacement	856	100	250	250	129	125	
Communal Redecorations	97		25	25	25	25	
Electrical Repairs	18	18					
Emergency Lighting Install Survey	603		150	150	150	153	
Emergency Lighting repair	13	13					
FRAEW	35	10	25				
Externally managed building	15	15					
FED Repair	214	60	100	54			
FED Replacement	1205	100	400	400	305		
Fire Alarm Install	90	30	30	30			
Fire Alarm replacement	32	10	22				
Fire rated enclosures	1	1					
Fire Stopping	470	70	100	100	100	100	
Flooring Repairs Replacements	66	20	46				
General Repairs	113	40	73				
Glazing - broken cracked damaged missing	102	40	62				
Install fire rated enclosure	358	58	150	150			
Lifts	11	11					
Loft Compartmentation work	225	20	50	50	50	55	
M&E	154	60	60	34			
Notices and Signage	646	646					
PAT Testing	39	39					
PCFRA/PEEPS	4	4					
Resident Contact	17	17					
SIB & PIB Box	84	44	40				
Smoke Domestic install or replace	31	20	11				
Staff Training	19	19					
Staircase Maintenance Inspections	31	31					
Tech Review	329	329					
Blank to be allocated	170	35	35	35	35	30	
Total Actions - closed actions	7326	2048	2104	1734	961	581	
Year		26/27	27/28	29/30	30/31	31/32	32/33
Predicted open Actions	7326	5278	3174	1440	479	0	0
Plus 1500 actions a year		7000	6500	4000	3000	2500	500

