



SOUTH KESTEVEN DISTRICT COUNCIL

Housing Compliance - Gas, Electrical, Legionella, Asbestos and Fire Safety

Internal Audit Report 3.20/21

FINAL

20 October 2020

This report is solely for the use of the persons to whom it is addressed.

To the fullest extent permitted by law, RSM Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party.

EXECUTIVE SUMMARY

Why we completed this audit

With the use of secure portals for the transfer of information, and through electronic communication means, remote working has meant that we have been able to complete our audit and provide you with the assurance you require. It is these exceptional circumstances which mean that 100 per cent of our audit has been conducted remotely. Based on the information provided by you, we have been able to sample test.

A review of Housing Compliance - Gas, Electrical, Legionella, Asbestos and Fire Safety was undertaken at South Kesteven District Council as part of the approved internal audit periodic plan for 2020/21.

In 2019 the Council's Housing Development and Improvement department and the Repairs department were combined to form the Improvement and Repairs Team. This team was led by the Head of Improvement and Repairs. This position is currently vacant. The Housing directorate is currently led by the Interim Assistant Director – Housing.

The Council's housing compliance safety checks are managed by the Improvement and Repairs Team. The Improvements Team is led by the Improvements Manager and the Repairs Team is led by the Repairs Manager.

Fire safety, legionella, asbestos and gas safety are managed by the Improvement Team and the checks/servicing is undertaken by Council appointed contractors. The electrical safety checks are the responsibility of the Repairs Team.

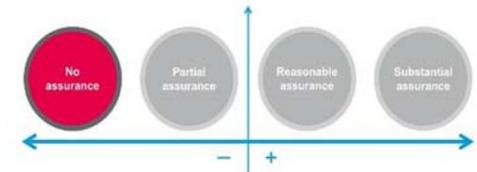
A stock condition database and the asbestos register are maintained on a bespoke system. The gas, solid fuel, oil fuelled, legionella, electrical and fire safety checks/servicing programmes are managed and maintained on excel spreadsheets.

Conclusion

This review has confirmed that the Council does not have adequate controls for housing compliance - gas, electrical, legionella, asbestos and fire safety in place. We identified gaps in the control framework and weaknesses in adherence to the controls for managing housing compliance safety checks and have agreed seven 'high', eight 'medium' and one 'low' priority management actions. Further details are provided in Section 2 of this report.

Internal audit opinion:

Taking account of the issues identified, the Council cannot take assurance that the controls upon which the Council relies to manage this risk are suitably designed, consistently applied or effective. Action needs to be taken to ensure risks relating to housing compliance safety checks are effectively managed.



Key findings

We confirmed that the following controls are operating effectively in practice:



The supply and provision of high visibility jackets for Fire Wardens are the responsibility of Corporate Operations to co-ordinate centrally. Personal protective equipment stocks are not maintained and are ordered on an individual basis;



The objective of the Housing Asset Management Strategy is to guide the future shape and direction of the Council's housing assets to ensure they meet corporate objectives and customer expectations and sets out the frequency of housing compliance safety checks;



Right to Buy applications and all relevant works carried out on void properties are notified to the Stock Database Officer to update the stock condition database. The Stock Database Officer then notifies all the relevant staff in the Improvement and Repairs Team; and



The gas programme is managed by the gas contractor although the gas safety programme is maintained by the Council on a spreadsheet and includes the last safety check and the next safety check due date.

We identified the following findings where management actions were agreed:



For solid fuel, fire safety and legionella, the programme is held on a spreadsheet. The spreadsheets do not include key information like the last safety check, next safety checks and any notes relating to remedial actions or access to the property; (High)



For electrical testing, it was noted a testing programme for 2020 has not been implemented. The housing management system and the stock condition database is not reconciled to the housing compliance safety checks/servicing programmes to ensure that every property is accounted for; (High)



For sheltered accommodation/communal areas, fire alarm testing, extinguisher checks and emergency lighting checks are undertaken. On matching the fire alarm testing, extinguisher checks and emergency lighting checks programmes, eight sheltered accommodations/communal areas were identified where one or more of these checks was not being undertaken; (High)



For gas, electrical, fire safety and legionella a log of remedial actions (further actions/improvements required) is not maintained and testing at this visit has highlighted that the further actions/improvements required are not always followed up, an audit trail is not always maintained of actions taken if any and monitoring is not undertaken to ensure that the remedial actions identified have been actioned; (High)



Certificates/servicing records for the housing compliance safety checks undertaken are not maintained in a central location. For example, the electrical certificates may be retained by Repairs or by the Improvement Team within their project files. For a sample of 20, in six cases the electrical certificates were not provided to us and in 12 cases the electrical certificates for works carried out at the property were provided instead of the actual electrical testing certificates; (High)



An external contractor undertook the fire risk assessments in 2017. Currently there are no arrangements in place (a contract with a fire safety contractor is not in place for this service). The previous management action identified, in our February 2019 audit report, the need for full survey and risk assessments of the fire integrity of sheltered accommodation to be undertaken yet in this audit it has not been undertaken. Council policy requires fire risk assessments to be reviewed annually, however we noted that the fire risk assessments have not been subject to this annual review in 2020; (High)



Senior Management and the Council are not provided with regular reports (and core KPI data) on the performance of housing compliance safety checks; (High)



An up to date Housing Asset Management Strategy is not in place. The last Asset Management Strategy was prepared and approved in 2013 and covered the five year period between 2013 and 2018; (Medium)



Up to date housing compliance safety checks policies and procedures are not in place; (Medium)



Training/refresher training records for the Improvement Team was not maintained up to date at the time of the audit; fire awareness training was started by three members of staff in July 2019, February 2020 and July 2020 however this has not been completed; monitoring of training is not undertaken to ensure the training matrix/training records is maintained up to date; (Medium)



Fire safety testing identified that for a sample of five blocks: in 16 cases the fire alarm testing was undertaken between four and 14 days after the last test and in two cases the fire alarm servicing was undertaken at every three months instead of every six months. For fire alarm servicing, fire extinguisher servicing and emergency lighting testing the spreadsheets do not always include the date of the previous visit and test; (Medium)



For a sample of 20 properties, testing of solid fuel checks identified that in one case access to the property has not been gained since 2018 and in two cases was not gained in 2019. For the two properties with oil fuel the contractor highlighted that the tanks were too close to the fence/house. An escalation process is not in place and it could not be established if any review/action was undertaken; (Medium)



Internal quality assurance audits are not undertaken on housing compliance safety checks/servicing to assure the works undertaken by the operatives/contractors; (Medium)



A review of the Asbestos Register identified 1,675 property records where the records are documented as active however no further details are recorded for the properties; (Medium)



On completion of asbestos surveys, the contractor provides the Council with a PDF of the survey report, however the results of the survey are only uploaded to the Asbestos Register when the spreadsheet is received from the contractor every three months. For repairs, on testing information being provided to operatives and contractors it was noted that asbestos is not flagged on the housing system and as a result for each repairs job the staff are required to check manually for the most up to date asbestos information; (Medium) and



The Council's web page does not include information on safety in the home regarding legionnaires disease, preventing mould, damp and condensation, annual gas/other fuel servicing, and asbestos. (Low)

DETAILED FINDINGS AND ACTIONS

This report has been prepared by exception. We have therefore only included in this section those areas of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	The last safety check and next safety check date are clearly identified within the property system or similar for each property and can be used to identify those properties requiring checks.	Assessment:	✓	
		Design	✓	
		Compliance	x	
Findings / Implications	<p>There is currently no spreadsheet for the electrical safety check programme.</p> <p>For the gas safety check programme managed by the gas contractor the gas programme is maintained on the Project Sheet Gas Servicing spreadsheet and includes the last safety check and the next safety check date.</p> <p>For solid fuel, fire safety checks and legionella, the housing compliance safety checks/servicing programmes are maintained as project sheets (as used in Improvements for major works) and as a result key information such as the last safety check, next safety checks and any notes relating to remedial actions or access is not recorded on these spreadsheets.</p> <p>The Council's oil fuelled properties are not recorded on a spreadsheet as there are only two properties and these are serviced by the gas contractor. Where key information such as the last safety check and next safety check is not recorded on spreadsheets containing the housing compliance safety checks/testing programmes, there is a risk that the housing compliance checks may not be managed effectively resulting in compliance checks not being undertaken within the required timescales.</p>			
Management Action 1	<p>a) The last safety check and next safety check date will be recorded on the housing compliance programmes maintained on spreadsheets.</p> <p>b) The Council will investigate implementing a software system to maintain and manage the housing compliance safety checks/servicing programmes.</p>	Responsible Owner:	Date:	Priority:
		<p>a) Housing Head of Technical Services</p> <p>b) Interim Assistant Director of Housing</p>	<p>a) 31 December 2020</p> <p>b) 31 October 2020</p>	High

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	<p>Missing Control</p> <p>The gas (including solid fuel and oil fuelled), legionella, asbestos, electrical and fire safety programmes/ records are reconciled to the housing management system to ensure that every property is accounted for.</p>	Assessment:		
		Design	x	
		Compliance	-	
Findings / Implications	<p>The gas, solid fuel, oil fuelled, legionella, electrical and fire safety programmes are managed and maintained on excel spreadsheets. For electrical testing, it was noted that currently a programme is not in place.</p> <p>A stock reconciliation was carried out of the stock condition database and the housing system in July 2020.</p> <p>It was noted that the safety programmes are not reconciled to the housing management system and the stock condition database to ensure that every property is account for on the safety programme.</p> <p>For a sample of 20 properties where solid fuel is in use, testing identified that in five cases solid fuel was no longer in use at the properties however the properties were still on the solid fuel programme spreadsheet.</p> <p>There is a risk that for properties where there have been changes for example new properties, change of heating systems, new gas installations etc may not be identified and servicing/safety checks may not take place.</p>			
Management Action 2	<p>a) An electrical testing programme will be implemented</p> <p>b) The Council will agree a frequency at which the programmes will be reconciled.</p> <p>c) The gas, solid fuel, oil fuelled, legionella, asbestos, electrical and fire safety programmes/records will then be reconciled to the housing management system and stock condition database at the agreed frequency.</p> <p><i>Management Comment: Note new compliance system to be acquired and commissioned by December 2020.</i></p>	Responsible Owner:	Date:	Priority:
		<p>a) Housing Head of Technical Services</p> <p>b) Housing Head of Technical Services</p> <p>c) Interim Assistant Director of Housing</p>	<p>a) 31 January 2021</p> <p>b) 31 January 2021</p> <p>c) 31 December 2020</p>	High

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	For sheltered accommodation and communal area fire safety checks, fire alarm servicing, fire extinguisher to blocks and emergency lighting checks are undertaken.	Assessment:		
		Design	✓	
		Compliance	×	
Findings / Implications	<p>The fire safety check programme/records are maintained on three spreadsheets - fire alarm servicing, fire extinguisher to blocks and emergency lighting.</p> <p>The three spreadsheets were matched to ensure that all the fire safety fire alarm servicing, fire extinguisher to blocks and emergency lighting checks are being undertaken at all blocks and/or communal areas.</p> <p>Eight records were identified where one or more of the checks (alarm servicing, fire extinguisher checks and/or emergency lighting) was not being undertaken at the property.</p> <p>There is a risk that where regular reconciliations are not undertaken properties/communal areas that require checks and servicing may be missed resulting in an increased risk of fire.</p>			
Management Action 3	For the eight cases identified a review will be undertaken to identify the checks to be undertaken and they will be undertaken accordingly.	Responsible Owner:	Date:	Priority:
	<i>Management Comment: Note these issues to be resolved by commissioning of new housing compliance software system - operational subject to procurement by December 2020.</i>	Housing Head of Technical Services	31 December 2020	High

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	Actions identified from safety inspections and risk assessments are adequately and accurately recorded and followed up to ensure completion.	Assessment:		
		Design	✓	
		Compliance	×	
Findings / Implications	<p>Testing of housing compliance safety checks/servicing for gas, solid fuel, oil fired, electrical, and fire safety identified that any remedial actions/improvements identified:</p> <p>- A log of remedial actions/improvements is not maintained.</p>			

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- Are not always followed up.
 - Where followed up an audit trail was not always traceable/maintained of actions taken to resolve the action/improvement.
 - The remedial actions/improvements are not monitored to ensure that they have been actioned and on a timely basis.

Fire Safety:

For the sample of five blocks we were not able to establish if the remedial actions identified/highlighted on the fire risk assessment had been acted upon/resolved.

There is an increased fire risk where remedial actions identified are not resolved and on a timely basis.

For one of the sample of five blocks a number of fails were identified on testing the emergency lighting at the December 2019 visit. No evidence was provided to us to confirm the progress made with resolving the failure issues identified and if a retest was undertaken.

There is a risk that the emergency lighting may fail in an event of an emergency.

Electrical:

For a sample of eight sheltered accommodation properties/blocks, testing identified that in two cases no information was provided to confirm that the improvements advised by the operative/contractor had been actioned.

For a sample of 20 tenanted properties no information was provided to confirm if the actions identified in six cases had been actioned.

Gas:

For a sample of 20 properties with gas testing identified that in one case no evidence was provided to confirm the progress made with the remedial works highlighted.

Solid Fuel:

For a sample of 20 properties with Solid Fuel heating testing identified that in one case the fire at the property was condemned as the liner diameter was too small for an open fire. No evidence was provided to confirm the progress made with this and whether remedial work had been completed.

There is a Health and Safety risk where remedial actions/improvements are not actioned.

Management Action 4	<p>a) A log of remedial actions identified for housing compliance safety checks/servicing on gas, solid fuel, oil fired, electrical and fire safety will be maintained documenting the remedial actions, the target date for resolving the actions and the date the actions were resolved.</p> <p>b) This log will be subject to regular monitoring to ensure that the remedial actions are resolved and on a timely basis.</p>	Responsible Owner: Interim Assistant Director of Housing	Date: 31 December 2020	Priority: High
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Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	Where required certificates or similar are held centrally for the gas (including solid fuel and oil fuelled), asbestos, legionella, electrical testing and fire safety checks completed for every property which include the date inspected, outcome and actions due.	Assessment: Design ✓ Compliance ×
Findings / Implications	<p>Sample testing of gas (20), oil fuelled (2), solid fuel (20), electrical safety (tenanted 20 and 5 blocks), fire safety (5 blocks) and legionella records (5 blocks) identified that currently the certificates/servicing records for gas (including solid fuel and oil fuelled), legionella, electrical testing and fire safety checks are not maintained in a central place resulting in the document not being readily available to staff. For example, currently the electrical certificates may be retained by the Repairs Team or by the Improvement Team within their project files.</p> <p>For the electrical testing, of the sample of 20:</p> <ul style="list-style-type: none"> - Certificates for electrical testing was provided for two of the sample. - For six of the sample the certificates were not provided. - For the remaining 12 the certificates provided were for electrical works undertaken at the property instead of the electrical testing certificates. <p>There is a risk that the Council may be unable to evidence that the housing compliance safety checks had been carried out and also the information is not readily available to the staff.</p>	
Management Action 5	Certificates/servicing records for gas (including solid fuel and oil fuelled), legionella, electrical testing and fire safety will be maintained on a central location on the server and will be made available to all the appropriate staff.	Responsible Owner: Repairs Manager and Housing Head of Technical Services Date: 31 December 2020 Priority: High

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	Risk assessments (fire and asbestos) are carried out, are maintained up to date and are made available to all interested parties.	Assessment: Design ✓ Compliance ×
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**Findings /
Implications**

An external contractor undertook the fire risk assessment for the Council in 2017.

For a sample of five fire risk assessments, testing confirmed that the validity of the risk assessment was stated on the document as one year from the date of the risk assessment, for example 14 February 2017 to 14 February 2018.

The Council's fire safety procedure states the Council will "*ensure that fire risk assessments are reviewed annually and that new baseline assessments are provided within agreed interval periods*".

Subsequent to the audit, two examples of the annual fire risk assessments were provided however it was noted that were dated May and June 2019.

The Improvements Manager advised that they are planning to carry out new fire risk assessments in the new year therefore no reviews were required this year. This is not consistent with the Council's fire safety procedures which states the Council will "ensure that fire risk assessments are reviewed annually".

There may also be an increased risk of fires occurring where risk assessments are not reviewed annually as required.

Our audit report on Fire Safety dated 11 February 2019 included findings regarding fire risk assessments and stated in the report that:

"A full survey and risk assessment of the fire integrity of sheltered accommodation and flats is being commissioned to provide reassurance that a Stay Put policy is achievable and the most suitable option. As such, the 2018 FRAs have not yet been undertaken.

Until the intrusive survey has been completed and the results assessed there is a risk that the existing Stay Put policy is not the most suitable course of action for residents to take at properties where it is currently implemented. This could lead to residents sustaining injuries if they follow a policy which may not be the most suitable for their property."

The management action agreed at the time was:

"The Council is already working to identify a contractor to undertake the intrusive property surveys. A suitable contractor will be sourced as soon as possible to enable the surveys to commence. The Stay Put policy will be amended for each property based on the findings of the survey."

During this audit it was confirmed that no progress has been made with this. There is no current contract/arrangements in place for fire risk assessments.

There is a risk of non-compliance to fire safety where the Council does not have a qualified member of staff, or a fire safety contractor is not engaged, to provide advice and guidance on fire safety and to undertake the fire risk assessments.

Management Action 6	a) The Council will implement a contract for fire safety.	Responsible Owner: a) Repairs Manager and Housing Head of Technical Services b) Repairs Manager and Housing Head of Technical Services c) Housing Head of Technical Services	Date: a) 31 January 2021 b) 31 October 2020 c) 31 December 2020	Priority: High
	b) A full survey and risk assessment of the fire integrity of sheltered accommodation and flats will be arranged.			
	c) Going forward the fire risk assessments will be subject to annual review.			

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	Missing Control Senior Management and the Council are regularly and accurately briefed on the Council's compliance with health and safety regulation.	Assessment:	
		Design	×
		Compliance	-

Findings / Implications

Performance on Housing Compliance - gas, electrical, legionella, asbestos and fire safety are reviewed and monitored by management. It was also noted that Senior Management and the Council are not provided with regular reports on the performance of housing compliance safety checks.

There is a risk that management, Senior Management and Council are not informed on the Council's performance in relation to housing compliance in respect of gas, electrical, legionella, asbestos and fire safety checks.

Management Action 7	a) A suite of performance information for housing compliance - gas, electrical, legionella, asbestos and fire safety will be agreed by Council.	Responsible Owner: a) Improvements Manager, Repairs Manager and Housing Head of Technical Services b) Housing Head of Technical Services c) Housing Head of Technical Services	Date: 31 December 2020	Priority: High
	b) Performance management reports will be produced and reviewed each month by the Repairs Manager, Improvements Manager and the Assistant Director Housing for gas, electrical, fire safety, legionella and asbestos			
	c) As a minimum the Council will be provided with performance and KPI data on housing compliance: gas, electrical, fire safety, legionella and asbestos every quarter.			

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	There is an Asset Management Strategy in place outlining the requirements and expectations of the Council.	Assessment:
		Design ✓
		Compliance ×

Findings / Implications A Housing Asset Management Strategy 2013 -2018 is still currently in place.

A review of the Strategy established that the document sets out the requirements for gas safety checks (including solid fuel and oil fuelled), asbestos, legionella, electrical testing and fire safety.

The Strategy covers the period 2013 to 2018 and states that “the Housing Asset Management Strategy will need to be formally reviewed on an annual basis in consultation with tenants and leaseholders”. It could not be confirmed that the strategy was subject to this annual review.

There is a risk that up to date guidance is not in place for the management of the Council’s housing assets.

Management Action 8	a) An up to date Housing Asset Management Strategy will be Implemented.	Responsible Owner:	Date:	Priority:
	b) The frequency of the review of the Housing Asset Management Strategy will be agreed and reviewed accordingly including the addition of version control.	Housing Head of Technical Services	31 December 2020	Medium
	c) Once a full review of the Asset Management Strategy has been completed appropriate consultation with tenants and leaseholders will be undertaken.			
	d) The Housing Asset Management Strategy will be disseminated to all the relevant staff.			

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	Procedural guidance is in place for:	Assessment:
	• Gas Safety checks (including solid fuel and oil-fired installations);	Design ✓
	• Fire Risk Assessments;	Compliance ×

- Electrical Testing;
- Legionella; and
- Asbestos.

The procedures are available to all staff and tenants where applicable.

Findings / Implications

Electrical safety document is in place. A review of the document identified that guidance on maintaining electrical systems for tenanted and sheltered properties is not included.

Fire safety procedures are not in place.

It was also noted that the following policies/procedures are out of date:

- Fire Safety Arrangements January 2019.
- Asbestos Management Policy 2015.
- Asbestos Removal Procedures to Contractor - Voids.
- Property Services Asbestos Management Strategy February 2014.
- Procedures to ensure servicing of gas burning appliances within Council owned housing stock August 2017.
- Shower Head Procedure – Voids December 2015.

There is a risk that up to guidance is not in place for staff and tenants.

Management Action 9

a) Electrical safety procedures will be implemented for tenanted and sheltered housing properties.

b) Fire safety procedures will be implemented for housing properties.

c) The following policies/procedures will be reviewed and updated as required:

- Asbestos Management Policy.
- Asbestos Removal Procedures to Contractor - Voids.
- Property Services Asbestos Management Strategy.
- Procedures to ensure servicing of gas burning appliances within Council owned housing stock.
- Fire Safety.
- Shower Head Procedure – Voids.

Responsible Owner:

Housing Head of Technical Services

Date:

- a) 31 December 2020
- b) 31 December 2020
- c) 30 April 2021
- d) 31 December 2020

Priority:

Medium

d) The policies and procedures will be subject to review every three years or earlier in the event of any changes occurring and include version control.

e) 31
December
2020

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	Staff are provided with appropriate job related and health and safety training to ensure they follow safe working practices.	Assessment:	
		Design	✓
		Compliance	×

Findings / Implications Fire Safety:
Corporate Health and Safety maintain a record of all online fire awareness training undertaken by office-based staff. A review of the training records established that:

- In 18 cases the training had been undertaken.
- Three cases where the training was commenced in July 2019, February 2020 and July 2020 was not completed.

Improvements Team:
A Training Matrix – Improvements is in place. A review of the matrix established that it was last updated on 10 October 2018. It was also noted that records do not include all the members of staff in the Improvements Team.
After the audit a training matrix updated on 3 August 2020 was provided to us.
There is a risk that staff training may be overlooked where the training matrix is not maintained up to date.

Management Action 10		Responsible Owner:	Date:	Priority:
a) The three members of staff will be reminded to complete their online fire awareness training.		a) Improvements Manager and Repairs Manager	a) 30 September 2020	Medium
b) The Improvements Team training matrix will be maintained up to date		b) Improvements Manager	b) 30 September 2020	
c) A monitoring system will be put into place for Managers to ensure all relevant health and safety training and job-related training has been undertaken and the matrix is maintained up to date.		c) Improvements Manager and Repairs Manager	c) 31 October 2020	

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	Checks and/or works are carried out in the line with the timescales agreed by the Council and documents/records to evidence these checks are updated and retained.	Assessment:
		Design ✓
		Compliance ×

Findings / Implications

Fire Safety:
 Fire alarm servicing is undertaken every six months. For two of the five blocks, sample testing confirmed that the fire alarms were serviced every three months and the remaining three were serviced every six months.
 For the same sample of five blocks testing confirmed that for eight weeks between 9 June and 29 July 2020 the fire alarm testing had been undertaken; however, in nine cases the test was carried out between nine and 14 days after the last test.
 For the fire alarm servicing, emergency lighting testing and extinguisher servicing it was noted that the spreadsheet does not always include the previous visit and as a result we could not confirm if the checks were carried out in line with the agreed timescales.

Electrical Safety:
 We were unable to test if the electrical safety checks were being undertaken as required as the Council does not have an electrical safety testing programme in place.
 Where the housing compliance safety checks are not undertaken in line with the agreed timescales there a risk that the Council is in breach of health and safety legislation.

Management Action 11	All relevant staff and contractors will be reminded to ensure that the housing compliance safety checks for gas, oil fuel, solid fuel, legionella, fire safety and electrical is undertaken in accordance to the timescales set by the Council.	Responsible Owner: Housing Head of Technical Services	Date: 31 October 2020	Priority: Medium
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Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	Escalation procedures are in place and are complied with where checks are not completed for example inability to access properties.	Assessment:
		Design ✓
		Compliance ×

Findings / Implications

Solid Fuel:

For a sample of 20 properties where solid fuel is in use testing identified that: in one case access to the property has not been gained since 2018 and two cases access to the properties was not gained in 2019. The Improvements Manager advised that as there is no statutory duty to carry out the annual service, access to the property is not chased and therefore the next service is then scheduled for in a year's time.

It is the Council's policy that the solid fuel properties are visited for chimney sweeping on an annual basis.

There is a risk to the Council of non-compliance to the policy and also a reputation/legal risk in event of any solid fuel related incident at the property.

Oil Fired:

The Council has two properties which are oil fired and testing is undertaken annually. Testing confirmed that these two properties were last serviced in April and May 2020. Review of the certificates issued by the contractor identified that comments made on the certificate – *"too close to fence"* and *"tank too close to fence and house"*.

It could not be established if any review/action was undertaken.

There is a reputation/legal risk to the Council in event of any oil fuel related incident at the property.

Management Action 12	Responsible Owner:	Date:	Priority:
a) The Council will review and agree the escalation procedures based on the risk to the Council and statutory/regulatory requirements.	Housing Head of Technical Services	a) 31 October 2020	Medium
b) The escalation procedures will then be applied according to the agreed escalation procedures.		b) 30 November 2020	
c) An audit trial of the escalation will be maintained.		c) 30 November 2020	

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	Assessment:
Where appropriate, internal quality assurance audits are completed to assure the works of third parties is to the required standard.	Design ✓
	Compliance ×

Findings / Implications	<p>Improvements and Repairs:</p> <p>Internal quality assurance audits are not undertaken to assure the works of third parties.</p> <p>For Voids – void inspections are undertaken to ensure that the works carried out by the in-house operatives have been undertaken to the void specification.</p> <p>For electrical testing, the work is checked by the supervisor. For a sample of 14 electrical testing works, in five cases testing identified that the work was not checked and signed off by a supervisor.</p> <p>There is a risk that the works may not be carried out to the quality required by the Council or its contractors.</p>			
Management Action 13	<p>a) The Council will agree the housing compliance areas where internal quality assurance checks will be undertaken.</p> <p>b) The checks will then be undertaken accordingly.</p> <p>c) Monitoring will be undertaken to ensure that the required internal quality assurance audits/checks are being undertaken.</p>	Responsible Owner:	Date:	Priority:
		Repairs Manager and Housing Head of Technical Services	31 December 2020	Medium

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	The Asbestos Register is maintained up to date on the stock condition database.	Assessment:		
		Design	✓	
		Compliance	×	
Findings / Implications	<p>A review of the asbestos register identified that:</p> <ul style="list-style-type: none"> - A total of 1,675 records were identified on the register where the records are documented as active however no further details are recorded for the properties - the number of places of asbestos identified, presumed, strongly presumed, the material risk, the priority rating and if its notifiable to the Health and Safety Executive (HSE) fields are blank. - There is a risk that the asbestos register is not up to date and may lead to incorrect information being provided to contractors and DLO staff. 			
Management Action 14	The 1,675 records on the asbestos register will be investigated.	Responsible Owner:	Date:	Priority:
		Improvements Manager and Housing Head of Technical Services	31 December 2020	Medium

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	Contractors and repairs operatives are provided with access to the Asbestos Register with full details of any asbestos containing materials within a property before they commence any work on a property.	Assessment:	
		Design	✓
		Compliance	×

Findings / Implications

On review of the process in updating the asbestos register with survey results, it was identified that:

- On completion of the asbestos survey a PDF of the survey is emailed to the Council's dedicated asbestos email ID.
- Every quarter an excel spreadsheet containing the survey results for the previous three months is provided to the Council by the asbestos contractors. Through an interface this information is uploaded by IT to the asbestos register held on the stock condition database.

Although the Council receives the PDF of the survey results at the time this is not available on the asbestos register until three months later and there is a risk that the most up to date asbestos information may not be available/readily available to the Council's operatives/contractors.

For a sample of 20 repairs jobs testing confirmed that in all cases the operative/contractor was notified of asbestos at the property. The operatives are provided with a link to the Council's asbestos folder on the server and to the asbestos register held on the stock condition database. Contractors are provided with a link to the asbestos register on the stock condition database.

It was also noted that the Council does not have a flag system in place for asbestos on the housing system and as a result when a repair call is received the member of staff is required to undertake checks on the asbestos register/asbestos folder/check with the asbestos administrator for all repairs where there is potentially asbestos present for example ceiling, floor tiles, mould in property, roof leaks etc. There is a risk that these checks may not be undertaken, and this may result in additional costs to the Council with repeat visits/health risks to the operatives.

Management Action 15	a) The Council will engage/discuss with the asbestos contractor with a view of obtaining the asbestos information for uploading to the stock condition database on a more frequent basis.	Responsible Owner: Improvements Manager and Housing Head of Technical Services	Date: 31 December 2020	Priority: Medium
	b) The Council will investigate introducing a flag for asbestos on the housing/repairs system			

Objective: A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

Control	Tenants are made aware of safety precautions that they can take to ensure that hazards within their homes are minimised. These include (but are not limited to) advice on managing the presence of asbestos, flushing water systems, where appropriate, ensuring adequate ventilation and a requirement to request permission to carry out any modification to any part of the home.	Assessment: Design ✓ Compliance ×	
Findings / Implications	<p>There is a page on the Council’s web site “Housing Stock - our Fire Safety position” and states: “Following the tragic events at Grenfell Tower in June 2017 the Council would like to reassure all residents about its approach to fire safety, smoke detection and work being carried out on their properties” and includes “What you can do stay safe?”</p> <p>It was however noted that the Council’s web site does not provide any information on asbestos, legionella and preventing mould and condensation in the home.</p> <p>There is a risk that tenants are not being provided information on the Council’s website on the safety precautions that they can take to ensure that hazards within their homes are minimised.</p>		
Management Action 16	The Council’s web page to include information safety in the home regarding legionnaires disease (this only applies to homes with communal water tank facilities and not domestic homes), preventing mould, damp and condensation, annual gas/other fuel servicing and asbestos.	Responsible Owner: Housing Head of Technical Services	Date: 30 November 2020 Priority: Low

APPENDIX A: CATEGORISATION OF FINDINGS

Categorisation of internal audit findings

Priority	Definition
Low	There is scope for enhancing control or improving efficiency and quality.
Medium	Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible reputational damage, negative publicity in local or regional media.
High	Immediate management attention is necessary. This is a serious internal control or risk management issue that may lead to: Substantial losses, violation of corporate strategies, policies or values, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.

The following table highlights the number and categories of management actions made as a result of this audit.

Objective	Control design not effective*		Non-Compliance with controls*		Agreed management actions		
	Low	Medium	High	Low	Medium	High	
A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.	2	(24)	14	(24)	1	8	7
Total					1	8	7

* Shows the number of controls not adequately designed or not complied with. The number in brackets represents the total number of controls reviewed in this area.

APPENDIX B: SCOPE

The scope below is a copy of the original document issued.

Scope of the review

The scope was planned to provide assurance on the controls and mitigations in place relating to the following objective:

Objective of the risk under review

A compliance audit to confirm policies and procedures are being consistently, effectively and efficiently applied: ensuring that all statutory responsibilities are met.

When planning the audit, the following areas for consideration and limitations were agreed:

The Council has a duty to ensure that all properties, including communal areas within properties, under its control meet the relevant health and safety regulations in respect to each of the following key areas:

- Gas Safety checks (including solid fuel and oil-fired installations);
- Fire Risk Assessments;
- Electrical Testing;
- Legionella; and
- Asbestos.

We will ensure, for each of the areas listed above, that:

- There are clear policies and procedures in place regarding the requirements and expectations of the Council;
- How the Council is kept informed of regulatory updates and ensures that Policies and Procedures remain up to date e.g. changes to fire safety requirements resulting from the Grenfell enquiry;
- Policies and procedures are available to all staff and tenants where applicable;
- The Council has agreed the frequency of all safety checks and when these will commence;

- Staff receive appropriate training to ensure they follow safe working practices and are provided with the necessary PPE;
- Contractual agreements are in place with suppliers to complete the checks in a timely manner;
- Once checks have been completed, reports/certificates are provided to the Council and where applicable, to the tenant, in a timely manner;
- Appropriate records are held regarding the status of each property in the housing stock to ensure all checks required have been identified. This includes the verification for new properties through development or transfers in, disposals and identification of major works undertaken which could impact on the checks required;
- Risk assessments (fire and asbestos) are carried out, are maintained up to date and are made available to all interested parties. Improvement actions identified during the risk assessment process are implemented promptly;
- Where they are not held on the same system, the housing management system is reconciled to the health and safety records, to ensure that every property is accounted for;
- The last safety check and next safety check date are clearly identified within the property system or similar for each property and can be used to identify those properties requiring checks;
- Processes are in place to identify all properties due for safety checks and works are adequately arranged through an appropriately qualified and experienced contractor or similar;
- Escalation procedures are in place and are complied with where checks are not completed for example due to a tenant refusing entry;
- Where required certificates or similar are held for the safety checks completed for every property which include the date inspected, outcome and actions due;
- Actions identified from safety inspections are adequately and accurately recorded, and followed up to ensure completion;
- Contractors, including the Council's repairs operatives are provided with access to the Asbestos Register with full details of any asbestos containing materials within a property, before they commence any work on a property;
- Tenants are made aware of safety precautions that they can take to ensure that hazards within their homes are minimised. These include (but are not limited to) advice on managing the presence of asbestos, flushing water systems, ensuring adequate ventilation and a requirement to request permission to carry out any modification to any part of the home;
- Checks and/or works are carried out in the line with agreed timescales e.g. gas: annual; electricity: five yearly; asbestos: five yearly; fire risk assessments: two yearly; fire alarm tests: weekly; legionella: monthly and documents/records to evidence these checks are updated and retained;
- Where appropriate, internal quality assurance audits are completed to assure the works of third parties;
- Breaches of Health and Safety legislation and near misses are identified and are report through the RIDDOR process; and compliance; and
- Management are regularly and accurately briefed on the Council's with health and safety regulation.

The following limitations apply to the scope of our work:

- The scope of the work is limited to those areas examined and reported upon in the areas for consideration in the context of the objectives set out for this review;
- Conclusions are based on our assessments made through discussions with management, assessment of the current framework of controls and review of relevant documentation made available;
- We will not provide an opinion on whether the Council complies with Health and Safety legislation;
- Our audit does not provide any assurance with regards to compliance with Health and Safety legislation and other HSE requirements, and does not replicate the advice provided by Health and Safety Consultants;
- This audit does not replace the requirement for any of the external / independent inspections required by law;
- We will not comment on whether the procedures incorporate the most up to date legislation, only that processes exist to identify and incorporate any changes;
- We will not comment on the appropriateness of actions undertaken regarding non-compliance, only that they were identified and reported;
- We will not confirm that all regulatory requirements of the Council have been identified for all properties;
- We will not provide assurance that property records are complete or re-perform any reconciliations of the records held;
- We will not comment on the completeness of the risk assessments / safety checks or actions identified as part of this;
- We will not confirm that all action has been taken to escalate non-completion of safety checks;
- We will not comment on the skills and qualifications of the inspectors;
- We will not comment on the sufficiency of actions taken to address the findings of checks;
- We will not confirm that all records are complete and all required safety checks / risk assessments have been identified and completed;
- All testing will be compliance based sample testing only;
- We will not verify the accuracy of the Health and Safety Reporting; and
- Our work will not provide any guarantee against material errors, loss or fraud or provide an absolute assurance that material error, loss or fraud does not exist.

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The matters raised in this report are only those which came to our attention during the course of our review and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Actions for improvements should be assessed by you for their full impact. This report, or our work, should not be taken as a substitute for management's responsibilities for the application of sound commercial practices. We emphasise that the responsibility for a sound system of internal controls rests with management and our work should not be relied upon to identify all strengths and weaknesses that may exist. Neither should our work be relied upon to identify all circumstances of fraud and irregularity should there be any.

Our report is prepared solely for the confidential use of South Kesteven District Council, and solely for the purposes set out herein. This report should not therefore be regarded as suitable to be used or relied on by any other party wishing to acquire any rights from RSM Risk Assurance Services LLP for any purpose or in any context. Any third party which obtains access to this report or a copy and chooses to rely on it (or any part of it) will do so at its own risk. To the fullest extent permitted by law, RSM Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party and shall not be liable for any loss, damage or expense of whatsoever nature which is caused by any person's reliance on representations in this report.

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We have no responsibility to update this report for events and circumstances occurring after the date of this report.

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