



Health and Housing Scrutiny Committee Agenda

10.00 am

Wednesday, 18 June 2025

Council Chamber, Town Hall, Darlington, DL1 5QT

Members of the Public are welcome to attend this Meeting.

1. Introduction/Attendance at Meeting
2. Declarations of Interest
3. To consider the proposed dates and times of meetings of this Committee for the Municipal Year 2025/26 –
 - 3 September, 2025
 - 29 October, 2025
 - 7 January, 2026
 - 4 March, 2026
 - 15 April, 2026
4. To approve the Minutes of the meeting of this Scrutiny held on :-
 - (a) 2 April 2025 (Pages 3 - 8)
 - (b) 13 May 2025 (Pages 9 - 10)
5. Waiting lists for NHS services –
Presentation by the Deputy Director of Planning and Performance and Head of Commissioning and Strategy, North East and North Cumbria Integrated Care Board (To Follow)

6. Housing Services Fire Safety Policy for purpose-built blocks of flats, Sheltered and Extra Care Accommodation 2025 - 2030 –
Report of the Assistant Director - Housing and Revenues
(Pages 11 - 46)
7. Work Programme –
Report of the Assistant Director Law and Governance
(Pages 47 - 62)
8. Regional Health Scrutiny (Pages 63 - 70)
9. SUPPLEMENTARY ITEM(S) (if any) which in the opinion of the Chair of this Committee are of an urgent nature and can be discussed at the meeting.
10. Questions

A handwritten signature in black ink, reading 'A. Wennington', with a horizontal line underneath.

Amy Wennington
Assistant Director Law and Governance

Tuesday, 10 June 2025

Town Hall
Darlington.

Membership

Councillors Anderson, Beckett, Crudass, Holroyd, Johnson, Layton, M Nicholson, Pease, Mrs Scott and Vacancy

If you need this information in a different language or format or you have any other queries on this agenda please contact Hannah Miller, Democratic Officer, Resources and Governance Group, during normal office hours 8.30 a.m. to 4.45 p.m. Mondays to Thursdays and 8.30 a.m. to 4.15 p.m. Fridays email: hannah.miller@darlington.gov.uk or telephone 01325 405801

HEALTH AND HOUSING SCRUTINY COMMITTEE

Wednesday, 2 April 2025

PRESENT – Councillors Layton (Chair), Beckett, Crudass, Holroyd, Johnson, Mahmud and Mrs Scott

APOLOGIES – Councillors Baker and Pease

ALSO IN ATTENDANCE – Councillors Roche, James Graham (Tees, Esk and Wear Valley NHS Foundation Trust), John Stamp (Tees, Esk and Wear Valley NHS Foundation Trust) and Andrea Goldie (Healthwatch)

OFFICERS IN ATTENDANCE – Lorraine Hughes (Director of Public Health), Catherine Shaw (Public Health Officer), Anthony Sandys (Assistant Director - Housing and Revenues), Claire Gardner-Queen (Head of Housing), Cheryl Williams (Housing Asset and Compliance Manager) and Hannah Miller (Democratic Officer)

HH50 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

HH51 TO APPROVE THE MINUTES OF THE MEETING OF THIS SCRUTINY HELD ON :-

(1) 5 FEBRUARY 2025

Submitted – The Minutes (previously circulated) of the meeting of this Scrutiny Committee held on 5 February 2025.

RESOLVED – That the Minutes of the meeting of this Scrutiny Committee held on 5 February be approved as a correct record.

(2) 26 FEBRUARY 2025

Submitted – The Minutes (previously circulated) of the meeting of this Scrutiny Committee held on 26 February 2025.

RESOLVED – That, with the removal of ‘with Members noting that limited uptake in Darlington for the incentivised access scheme’ and the insertion of ‘with Members noting that limited uptake by dentists in Darlington for the incentivised access scheme’ to Minute HH46/Feb/25, the Minutes of the meeting of this Scrutiny Committee held on 26 February be approved as a correct record.

HH52 UPDATE: CLIMATE CHANGE STRATEGY 2024-2029

The Housing Asset and Compliance Manager gave a presentation (previously circulated) updating Members on the Climate Change Strategy 2024-2029.

The presentation outlined the aims of the strategy and details were provided of the actions taken in 2024/25 in relation to retrofit. Members noted that £1.27m funding was secured from the government's Social Housing Decarbonisation Fund wave 2.1; that this money had been used, alongside the Council's matched contribution to roll out retrofit works to 130 homes; and this work was due to be completed in May 2025. Details were provided of the energy efficiency measures applied.

It was reported that further funding had been applied for in September 2024 under the government's Warm Homes Social Housing Fund wave 3 and the Council would also contribute to this project and the outcome of the bid was due to be released in March 2025. Members noted that the Council had committed over £4m each year over the lifetime of the MTFP for energy efficiency works.

The presentation also provided with details of actions taken in 2024/25 in relation to new build homes. Members were advised that new builds were built to a standard of EPC B; that solar photovoltaics and air source heat pumps were included as standard; and electric vehicle chargers would be installed in line with new building regulations.

Details were provided of the planned and responsive maintenance and in relation to EPC's Members were advised that 51 per cent of council properties now had an EPC C or above; that there had been an increase of 184 homes having reached EPC or above from 2024 to January 2025 and roughly 1400 homes had a high scoring EPC D and required minor works to obtain an EPC rating of C.

Details were also provided of the plans for 2025/26 with Members noting the inclusion of the Tree and Woodland Strategy and progress on the action plan was outlined.

Discussion ensued on those properties with low or no EPC ratings; Members were informed that stock modelling was undertaken for those properties with no EPC ratings and those properties with the lowest EPC ratings were in receipt of targeted work in the first instance.

Concerns were raised regarding the progress being made to retrofit the council's housing stock in order to achieve net zero carbon by 2050; Members were informed that the next wave of funding would enable work to be undertaken on up to 1700 properties, however there were a range of factors to consider and further clarity was required in relation to the governments plans for gas boiler installations.

RESOLVED – That the presentation be noted.

HH53 WORKING COLLECTIVELY TO TRANSFORM THE MENTAL HEALTH SYSTEM

The Associate Director of Partnerships and Strategy, Tees, Esk and Wear Valley NHS Foundation Trust gave a presentation (previously circulated) updating Members on the work being undertaken to transform the mental health system.

Details were provided of the core aims and the vision of Community Transformation; an update on Darlington Connect which opened in March 2023; and reference was made to the expectations and impact of the model.

Members were advised of the plans for 2025 which included the commencement of peer support and autism support services in May 2025; and the key challenges of community transformation were outlined.

Members highlighted concerns regarding the visibility of Darlington Connect, despite its central location and it was suggested that Members provide further information regarding the service to residents via their newsletters.

Discussion ensued regarding the low percentage of patients requiring step up to secondary care services, the reduction in patients waiting for assessment, and staff turnover. Reference was made to the importance of offering support and techniques to enable people to manage their own mental health and Members noted that Daisy Chain would be offering this service via Darlington Connect for people aged 16 years and above, for those with and without a formal diagnosis.

RESOLVED – That the presentation be noted.

HH54 CHILDREN AND YOUNG PEOPLE'S SERVICES

The General Manager – Durham and Tees Valley Community CAMHS, Tees Esk and Wear Valley NHS Foundation Trust gave a presentation (previously circulated) updating Members on the Children and Young People's Services in Darlington.

The presentation provided details of the i-TTHRIVE framework for delivering children and young people's mental health services; reference was made to average wait times for assessment and treatment, with waits for treatment dependent on the support required; wait time for specialist neuro assessment; and services in place to help address waiting times, including Keeping in Touch process, transformation programme, Mental Health School Teams, with Members noting that Darlington is the first local authority in the Tees Valley to achieve 100 per cent coverage of all mainstream schools. Reference was also made to the regional work with partners to address the backlog and unmet needs of those waiting for neurodevelopmental assessments.

Details were provided of regulatory activity, including a recent independent review undertaken by NICHE in 2024; and the work being undertaken to deliver on the Trust's priorities for children and young people service.

Discussion ensued regarding the new Keeping In Touch (KIT) process; and following a query regarding support for those waiting for a neurodevelopmental assessment, Members were advised that support was available to children and young people without a formal diagnosis, that people were encouraged to access the bubble of support which was widely promoted, and that this was a key area of focus for the Trust.

Members raised concern regarding the lack of progress being made by services for children with autism; the General Manager Durham and Tees Valley Community CAMHS acknowledged Members concerns, informing them of the challenges faced by the services in the years that followed COVID. Members were advised that there had previously been an exponential increase in wait times for assessments however this increase had started to reduce and that there was no additional funding for services.

RESOLVED – That the presentation be noted.

HH55 HEALTHY LIFESTYLE SURVEY

The Director of Public Health submitted a report (previously circulated) sharing an overview of the current Healthy Lifestyle Survey, including headlines of the 2024/25 survey and a timeline for the consultation and review taking place.

The submitted report stated that the survey, which had been delivered in Darlington for 14 years, was offered to all primary and secondary schools across the Darlington Borough; there was a pilot survey planned for Darlington College; and there were two surveys, one on wellbeing and relationships and one on health.

Details were provided of the topics covered by the surveys and reference was made to the headlines for both primary and secondary schools (also previously circulated).

Discussion ensued regarding topics not included in the surveys and Members were reminded of the scope and function of the survey. Members also entered into a discussion around gambling and addictive behaviour and consent.

RESOLVED – (a) That this Committee welcome the work programme, data collected and how the data is used.

(b) That this Committee supports the continuation of the Healthy Lifestyle Survey, and where possible share the positive messages captured through the survey.

HH56 SUPPORTING CHILDREN AND YOUNG PEOPLE'S HEALTH AND WELLBEING IN SCHOOLS - CONFERENCE

The Director of Public Health submitted a report (previously circulated) providing an overview of the Supporting Children and Young People's Health and Wellbeing in Schools conference with Members.

The submitted report stated that the Public Health team organised and facilitated a conference on 11 February 2025 which was extremely well received from the majority of schools across the Borough. Members noted that there were 103 delegates in attendance from 33 schools and 14 local and national services which support work in schools.

The submitted report provided details of the event which included seven workshops, eight speakers delivering a range of regional and local updates and the launch of the consultation on the Healthy Lifestyle Survey, including an activity for all participants.

Reference was made to other outcomes from the day and feedback from the day, which was extremely positive. Members were informed of the intention to hold the conference on a biennial basis.

RESOLVED – That Members welcome the feedback from the conference and that future events be supported by this Committee.

HH57 WORK PROGRAMME

The Assistant Director Law and Governance submitted a report (previously circulated) requesting that consideration be given to this Scrutiny Committee's work programme and to consider any additional areas which Members would like to suggest be included in the previously approved work programme.

Discussion ensued on the current work programme and following a query regarding sexual health services for young people, Members were reminded that a sexual health briefing had been drafted; that Healthwatch were undertaking some work on this topic; and the briefing would be updated and circulated once this work had been completed.

RESOLVED – That the work programme be noted.

HH58 HEALTH AND WELLBEING BOARD

It was reported that the Board last met on 13 March 2025 and that the next meeting of the Board was scheduled for 19 June 2025. The Cabinet Member for Health and Housing informed Members that items discussed at the last meeting included the Better Care Funding, Darlington Safeguarding Partnership Annual Report, Pharmaceutical Needs Assessment, NHS planning and the joint Health and Wellbeing Strategy.

RESOLVED – That Members of this Scrutiny Committee continue to receive the Minutes of the Health and Wellbeing Board.

HH59 REGIONAL HEALTH SCRUTINY

The Tees Valley Joint Health Scrutiny Committee last met on 13 March 2025 and the next meeting of the Tees Valley Joint Health Scrutiny Committee was scheduled for 8 May 2025. Members noted the approved Minutes from the meeting held on 9 January 2025 (previously circulated).

Members were informed of a request to include 'health impacts of incinerators' on the work programme of the joint scrutiny for the next Municipal Year.

RESOLVED – That Members look forward to receiving an update of the work of the Tees Valley Joint Health Scrutiny Committee at a future meeting of Scrutiny Committee.

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HEALTH AND HOUSING SCRUTINY COMMITTEE

Tuesday, 13 May 2025

PRESENT – Councillors Layton (Chair), Beckett, Crudass and Holroyd

APOLOGIES – Councillors Baker, Johnson, Mahmud, Pease and Mrs Scott

ALSO IN ATTENDANCE – Leanne McCrindle (Tees, Esk and Wear Valleys NHS Foundation Trusts)

OFFICERS IN ATTENDANCE – Michael Conway (Mayoral and Democratic Officer)

HH60 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

HH61 TEES, ESK AND WEAR VALLEY NHS FOUNDATION TRUST - QUALITY ACCOUNT 2024/25

Trust representatives Leanne McCrindle and Chief Nurse (and CQC Nominated Individual), Beverley Murphy presented the draft Quality Account 2024/2025 for Tees, Esk and Wear Valleys NHS Foundation Trust for members' consideration.

The Committee considered that the Quality Account was clearly set out and noted the progress made against the three priorities, 'Patient Experience: Promoting education using lived experience', 'Patient Safety: Relapse Prevention' and 'Clinical Effectiveness: Improving Personalisation in Urgent Care'.

Members were pleased to note the work undertaken to progress the outlined priorities and their clear descriptions provided by the trust's representatives.

Questions were raised including as to whether there is a timeframe for improving CQC ratings for which a detailed response was provided, and members were pleased to learn that all points of improvement from the last major inspection (2023) have now been met. Questions were also asked regarding the governance and recruitment structure of the Trust and members were pleased to learn that those with lived experience were involved in the recent recruitment process for the Trust's new Chief Executive. Members were also pleased to learn that training for staff is occurring in face-to-face settings and that sections of training are provided by those with lived experience.

Members asked who was given opportunity to take part in the Big Conversation and were informed that staff, service users and their friends and families were welcome to take part, members expressed that they would have ideally liked to have seen a greater response with Trust representatives agreeing. However, members accepted that requests for feedback were well-promoted by the Trust.

Discussions were held with regards to recruitment and staffing, particular attention was paid to the presence of agency workers with members expressing that they would like to see permanent Trust employees hired where possible over the use of agency staff, a sentiment

which was shared by the Trust's representatives.

A further discussion was held regarding the quality of the Trust's buildings and members were pleased to hear that buildings are generally of a high standard in the vast majority of cases with high quality in-patient facilities and a good standard of food and cleanliness.

Members had no specific requests for additions to next year's quality account.

Overall, the Health and Housing Scrutiny Committee welcomed the opportunity to comment on the Trust's Quality Accounts and fully endorsed the proposed priorities. Appreciation was expressed for the clear layout of the Quality Account particularly in respect of the included glossary of terms.

RESOLVED - Members noted the content of the draft Quality Account and universally expressed their thanks to the Trust for the positive work being carried out. Additionally, members agreed that a draft commentary be approved by the Chair of this committee that this to be provided as a response to the Trust following this meeting.

HEALTH AND HOUSING SCRUTINY COMMITTEE 18 JUNE 2025

HOUSING SERVICES FIRE SAFETY POLICY FOR PURPOSE-BUILT BLOCKS OF FLATS, SHELTERED AND EXTRA CARE ACCOMMODATION 2025-2030

SUMMARY REPORT

Purpose of the Report

1. For Members to consider the draft Housing Services Fire Safety Policy for Purpose-Built Blocks of Flats, Sheltered and Extra Care Accommodation 2025-2030, before approval by Cabinet on 8 July 2025.

Summary

2. Members will recall that Health and Housing Scrutiny Committee considered the existing Housing Services Fire Safety Policy 2022-2027 on 2 November 2022, before approval by Cabinet on 6 December 2022. This policy covered the fire safety arrangements for Council owned sheltered and extra care accommodation.
3. Since then, work has been ongoing in developing a fire safety policy for Council owned purpose-built blocks of flats. Rather than present a separate policy for Members to consider, a single policy covering all Council owned accommodation with communal areas has been developed, updated with the latest legislation and best practice guidance.
4. The Housing Services Fire Safety Policy for Purpose-Built Blocks of Flats, Sheltered and Extra Care Accommodation 2025-2030 at **Appendix 1** sets out how we will provide staff, residents, visitors and partner organisations in these types of accommodation with clear guidelines as to how to prevent fires and what action to take in the event of a fire, to protect themselves and others.
5. The Tenants Panel has been consulted on the draft policy, and they have given their full support.

Recommendation

6. It is recommended that Members:
 - (a) Consider the report and draft Housing Services Fire Safety Policy for Purpose-Built Blocks of Flats, Sheltered and Extra Care Accommodation 2025-2030 at **Appendix 1** and agree its onward submission to Cabinet.

Anthony Sandys
Assistant Director – Housing and Revenues

Background Papers

- (i) The Regulatory Reform (Fire Safety) Order 2005.
- (ii) The Fire Safety Act 2021.

Anthony Sandys: Extension 6926

Council Plan	This report supports the Council Plan's HOMES priority to provide affordable and secure homes that meet the current and future needs of residents
Addressing inequalities	An equality impact assessment screening form has been completed in relation to this policy, but no adverse impacts have been identified on people with any protected characteristics, as defined by the Equality Act 2010
Tackling Climate Change	There are no issues which this report needs to address
Efficient and effective use of resources	There are no issues which this report needs to address
Health and Wellbeing	This policy sets out our commitment to protecting staff, tenants, visitors, partner organisations and contractors from the effects of fire within all our properties.
S17 Crime and Disorder	There are no issues which this report needs to address
Wards Affected	All wards with Council owned purpose-built blocks of flats, sheltered and extra care accommodation
Groups Affected	All Council tenants in those types of accommodation
Budget and Policy Framework	This report does not recommend a change to the Council's budget or policy framework
Key Decision	This report does not represent a key decision
Urgent Decision	This report does not represent an urgent decision
Impact on Looked After Children and Care Leavers	There are no issues which this report needs to address

MAIN REPORT

Information and Analysis

7. The Housing Services Fire Safety Policy for Purpose-Built Blocks of Flats, Sheltered and Extra Care Accommodation 2025-2030 at Appendix 1 sets out how we will provide staff, residents, visitors and partner organisations in these types of accommodation with clear guidelines as to how to prevent fires and what action to take in the event of a fire, to protect themselves and others.
8. The policy covers the following areas:
 - (a) **Relevant legislation:** This section sets out the relevant fire safety legislation that Darlington Borough Council must comply with as part of our statutory duties to provide our tenants with safe homes.
 - (b) **Scope:** This section sets out the aims and the purpose of the policy and links to our corporate fire safety arrangements.
 - (c) **Responsibilities:** This section sets out the responsibilities of Darlington Borough Council in relation to fire safety, together with the responsibilities of tenants and visitors.
 - (d) **Arrangements:** This section sets out the specific arrangements in relation to this policy, including fire risk assessments, evacuation procedures and our stay put policy, record keeping, training and instructions.
 - (e) **Fire Safety Information for purpose-built flats, sheltered and extra care accommodation:** This section sets out the specific fire safety information for each different type of accommodation such as, the fire detection and alarm systems, fire fighting equipment, fire doors, fire protection, signage, sprinklers and smoke control systems.

Outcome of Consultation

9. The Tenants Panel has been consulted on the draft policy, and they have given their full support.

Equalities considerations

10. An equality impact assessment screening form has been completed in relation to this policy, but no adverse impacts have been identified on people with any protected characteristics, as defined by the Equality Act 2010.

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Darlington Borough Council

Housing Services

Fire Safety Policy for purpose-built blocks of flats, Sheltered and Extra Care schemes

2025 - 2030

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Appendix 1 Specific Fire Safety Arrangements

Appendix 2 Fire safety information specific for purpose-built blocks of flats

Appendix 3 Fire safety information specific for Sheltered and Extra Care Schemes

Appendix 4 General fire safety information

1 Introduction

We are committed to protecting staff, tenants, visitors, partner organisations and contractors from the effects of fire within all our properties. We are accountable for tenant fire safety as a social housing provider and are responsible for ensuring suitable management to tenant fire safety to ensure:

- Tenants feel safe in their homes.
- The requirements of regulatory standards are met.
- Relevant fire safety legislation is complied with.
- We eliminate and reduce fire hazards in our premises.
- We increase fire safety awareness for our tenants.
- We have robust fire risk assessment processes
- We prevent the spread of fire and have early warning and notification to Durham and Darlington Fire and Rescue Service.

This policy is applicable to all residential purpose-built blocks of flats, sheltered, and extra care accommodation we own and/or manage. There is a separate Fire Policy for workplaces and non-residential properties.

Fire is a significant hazard to the safety of both buildings and their occupants. We are committed to ensuring fire safety is managed through the provision of suitable, sufficient and risk appropriate fire precautions and management systems to enable the safe evacuation of staff, tenants, and others and to minimise fire damage should a fire occur.

This Policy describes the fire precautions and management arrangements we have put in place to ensure that the risk of fire is effectively managed and delivers compliance with all applicable fire safety legislation and industry best practice.

2 Relevant Legislation

We have a duty to comply with the requirements of fire safety legislation, fire safety guidance and best practice:

- The Regulatory Reform (Fire Safety) Order 2005 (RRFSO 2005) brought together different pieces of fire legislation. It applies to all non-domestic premises, including communal areas of residential buildings with multiple homes. RRFSO 2005 designates those in control of premises as the responsible person for fire safety and they have a duty to undertake assessments and manage risks. RRFSO 2005 is enforced by the Fire and Rescue Authorities.
- The Fire Safety Act 2021 sets out to amend the RRFSO 2005 and is designed to ensure that people “feel safe in their own homes and that a tragedy like the Grenfell Tower fire

never happens again” in England. The Act clarifies that for any building containing two or more sets of domestic premises, the RRFSO 2005 applies to the building’s structure and external walls and any common parts, including the front doors of residential areas.

- It also clarifies that references to external walls in the RRFSO 2005 include “doors or windows in those walls” and “anything attached to the exterior of those walls (including balconies).” These amendments to the RRFSO 2005 aim to increase enforcement action in these areas, particularly where remediation of aluminium composite material cladding is not taking place.

In summary, the Duty Holder/building owner for multi-occupied, residential buildings will manage the risk of fire for:

1. The structure and external walls of the building (such as cladding, balconies and windows)
2. Entrance doors to individual flats that open into communal areas.

This is also supported by other legislation including, but not limited to:

- The Regulator of Social Housing’s Consumer Standards
- The Housing Act 2004
- The Building Regulations Approved Document B – Fire Safety
- The Health and Safety at Work Act 1974
- Electrical Equipment (safety) Regulations 1994
- The Local Government Guide "Fire safety in purpose-built blocks of Flats" (blocks with communal areas).
- Dangerous Substance and explosive atmospheres Regulations (DSEAR) 2002.
- The Furniture and Furnishings (Fire Safety) Regulations

Guidance Documents

- Fire Sector Federation ACOP - A National Framework for Fire Risk Assessor Competency
- Fire Sector Federation - A Guide to Choosing a Competent Fire Risk Assessor
- Fire Risk Assessment in Residential Care Homes
- Fire Safety Risk Assessment: Means of Escape for Disabled People
- HSE Fire Safety Webpages
- PAS 79-2:2020 Housing – British Standards BSI
- PAS 9980:2022, Fire risk appraisal of external wall construction and cladding of existing blocks of flats – Code of practice
- BS991 Fire safety in the design, management, and use of residential buildings. Code of practice (under review)
- PIBS_Guide_06-21_V2.pdf (nationalfirechiefs.org.uk)

Under the Regulator of Social Housing’s consumer standards, all registered providers of social housing have an obligation for their tenants’ safety, which includes fire safety. The objectives of the Regulator are set out in the Housing and Regeneration Act 2008.

We are accountable for overall tenant fire safety and are responsible to ensure tenants feel safe in their homes and the requirements of the regulatory standards are met.

3 Scope

The purpose of this fire safety policy is to provide staff, tenants, visitors, contractors, and partner organisations with clear guidelines of what action they should take to protect themselves and others.

We take our responsibilities to manage the risk from fires within our managed housing stock very seriously and strive to reduce this risk through:

- Defined roles and responsibilities for fire safety, including individual responsibilities, which are outlined in the corporate [Fire Safety Arrangement](#).
- Compliance with the Regulatory Reform (Fire Safety) Order 2005, Fire Safety Act 2021, and any other relevant legislation.
- Ensuring fire safety is included when designing and constructing new and/or refurbishment projects.
- Ensuring that appropriate funding is allocated where deficiencies in fire safety measures are identified and the remedial actions taken.
- A comprehensive programme of fire risk assessments, undertaken by competent person(s).
- Ensuring suitable and sufficient fire precautions and management systems are in place.
- A programme of regular fire safety inspections based on building risk.
- Providing regular fire safety awareness updates to tenants, staff, and others every three years, unless significant changes to fire safety have occurred sooner.
- A programme of regular fire door inspections.
- Where required, we will provide a Property Information Box (PIB) at the main entrance of the building, which holds all relevant fire information on the building and residents for the fire service.
- Making information on the specific fire safety arrangements in each residential building of two or more domestic properties readily available to:
 - Tenants, to ensure they are assured that the risk of injury or damage to their homes caused by fire is minimised.
 - Staff, contractors, visitors.
 - Fostering and maintaining good working relationships with partner services and relevant stakeholders, including Durham and Darlington Fire and Rescue Service.

4 Responsibilities

It is the responsibility of all staff and tenants to maintain good housekeeping within both communal areas and individual accommodation and to report any defect found to Housing Services at the earliest opportunity.

The following outlines the responsibilities we have in relation to fire safety for tenanted properties with purpose-built blocks of flats with two or more domestic flats.

We are a landlord and building manager in respect of our managed housing stock with communal areas and supported living residential accommodation.

To meet our responsibilities as an employer and landlord we will ensure that tenants feel safe in their homes and the risk from fires is effectively managed.

We have identified a number of objectives for all our managed housing stock of domestic properties with two or more flats.

Responsibilities of Darlington Borough Council:

- A responsible person will be appointed and be aware of all the areas of responsibility.
- Fire Risk Assessments have been undertaken by competent persons in accordance with the Regulatory Reform (Fire Safety) Order 2005 and current standards.
- Fire Safety measures are included in all new construction projects, existing building renovations and improvement programmes.
- Fire Safety risks posed by the structure and external walls (including cladding, balconies and windows and front doors) are assessed in line with current standards.
- The ongoing suitability and effectiveness of current fire safety measures in buildings classed as 'Low Risk' are reviewed at least every 3 years or after a fire incident, as part of the overall fire risk assessment process.
- Fire safety priorities, improvement areas and areas of non-compliance are identified and actioned.
- All relevant residential buildings under our control will, where appropriate, have adequate fire warning systems, signs, means of escape and fire-fighting equipment.
- All fire safety precautions are inspected, maintained, serviced, and tested to ensure they are always fully operational, in accordance with statutory requirements and manufacturer's instructions.
- Regular inspections are undertaken of communal areas to ensure good housekeeping practices are in place to minimise the risk and spread of fire.
- Gas and electrical safety inspections are undertaken in each of our residential properties to ensure that these do not present a fire risk to the tenant or building.
- Staff are provided with the necessary skills and training to undertake their duties defined in this policy in relation to fire safety.
- Suitable and sufficient records are kept and available to be audited at appropriate intervals.

- We keep up to date with changing legislation and fire mitigation measures.

Responsibilities of tenants and visitors:

- To comply with the requirements of this fire safety policy.
- To follow instructions provided by our staff and/or members of the fire and rescue service.

5 Arrangements

We have a duty under fire safety legislation to carry out fire risk assessments of all residential properties comprising of two or more domestic flats.

We have a number of arrangements in place to minimise the risk of fire. The day-to-day arrangements to managing the risks of fire is underpinned by:

- A programme of comprehensive fire risk assessments, including:
 1. Assessing the risk from fire, including a building's structure, the external walls (including doors or windows in those walls, anything attached to the exterior of those walls such as balconies) and any common parts, plus all doors between the domestic premises and common parts.
 2. Evaluating the adequacy of existing fire protection measures and identifying additional measures that minimise the risk of fires starting and spreading.
 3. Assessing compliance with all relevant legislation and relevant standards.
- The provision and maintenance of appropriate fire detection, alarm systems, emergency lighting, fire-fighting equipment (where in place), evacuation signage, appropriate means of escape and protected escape routes in communal areas of residential properties.
- The provision of essential training and fire safety information for all staff and tenants.
- Appropriate instructions for contractors and other visitors on the actions to be taken in the event of a fire in any property they may be working in.
- The reporting, reviewing and investigation of all fire related incidents and measures put in place to prevent a recurrence, where possible.
- A zero-tolerance relating to the storing of items by tenants in communal areas.
- Strict enforcement of no-smoking in communal areas.

5.1 Fire Risk Assessments

The level and complexity of any fire risk assessment undertaken in residential buildings, comprising of more than two flats, that we own and/or manage varies dependant on risk. A schedule of fire risk assessments has been drawn up and these will be undertaken by competent persons or third parties, depending on risk.

A fire risk assessment will:

- Identify the fire hazards, including those posed by the structure of the walls, doors, and windows.
- Identify people at risk.
- Evaluate, remove, or reduce the risks.
- Record findings, prepare an emergency plan and provide training.
- Be reviewed and updated regularly, in particular when something changes that could affect fire safety or where there it is no longer valid, such as. a change in:
 - occupancy.
 - the building.
 - nature of contents or after a fire.

Fire Safety risk assessments will include:

- The structural ability of the building and individual flat to withstand fire, prevent fire spread and contain a fire in a single flat, where a Stay Put fire evacuation policy is in place.
- Emergency routes and exits.
- Fire detection and warning systems.
- Firefighting equipment.
- The removal or safe storage of dangerous substances.
- Details of the emergency fire evacuation strategy. Details of any vulnerable tenants, where known, with temporary or permanent disabilities, including mobility issues or sensory impairment(s).
- Providing information to tenants, staff, and other people on the premises.
- Fire safety training for staff.

Actions arising from any fire risk assessment will be acted upon in a timely manner. This means the fire risk assessor will update the fire action log and assign officers to respond to those within a period as specified by the risk priority that the fire risk assessor has determined from the guidance. These fit into priorities and timescales:

Timescales

- 1) Immediately
- 2) Short Term
- 3) Medium Term
- 4) Long Term
- 5) Consideration for future implementation

Priorities

- a) High
- b) Medium
- c) Low

These actions are reviewed and reported within the Housing Compliance meetings.

All fire risk assessments will be reviewed frequently, which is generally every three years, but may be sooner, by a competent person and updated to reflect any changes in the building or

recommend whether a more comprehensive fire risk assessment is required due to more significant changes.

5.2 Fire Risk Assessment types

Type	Definition
1	<p>Type 1 Fire Risk Assessment (FRA) is non-destructive, and the most common. This type of survey focusses on identifying visible hazards and concerns without any intrusive or destructive work. It assesses all the common parts of a building, such as a lobby area in a shared block of flats – but not individual dwellings. In some cases, a Type 1 FRA will inspect construction points between individual dwellings (such as shared supportive walls).</p> <p>Type 1 FRA's have the purpose of ensuring that common parts of a building have the arrangements which allow people to escape if there was to be a fire – such as clear signage pointing to entry and exit points.</p> <p>The results of a Type 1 FRA may reveal the requirement for further FRAs. If this is the case, the Type 1 FRA will list reasons why this would be required.</p>
2	<p>Type 2 Fire Risk Assessments are normally only recommended if a Type 1 FRA concluded that there may be serious structural flaws in a building which may increase the risk of fire spreading.</p> <p>Type 2 FRA includes destructive sampling. This will involve intrusive and destructive methods to assess hidden hazards. This will require repairs to be carried out following the assessment. This applies to common areas only.</p>
3	<p>Type 3 Fire Risk Assessment is comprehensive. This type of assessment covers all common areas of a building – and individual dwellings.</p> <p>Type 3 FRA considers all means of escapes (including those within individual dwellings), structures, and compartmentation between flats and any means of fire detection.</p> <p>Type 3 FRA is non-destructive – and is usually only considered necessary if there are fire risks within individual dwellings. This type of survey focusses on identifying visible hazards and concerns without any intrusive or destructive work.</p>
4	<p>Type 4 Fire Risk Assessments are similar to Type 2 FRAs, as they include a destructive sampling, but in both the common parts of a building and living areas – such as apartments. This will involve intrusive and destructive methods to assess hidden hazards. Type 4 FRAs are more comprehensive – and complicated to complete. This is because access to individual dwellings is required, and destructive sampling can lead to a need for repairs.</p>

5.3 Low risk residential properties

All blocks of flats owned by us have been identified as low risk as they are below 11m in height and basic design/layout and are purpose-built blocks of flats.

A medium risk building is defined as being between 11m and 18m with high risk being over 18m. We do not have any buildings which meet those criteria.

Sheltered schemes are lower than the 11m rule but due to the complexity they are classified as a medium risk.

Type 3 FRA's are undertaken by a team of competent in-house fire risk assessors for low-risk properties every 3 years. Individuals in the team have a recognised level of competence that includes a formal fire risk assessment qualification and are an accredited fire risk assessor. Where an assessment is carried out by an external fire risk assessor, they will also have the same level of competency and be an accredited fire risk assessor.

5.4 Fire Risk Assessment Outcomes

We will undertake any outcomes and actions from a fire risk assessment (FRA). Where destructive FRAs result in the need to complete building work to reduce identified fire risks, including additional ventilation, to allow smoke to escape or additional fire compartmentation additions, we will complete these within agreed timescales. All actions will be reviewed to identify the practicality and viability of the recommendation. In some cases, in line with legislation, it may be identified that some recommendations are not implemented, for example a sprinkler system.

5.5 Asbestos Considerations

If destructive FRA's are to be undertaken, we will provide information on the presence of any asbestos and commission a Refurbishment and Demolition (R&D) survey as required. This is in line with our [Asbestos Management Health and Safety Arrangement](#)

5.6 Shared Occupation/Lettings/Landlord Responsibilities

In the case of residential buildings we own and/or manage but other service providers are contracted in to provide the services provided within the building such as, homeless and temporary accommodation, care and support services to elderly and vulnerable, clear fire safety arrangements will be in place as to who is responsible for managing the day-to-day fire safety arrangements.

We are responsible for ensuring that a fire risk assessment is undertaken. This may require communication and cooperation between all parties to ensure coordination of fire safety provisions, fire-fighting measures, evacuation procedures etc.

In the event that part of a building may be let, the building manager has the responsibility to ensure that those hiring the site are aware of the fire risk assessment for the site and evacuation procedure, including contact names in the event of an emergency.

5.7 Reporting of Fire Incidents

Any incidents of fire, regardless of how minor, will be reported to Housing managers, which includes the Responsible Person and recorded on the Councils EcoOnline system. Incidents will be investigated, and lessons learnt to prevent a recurrence.

We will liaise with external emergency services, where required, to minimise the potential risks that could arise from activities where there is a reportable incident related to fire within properties that we manage.

5.8 Fire Evacuation

We operate an evacuation policy in our purpose-built residential buildings with more than two sets of flats and will have a clearly defined evacuation strategy, determined by our fire risk assessments and overall risk to the occupants. This does not include our sheltered housing and extra care schemes, the evacuation strategy for those is outlined in section 5.9.

Tenants will be made aware of the fire safety and evacuation arrangements in place in the building they live in. This will be made available at sign-up and on display in noticeboards in the communal areas. Any evacuation plan will include:

- The actions tenants should take if they discover a fire.
- How people will be warned if there is a fire and how this is linked to the fire service and landlord.
- Key escape routes, how people can gain access to them and escape from them to places of safety.
- Arrangements for the safe evacuation of people identified as being especially at risk, such as young children and babies and those with disabilities or cognitive impairments.
- Where people should assemble after they have left the building and clear directions to the assembly point.

Although this is in place at present, we are working with the new regulations and the fire service to implement those changes. This means that during the lifetime of this policy we will move to a stay put policy as outlined in section 5.9.

5.9 Stay Put Policy

Purpose built blocks of flats

Following the changes to the guidance to the Building Regulations Part B and National Fire Chiefs Council (NFCC) guidance, we operate a 'Stay Put' policy in most of our residential buildings containing self-contained flats and communal areas. This requires occupants not directly affected by any fire to stay in their flat. This is regularly reviewed as part of the fire risk assessment, to ensure it is the safest strategy to employ. The 'Stay Put' policy may change during a major fire event and this decision will be managed by the Incident Commander from the fire and rescue service dealing with the emergency situation at the time.

Additionally, we will have internal procedures in place for responding to a fire incident in any of our properties, including procedures for liaising with the fire and rescue service on arrival, and notifying them of any special risks or vulnerable tenants.

The following points are further measure we may take consideration of following a fire risk assessment or guidance change in conjunction with the fire service:

- Further protect fire exit routes.
- Develop procedures for evacuating persons who are unable to use the stairs in an emergency, or who may require assistance (such as disabled people, older people, and young children).
- Work in conjunction with the Durham and Darlington Fire and Rescue Service to develop policies for partial and total evacuation of purpose built residential flat blocks.
- Draw up and keep under regular review evacuation plans. Copies, where required, will be provided in electronic and/or paper form to Durham and Darlington Fire and Rescue Service.
- Include up-to-date information about persons with reduced mobility and their associated Personal Emergency Evacuation Plans (PEEPs).
- Install sprinkler systems in high-risk residential buildings that will further safeguard tenants in their own home, in the event of a fire.

Sheltered and Extra Care schemes

A stay put policy is in place for all sheltered and extra care schemes due to the medical condition and degree of awareness of some tenants that can result in them not being capable of being moved easily during an evacuation or fire alarm scenario. They may become confused and disorientated if permitted to leave the building without adequate supervision or assistance.

The stay put policy for sheltered and extra care schemes is based on the factors below. Should any item not be in place, a review will be undertaken to assess the risk, and the findings will be recorded.

- The building has a full working and maintained fire alarm system for communal areas.
- Each flat has working and maintained wired smoke detection.
- Fire doors, glazing and door furniture meet the FD30 standard.
- Suitable compartmentation throughout the building.
- Concrete floors.
- Emergency lighting installed and maintained.

- Annual gas safety checks (flats and communal).
- Good standards of housekeeping throughout.
- Fire retardant soft furnishings (communal areas).
- No Smoking policy in place and enforced in communal areas.
- The building has an up-to-date Electrical Installation Condition Report (EICR) in place.
- Firefighting equipment in place and serviced, such as fire blankets.
- Portable appliance testing (PAT) up to date on items in communal areas of the building.

5.10 Keeping records – Fire Logbook

We will keep records of tests, maintenance and safety training relating to each residential building of two or more flats. An effective way of demonstrating compliance is to keep records in a well-maintained fire logbook.

We will keep records up to date and readily available for inspection by any visiting authority, including, but not limited to, the Health & Safety Executive, Regulator of Social Housing or Fire Service when required. Records that will be kept include:

- Fire alarm system - record of testing, maintenance, and false alarms (where applicable).
- Emergency lighting – record of testing and maintenance (where applicable).
- A record of any visits by the Fire and Rescue Service or other enforcing authorities.

All records of servicing by nominated contracted servicing companies will be retained and kept.

5.11 Training and Instruction

We will provide appropriate fire safety awareness training to staff. Staff, tenants, visitors, partner organisations and contractors will receive information on the fire safety arrangements in the building where they live or work, and the action they need to take in the case of a fire.

Staff working in residential properties will be instructed by their line manager in the following:

- What to do if there is a fire.
- What to do if the fire alarm sounds.
- The location of the nearest fire alarm.
- The location of the nearest fire exit, as well as a secondary route.
- The location and route to the designated assembly point(s).

All staff are required to complete regular refresher training every three years, however staff working in residential care premises and services, which include sleeping accommodation, receive specific training included, but not limited to, fire panel training, use of firefighting equipment and how to use extinguishers. Although staff are trained in the use of firefighting equipment, staff are not expected to tackle fires.

6 Policy Review

This Policy will be reviewed and updated every five years, or if there are any significant changes to current fire Legislation, HSE approved codes of practice or guidance, or as the result of the outcome of an incident review.

7 Sheltered and Extra Care Scheme Specific building information

Our Schemes

Sheltered properties are contained under the same roof, however all are individual flats. All schemes have communal lounges together with gardens, guest rooms, laundry, bin storage, mobility scooter store, security and safety features. Some have hair salons and meeting rooms. Communal areas can also be used by the wider community by prior arrangement.

Extra care schemes are similar in design to sheltered schemes but also have care staff on site 24 hours daily who provide social care.

All schemes have a Scheme Manager providing good neighbourly low level tenant support, housing management and delivery of activities during the normal working day Monday to Friday 08-30 to 17:00 (16:30 on Fridays) with Response Officers available at all other times.

Each property is linked to the Darlington Lifeline Control Centre, ensuring there is a 24-hour emergency response should the Scheme Manager be off duty.

Construction Features

Our schemes provide independent living with communal facilities. Each property was constructed to the standards and regulations applicable at the time of build. Each subsequent remodelling scheme has also followed this process providing some degree of compartmentation.

Construction is typically, concrete floors, solid wall construction between flats and flats to communal spaces, FD30 Fire Doors on entrance to the flats, within corridors and onto the stair enclosures. The roof void is also sub-divided by the apartment walls.

It is key to note that:

- The travel distances for means of escape in case of fire in the existing buildings were suitable for its existing use.
- Any remodelling works undertaken includes fire doors within the flats, an upgrading of the fire doors and frames to also prevent the passage of smoke, reinstatement of the cavity barriers in the roof and ceiling voids.

General repairs and maintenance will be carried out to the building/structure in a manner that will not compromise the compartmentation in communal areas and/or between flats or any means of escape or egress from the building.

All staff and contractors working in the building will be suitably supervised and managed to prevent compromising the compartmentation while maintaining fire exit routes and ensuring good housekeeping is always kept.

Fire Alarm System

All Sheltered and Extra Care schemes have a fire alarm designed (as a minimum) to L2 Standard that was applicable at the time of design; the systems will be permanently connected to a fire alarm monitoring centre, located at the CCTV centre in the Town Hall Darlington. Each Fire Alarm System will be maintained as required in BS5839.

Within individual flats, as a minimum a combined heat and smoke detector will be fitted in the entrance hall area that forms a part of the building's L2 fire detection system, which also connects to the voice call system. Each apartment will also be provided with domestic smoke/heat detection to the kitchen and corridor.

In all sheltered accommodation schemes, activation of the fire alarm will trigger a response from:

- A duty member of staff on site (the Scheme Manager or a member of the care team) to the voice module within the apartment. Should this not be responded to, the activation will default to the fire alarm monitoring centre (CCTV)

or

- The fire alarm monitoring centre (CCTV) to the voice module within the accommodation unit.

In all Extra care accommodation units, activation of the fire alarm will trigger a response from:

- A duty member of staff on site (the Scheme Manager or a member of the care team) to the voice module within the apartment. Should this not be responded to, the activation will default to the fire alarm monitoring centre (CCTV).

Any no responses or an unsatisfactory response from the occupant will be investigated by the carer or Lifeline staff and emergency services will be contacted. An adequate response from the occupant and the sounder ceasing will result in the call being closed, with the safeguard that any second activation and/or no response or inadequate response will result in the full emergency procedures being followed. Instructions for tenants on the actions to take if they discover a fire or on hearing the fire alarm, are in Appendix 2.

In communal areas, smoke detectors and heat detectors will be installed throughout the building, with manual call points located at each exit. Activation of any of the smoke detectors will result in activation of the fire alarm and will result in the actions as detailed in Appendix 2 by the following persons:

- Tenants, their visitors, other visitors, and contractors.
- Staff on site.
- Staff on call.
- Alarm Receiving Centre.
- Staff from partner organisations.

Activation of a manual call point (break glass) or any smoke/heat detector in the communal areas will result in activation of the full fire alarm.

All activations of the fire alarm system will be recorded. This information will include.

- Location of the unit activated.
- The reason for activation.
- Actions taken following the investigation into the activation of the alarm.
- On site staff attendance within 3 minutes of the detector head detecting the fire situation (this is to allow some investigation if members of staff are on site and prevent unnecessary disruption of vulnerable residents).
- Off-site staff (Lifeline response officers) will respond within a 30-minute time frame, but Durham and Darlington Fire and Rescue Service may already be in attendance.

All existing staff will be trained in fire safety and new staff will be working towards this. They will have suitable and sufficient building and procedure knowledge to cope with any situation that may arise. Further 24-hour support will be provided by managers and supervisors.

Personal Emergency Evacuation Plans (PEEPs) and Care Assessments

A comprehensive list of tenants, who may require assistance to evacuate the building, will be maintained close to the main fire alarm control panel. The list will be immediately accessible to the Fire and Rescue Service on their arrival and, where possible, will be presented to them by a member of staff on duty. Any client information will be held in the fire document safe located next to the fire panel and is secured using a code known only to staff, and CCTV Control Centre, who will inform the Fire and Rescue Service of the code on request.

When required, a PEEP will be jointly developed by the tenant and Lifeline Services. This will aim to address how the tenant can safely exit the building during an emergency. A copy of the PEEP will be placed in the Property Information Box (PIB).

A Care Assessment will be completed prior to any tenant moving into Extra Care accommodation. In addition, Lifeline staff will contact each tenant Monday to Friday and visit regularly. This will include, monitoring the fire risks associated with each tenant in their own home and reporting to the relevant line manager to take the appropriate preventative measures. This could include the removal of equipment if a risk is identified, and the provision of additional fire detection and warning devices, such as, smoke/heat detectors linked to the fire alarm system in the habitable rooms, along with vibrating pillows, visual alarms, or additional fire protection features, if required.

Appendix 1 Specific Fire Safety Arrangements

1 Fire Safety Measures

Each residential building comprising of two or more flats will have a number of fire safety measures installed. These will have been assessed as the most suitable for that particular building, as part of the fire risk assessment and can consist of a combination of the following:

1.1 Fire Detection and Alarm Systems

Where appropriate, buildings will be fitted with automatic fire detection and alarm systems in line with current regulations, standards, and guidelines. Where these systems are in place, they will be periodically serviced and inspected by a competent service provider, in line with the relevant British Standard. The period between visits to undertake inspection and service will be based upon a risk assessment and manufacturer's guidance but the maximum period between visits will not exceed six months. All visits will be recorded in the site's fire logbook. The responsible person will ensure that regular weekly checks and testing of the alarm system are carried out on a local level in line with the manufacturer's instructions. All activations of the fire alarm will be recorded within the fire logbook – testing, maintenance, and false alarms.

We will also carry out regular fire evacuation practice sessions to ensure our tenants understand what is required. This may be a physical on-site staged evacuation or a desktop review. We will also arrange feedback sessions to understand any concerns raised from our tenants during those practice sessions.

1.2 Emergency Escape Lighting

Emergency escape lighting is lighting that comes on when the power supply to the normal lighting provision fails. It provides illumination for the safety of people leaving a location or attempting to terminate a potentially dangerous process beforehand. Emergency lighting will be periodically serviced and inspected by a competent service provider in line with the relevant British Standard. The period between visits to undertake inspection and service will be based upon a risk assessment and manufacturer's guidance but the maximum period between visits will not exceed twelve months. All visits will be recorded in site's fire logbook. The responsible person will ensure that regular monthly checks and testing of the emergency lighting are carried out on a local level in line with manufacturer's instructions. Tests will be recorded in the fire logbook.

1.3 Fire Fighting Equipment

The Fire Risk Assessment will determine what is suitable and sufficient fire-fighting equipment for all buildings we own and/or manage. In most cases this will include fire extinguishers and fire blankets (recommended for all kitchen areas).

The Responsible Person will ensure that any fire-fighting equipment is inspected annually by a competent person to ensure it remains in an operational condition and is kept in an easily accessible position. A record of these services will be recorded in the fire log.

In addition to an annual service, the Responsible Person will ensure that fire extinguishers are kept in good order and available for use at all times. This can be achieved by regular inspections by a nominated person and will include checking:

- That the tamper indicator is not broken - this is usually a plastic tag or disc to show the pin has not been removed or tampered with.
- That the pressure gauge needle is in the green area - if there is no pressure gauge, the extinguisher is discharged using an internal gas cartridge, therefore no check is required.
- The unit has no signs of corrosion, dents, damaged, discharge or deterioration.

Any issues found will be reported to the contracted service provider and entered in to the fire logbook.

It must be emphasised that staff are not expected to put themselves at risk by fighting fire. However, if they have been given training in the use of extinguishers or are familiar with the operation of and appropriate use of extinguishers, small fires, no bigger than the size of a wastepaper basket, may be tackled. This must only be done after raising the alarm. It is imperative that, if staff feel themselves to be at risk, they leave the fire and make their escape.

1.4 Fire and Flat Entrance Doors

Fire doors within communal areas, such as staircase and cross-corridor doors, and flat entrance doors opening onto communal areas of a residential building containing two or more flats will be checked and regularly maintained in working order.

The inspection frequency for these doors will be determined by risk as part of the fire risk assessment. Checks will ensure that fire doors are correctly installed, are of the right specification and maintained in working order, including an effective, working self-closing device.

Staff will carry out a formal programme of visual fire safety inspections, which include visual checks on communal area fire doors and report on any areas of concern relating to fire safety.

Further guidance on formal fire door inspection frequencies is outlined in the Fire Safety Regulations 2022, regulation 10, which states that all buildings over 11m will have an annual flat front door inspection with communal doors inspected quarterly. Although guidance has not yet been published for buildings under 11m, we are adopting the same inspection regime.

1.5 Passive Fire Protection

Passive fire protection (PFP) consists of products installed in a building to improve its fire safety rating. PFP keeps people safe and limits damage to a building's structure and its contents by restricting the spread of fire and smoke and shielding escape routes long enough for occupants to exit the building calmly and safely. PFP products include but are not restricted to:

- Fire protection to the structural frame of the building.
- Fire-resisting doors and fire door furniture.
- Fire shutters.
- Compartment walls and floors.
- Fire-resisting walls and partitions.
- Suspended ceilings.
- Fire-resisting glazing.
- Fire doors and hardware.
- Industrial fire shutters and curtains.
- Fire-fighting shafts and stairwells.
- Fire-resisting ductwork.
- Fire-resisting service ducts and shafts.

PFP can sometimes be damaged or even removed during building and maintenance works or the installation of cabling and ductwork. When commissioning contractors or when any in-house works are undertaken the Responsible Person for the residential building will ensure that PFP is maintained intact or suitably replaced or repaired with like for like materials to ensure the fire integrity is preserved.

1.6 Sprinklers and Smoke Control Systems

If sprinkler systems are installed in residential buildings, these will be tested and inspected annually by a competent person. Pumps will be fitted with a weekly self-check system and flow switches will be fitted with an auto check system that runs every quarter. All results of any inspections will be entered in the relevant building fire logbook.

Where smoke control systems are in place, these will be tested weekly to ensure that they are operating effectively, with a full system inspection and test carried out by a suitably qualified person at least annually.

1.7 Signage

Every new tenant within a residential building comprising of two or more flats will receive information regarding fire safety arrangements for that building. Regular newsletters and safety information will be available on our website. Social Media channels will also be utilised for general fire safety advice.

Where required, communal areas of residential buildings will have clearly displayed Fire Action notices providing instructions in both pictures and words to tenants of what to do in case of a fire in their flat, or a fire elsewhere in the building.

Signs denoting the fire escape route will be prominently displayed on each floor. The signs will be on a contrasting background, easily legible and readable in low level lighting conditions or when illuminated with a torch.

1.8 Tenant Fire Safety

As part of the sign-up process, new and existing tenants will be made aware of their own obligations to reduce the risk of fire within their homes and not create a fire risk, both within their home and in any communal areas that may affect the safety of others.

A detailed list of specific responsibilities is given at appendices 2 and 3. This will then be issued to tenants as part of their tenancy sign up process.

Tenants are responsible for ensuring that they:

- Do not create a fire hazard in their home, for example:
 - Storing flammable items on their balcony, in common areas or by blocking fire escape routes, including not storing, parking, or charging (however temporary) petrol and/or battery driven items, such as motorbikes and mobility scooters.
 - Not leaving candles lit and unattended.
 - Avoiding smoking in bed and dispose of cigarettes safely if smoking inside the home.
 - Leaving chip pans and items cooking unattended
 - Not smoking in communal areas, as this is prohibited.
 - Ensuring electronic devices are charged responsibly using a British Standard charger.
 - Not allowing stored items to build up within their home.
 - Not leaving domestic rubbish on communal landings.
 - Not placing large items or forcing large items into refuse chutes that may cause blockages and result in a fire hazard.
 - Not leaving large bulky items or rubbish in communal areas or outside, against the building. This is a breach of the tenancy agreement.
- Are aware of fire safety measures, including the evacuation plan for their building.
- Do not make any structural alterations to their flats.

All tenants will be briefed on fire safety measures specific to their new home at sign up. Tenants will be advised that they may be contacted by Durham and Darlington Fire and Rescue Service, who will offer a home safety check and urged to accept the offer, which is free of charge.

E-bikes and E-scooters use rechargeable Lithium-Ion batteries. When used correctly these are not dangerous, but it is important to be aware of fire safety advice relating to these vehicles and particularly the charging of them. All Tenants should see our [Guide to E-scooter and E-bike](#)

[safety](#) for advice on charging your vehicle safely as well as things to consider before your purchase an E-scooter or E-bike. Additional advice is also available in our [safety advice for electric mobility vehicles](#) webpage.

1.9 Managed Use of Communal Fire Escape Routes

We have adopted a policy of zero tolerance relating to the placing and storing of objects in fire escape routes and stairwells. This is to reduce the risk of fire breaking out in these areas and the potential for any fire to compromise fire escape routes, as well as creating obstructions and restricting access to the fire and rescue services.

In communal stairwells, corridors and communal cupboards, tenants will not be permitted to keep and/or store:

- Bicycles, prams, pushchairs, and mobility scooters.
- Combustible materials, such as paper, books.
- Plastic or fabric plants and flowers.
- Rubbish awaiting disposal.
- Furniture.
- Barbeques.
- Motorcycles, mowers and other gardening equipment containing petrol or other fuels.
- Plastic or timber sheds or lockers.
- Hazardous chemicals, gas containers, or flammable liquids in the communal area or storage cabinets, dedicated storerooms, or cupboards.
- DIY materials or tools.
- Electrical appliances, such as tumble dryers and washing machines.
- Toys and play furniture.
- Recyclable materials.
- Bedding, clothing and shoes.
- Curtains, including nets.
- Food or other organic matter.
- Items that present a hazard, such as panes of glass, fairy lights and decorations.
- Any other bulky items.

In addition, residents will not be allowed to charge mobility scooters, batteries, or other electrical equipment in escape routes. There is a separate guide relating to [Mobility Scooters](#). This is in line with our [Housing Management Policy](#).

Where items are found in escape routes and stairwells, we will give notice to tenants to remove these items. If ownership of items is unknown, a notice will be attached to the item. However, goods that present a significant fire risk will be removed immediately, without notice.

Failure to remove items will result in us removing them. They will be placed in storage for a period one month [in accordance with the provisions of the Local Government Act 1982]. Any

goods that are not reclaimed will be disposed of without compensation. The costs associated with removal, storage and disposal may be re-charged to the tenant concerned. If we are unable to identify the tenant concerned, we may recharge all tenants within the block. Appropriate legal action may be taken against any person who persistently breaches rules relating to the use of communal escape routes and stairwells.

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Appendix 2 Fire safety information Specific for Purpose built blocks of flats

For all purpose-built blocks of flats a stay put a 'Stay Put' evacuation strategy will be implemented and this means you can remain in your property when there is a fire in another area of your building. This is because your apartment is designed with barriers such as compartmentation, fire walls and fire doors to prevent the fire from spreading across your development.

Unless the fire started in your apartment, it should remain unaffected for at least 60 minutes. During this time, the Fire and Rescue Service should be able to prevent further spread or help you safely out of the building should it be required.

Do I have to 'Stay Put'?

If you don't feel safe and wish to leave your property, no one can prevent you from doing this. But you must be aware that a fire in another part of the building may affect your normal escape route. The Fire and Rescue Service will require clear access to the fire as quickly as possible and additional people leaving the building may slow their response.

Who do I report a fire to

- You MUST dial 999 immediately.
- Please advise Darlington Borough Council as soon as you are made aware of a fire in the building (DO NOT do this before calling 999).
- Advise your insurance company after the fire has occurred if it has affected your property.

What do I need to do?

If you are not in an area directly affected by fire, you should remain in your apartment, close doors and windows and await further instructions from the emergency services.

What to do if there is a fire in YOUR property

- DO NOT stay to fight the fire.
- If there are others in the property alert them and make your way out of the building.
- If it is safe to do so, close windows and internal doors, switch off your cooker or oven if it is on.
- Always close the front door of your property behind you, **leaving it unlocked** where possible.
- Call the Fire and Rescue Service by dialling 999 and providing your full address and apartment number.
- Wait outside, in a safe location away from the building, until instructed to return by the Fire and Rescue Service.
- Do not put yourself at risk or cause unnecessary delay

What to do if you see or hear of a fire in ANOTHER part of your building

- DO NOT LEAVE YOUR FLAT.
- Call the fire service by dialling 999.
- The building is designed to contain a fire in the apartment where it starts. This means it will typically be safe for you to stay in your own apartment if the fire is elsewhere in the building.
- You must leave IMMEDIATELY if smoke or heat affects your home, or if you are told to do so by the fire service.
- If you are in any doubt, get out

If you are NOT in your property and become aware of a fire within another part of the building

- Dial 999 immediately while making your way to safety using your nearest escape route.
- DO NOT use a lift.
- DO NOT stop to collect belongings or return to your property.
- DO NOT enter the building until the emergency services advise it is safe to do so.

Appendix 3 Fire procedures specific for Sheltered and Extra Care Schemes

Instructions to Tenants and Visitors

DISCOVERING A FIRE IN/NEAR YOUR FLAT

1. If the fire is in your flat or near vicinity LEAVE IMMEDIATELY.
2. If the front door is hot or there is smoke coming in do not open the door. Move into the lounge or bedroom, shutting the internal door/s and stay by an open window.
3. If possible and it is safe to do so, leave the flat and make your way to the nearest fire exit, leave the building, and meet at the fire assembly point.
4. DO NOT RETURN TO YOUR FLAT.
5. DO NOT RE-ENTER THE BUILDING (unless instructed by Fire Service).

WHEN IN YOUR FLAT AND YOU HEAR THE ALARM

1. You should 'STAY PUT' (remain in your flat on alert).
2. You must provide guidance and direction to any visitors in your flat in line with this policy.
3. Keep your front door closed but be ready to leave if instructed.
4. Await further instructions, either by the fire service, the duty staff or via the intercom system.

IF YOU ARE IN A COMMUNAL AREA

1. Make your way calmly to the nearest fire exit, leave the building and meet at the fire assembly point.
2. Take any able-bodied person with you
 - DO NOT USE THE LIFTS
 - DO NOT STOP TO COLLECT BELONGINGS
 - DO NOT RETURN TO YOUR FLAT
 - DO NOT RE-ENTER THE BUILDING UNLESS TOLD IT IS SAFE TO DO SO

IF YOU DISCOVER A FIRE IN THE COMMUNAL AREAS

1. **Leave the area of the fire immediately and proceed towards the Fire Assembly point via the nearest fire exit.**
2. Operate the nearest manual call point (break glass) when exiting the building or when safe to do so.
3. Only if possible and when safe to do so **dial 999**, giving them a full address/post code.

Darlington Borough Council's CCTV control Centre monitor the fire alarm systems. On any fire alarm activation, they will:

- Attempt to communicate with Scheme Manager via the intercom to try and establish the cause of the alarm activation.
- Contact the emergency services providing all information
- Instigate the appropriate actions



Assembly Points

Fire Assembly points (FAP):

Safe areas for people to meet and are identified by signage like the example below
(FAP) Locations by Building

- Dalkeith House – The Front Car Park
- Oban Court – The Front Car Park (Staff to Manage Access)
- Rosemary Court – The Rear Car Park
- Rockwell House – The Front Car Park or Garden Area
- Ted Fletcher Court – The Grassed Area of the Main Car Park
- Branksome Hall – The Grassed Area Near the Main Front Car Park
- Linden Court – The Front Car Park
- Dinsdale Court – The Car Park of Dinsdale Close Flats
- Roxby Court – The Pavement next to The Bungalows
- Windsor Court – The Front Car Park or Garden Area

Appendix 4 General fire safety information

Fire door safety

Your front door/entrance door is a self-closing fire door that will prevent smoke and fire entering and leaving your property in an emergency. It is important that you DO NOT make any alterations to the door, such as removing the self-closing device, as this will compromise the fire safety of your development.

The new regulations require us to check your flat front door at least once per year. We will visit your property to gain access. Where we don't gain access, we will leave a calling card to advise we have called.

We will advertise the date of the next visit via letter.

During the visit, a QR code (sticker) will be placed on the top of your door on the hinge side. This sticker is unique to your flat front door and will be used to record inspection history. The QR code must not be removed.

Flat front door – Five-point safety checks:

For your safety we ask that you take time to check your fire doors using the five steps below.

- Door and frame – The door and frame will be checked to ensure that both are undamaged for example, no open holes or breaks exist in surfaces of either the door or frame.
- Door seals – Are there smoke and/or intumescent seals in place around the door or frame? Are these intact with no sign of damage?
- Hinges, handles and latches – Are hinges, handles and latches fixed firmly to the door and frame? Are these operating correctly, not loose or broken? Are there minimum of 3 hinges on each door and no missing screws?
- Door closing correctly in frame – Check the door closer for obvious signs of damage or missing parts. Check the door closes properly into the frame by opening the door halfway and letting it close. Does it close flush into the frame without sticking on the floor, frame, or latch?
- Gaps – When the door is closed in the frame, are the gaps less than 4mm between the door and frame on the top and sides of the door? (A £1 coin is about 3mm thick so use that as a gauge.) Are the gaps on the bottom of the door (threshold) less than 10mm between the bottom of the door and the floor? As a rule of thumb, if you can see light under the door, the gap is likely to be too big.

If during these checks you identify issues with the door, it is your responsibility to seek advice from a competent contractor to provide advice or undertake a repair. For further information visit: <https://www.firedoorsafetyweek.co.uk/toolkit/five-step-fire-door-check>

Communal fire door

There are communal fire doors throughout your development, and we will inspect them to make sure they're in working order on a quarterly basis.

Fire doors are designed to stop the passage of smoke and fire when closed. They are often in place to protect escape routes so people can safely evacuate. You may find them across corridors, on stairwells, and on electrical cupboards.

It's important that fire doors, which are labelled with a blue sign, are NEVER wedged or propped open.

Additional fire safety features

To protect you and your neighbours and enable the Fire and Rescue Services to safely tackle a fire, additional fire safety features may be installed in and around your property. These could include:

Fire signage

Fire signage will be located throughout the building. This may include:

- Fire exit signs indicate where the door to the final exit is.
- Directional fire signage is there for you to follow to reach your emergency exit.
- Fire action notices advise you what to do in the event of a fire.

Emergency lighting

These lights are provided on the escape route so in the event of an electrical failure, they will remain lit up and guide you to the staircase or exit.

Smoke ventilation

Smoke ventilation may be installed. This is commonly known as Automatic Opening Vents (AOVs). These vents open when smoke is detected nearby. The AOV is designed to open and clear smoke to allow for you to escape and for firefighters to safely fight a fire.

(Please note not all premises have additional safety features installed. Our competent Fire Risk Assessor reviews the safety features required in line with each building type and legislation.

Fire door
keep locked

Automatic
fire door
keep clear

Fire door
keep shut



Automatic
smoke
vent



Safety advice

These fire prevention tips can help reduce the chances of a fire in your home.

Smoke and carbon monoxide alarms

- All properties we own and/or manage will have hard wired smoke alarms/heat detectors installed.
- All properties we own and/or manage will have carbon monoxide alarms installed.

Test the smoke and carbon monoxide alarms in your property monthly.

- In some developments, your smoke detector may be linked to the communal alarm system. If you think your fire alarm could be linked to the communal system, please check with your property/development manager before you test. In our sheltered schemes, for example testing your alarm may cause false alarms.
- If any of your smoke or carbon monoxide alarms have a one-year battery, make sure it is changed every year. Only take the battery out when you need to replace it.
- Never disconnect or take the batteries out of your alarm if it goes off by mistake.
- Mains-powered alarms are powered by your home power supply and have a back-up battery in case of a power cut. They need to be installed by a qualified electrician, and, like battery alarms, they do require testing.

In the kitchen

Cook safely - Take extra care if you need to leave the kitchen whilst cooking, take pans off the heat or turn them down to avoid risk.

- Avoid cooking when under the influence of alcohol.
- Avoid leaving children in the kitchen alone when cooking on the hob. Keep matches and saucepan handles out of their reach to keep them safe.
- Keep tea towels and cloths away from the cooker and hob.
- Double check the cooker is off when you've finished cooking.

Deep Fat Frying

- Take care when cooking with hot oil – it sets alight easily.
- Make sure food is dry before putting it in hot oil so it doesn't splash.
- If the oil starts to smoke – it's too hot. Turn off the heat and leave it to cool.
- Use a thermostat-controlled electric deep fat fryer. This means it can't overheat.

Electrics

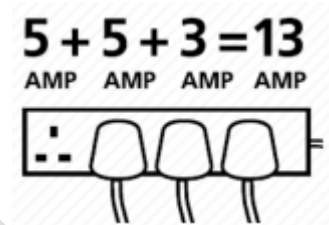
How to avoid electrical fires:

- Try and keep to one plug adaptor per socket.

- Keep your eyes peeled for signs of dangerous or loose wiring such as scorch marks, hot plugs and sockets, fuses that blow or circuit-breakers that trip for no obvious reasons, or flickering lights.
- Unplug appliances when you're not using them, they are fully charged, or when you go to bed.

Keep electrical appliances clean and in good working order to prevent them triggering a fire.

An extension lead or adaptor will have a limit to how many amps it can take. Be careful not to overload your plugs to reduce the risk of a fire.



Appliances use different amounts of power – a television may use a 3amp plug and a vacuum cleaner a 5amp plug, for example. It's important to know the limit.

Cigarettes

- Stub cigarettes out properly and dispose of them carefully. Put them out and make sure they are out!
- Don't leave a lit cigarette, cigar or pipe lying around. They can easily start a fire.
- Unplug e-cigarettes when fully charged and ensure you are using the correct charger type.

Candles

- Make sure candles are secured in a proper holder and away from materials that may catch fire – like curtains or tissues.
- Put out candles when you leave the room, and make sure they're out completely at night.
- Consider using LED or battery-operated candles.
- Keep pets away from a lit candle.

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**HEALTH AND HOUSING SCRUTINY COMMITTEE
18 JUNE 2025**

WORK PROGRAMME

SUMMARY REPORT

Purpose of the Report

1. To consider the work programme items scheduled to be considered by this Scrutiny Committee during the 2025/26 Municipal Year and to consider any additional areas which Members would like to suggest should be included.

Summary

2. Members are requested to consider the attached draft work programme (**Appendix 1**) for the next Municipal Year which has been prepared based on Officers recommendations and discussions held at the Health and Housing Scrutiny Committee Annual Briefing which took place on 27 May 2025.
3. Once the work programme has been approved by this Scrutiny Committee, any additional areas of work which Members wish to add to the agreed work programme will require the completion of a quad of aims in accordance with the previously approved procedure (**Appendix 2**).

Recommendation

4. Members are requested to consider and approve the attached draft work programme as the agreed work programme for the Municipal year 2025/26 and any other additional items which they might wish to include.

**Amy Wennington
Assistant Director Law and Governance**

Background Papers

No background papers were used in the preparation of this report.

Author : Hannah Miller 5801

Council Plan	The report contributes to the Council Plan in a number of ways through the involvement of Members in contributing to the delivery of the Plan. The Work Programme contains items which enable Members to scrutinise those areas that contribute the priority of 'Homes' - affordable and secure homes that meet the current and future needs of residents and 'Living Well' – a healthier and better quality of life for longer, supporting those who need it most.
Addressing inequalities	There are no issues relating to diversity which this report needs to address.
Tackling Climate Change	There are no issues which this report needs to address.
Efficient and effective use of resources	This report has no impact on the Council's Efficiency Programme.
Health and Wellbeing	This report has no direct implications to the Health and Well Being of residents of Darlington.
S17 Crime and Disorder	This report has no implications for Crime and Disorder.
Wards Affected	The impact of the report on any individual Ward is considered to be minimal.
Groups Affected	The impact of the report on any individual Group is considered to be minimal.
Budget and Policy Framework	This report does not represent a change to the budget and policy framework.
Key Decision	This is not a key decision.
Urgent Decision	This is not an urgent decision
Impact on Looked After Children and Care Leavers	This report has no impact on Looked After Children or Care Leavers

MAIN REPORT

Information and Analysis

5. The format of the proposed work programme has been reviewed to enable Members of this Scrutiny Committee to provide a rigorous and informed challenge to the areas for discussion.
6. The Council Plan was adopted on 18 July 2024, and outlines Darlington Borough Council's long-term ambitions for Darlington and priorities for action over the next three years. It gives strategic direction to the Council and Council services, defining priorities, identifying key actions, and shaping delivery.
7. The Council Plan identifies six priorities, including 'Homes', which states that good housing should be affordable, safe, secure and of decent quality and that good housing is important for the health and wellbeing of residents and communities, it revitalises communities and encourages businesses to locate and create jobs; and 'Living Well', which states that more years in good health leads to more fulfilling lives, and a better standard of living, however the Plan highlights that are inequalities in Darlington across all stages of life which are influenced by broader social factors including education, employment, housing and income. These priorities are supported by eight and seven key deliverables respectively.

Forward Plan and Additional Items

8. Once the Work Programme has been agreed by this Scrutiny Committee, any Member seeking to add a new item to the work programme will need to complete a quad of aims.
9. A copy of the Forward Plan has been attached at **Appendix 3** for information.

Climate Considerations

10. Tackling climate change is a shared responsibility. Climate change as a stand-alone issue sits within the remit of the Economy and Resources Scrutiny Committee, however everything the Council does either has an impact on, or is impacted by, climate change so it is important that all Scrutiny Committees ensure that everything that comes before them has considered this. The Council Plan now includes climate change as a key principle underpinning everything the Council does.
11. The Sustainability and Climate Change Lead Officer has provided questions for Members of this Committee to consider when scrutinising reports. These questions will also form part of any submitted quad of aims. A copy of the questions has been attached at **Appendix 4**.

HEALTH AND HOUSING SCRUTINY COMMITTEE WORK PROGRAMME

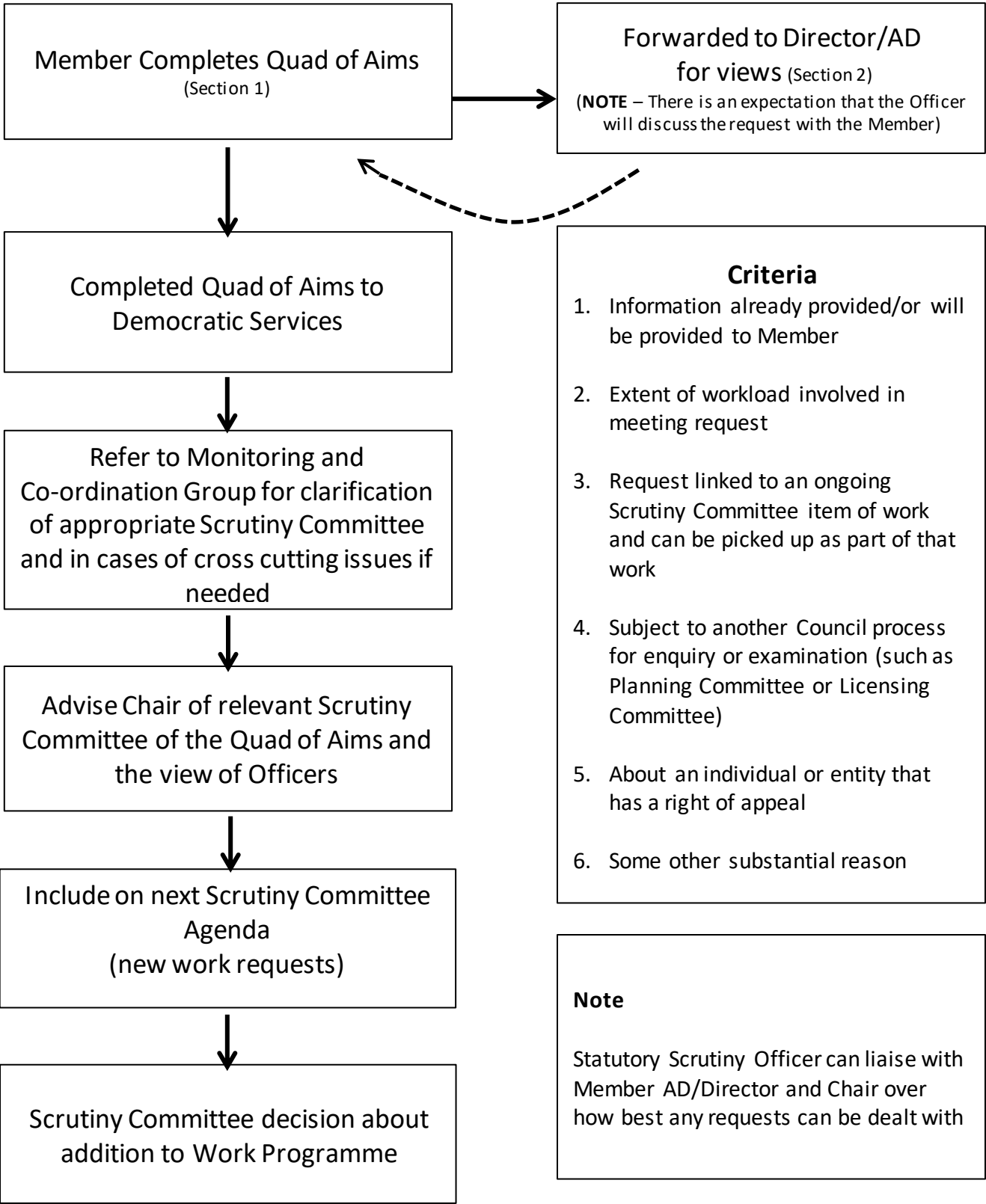
Topic	Timescale	Lead Officer/ Organisation Involved	Link to PMF (metrics)	Scrutiny's Role
Waiting lists for NHS services	18 June 2025	Martin Short, ICB		
Fire Safety Policy for purpose built blocks of flats, Sheltered and Extra Care Schemes 2025 – 2030	18 June 2025	Anthony Sandys		
Performance Management and Regulation/ Management of Change	Year End – 3 September 2025	Relevant AD		To receive biannual monitoring reports and undertake any further detailed work into particular outcomes if necessary
Regular Performance Reports to be Programmed	7 January 2026			
Healthy Weight Plan	3 September 2025	Joanne Hennessey		
Better Care Fund	3 September 2025	Paul Neil		Annual Report
Chronic Illness Prevention	3 September 2025	Ken Ross		
Health and Safety Compliance in Council Housing update	3 September 2025	Cheryl Williams / Anthony Sandys		Annual Update
Housing Services Anti-Social Behaviour Policy update	29 October 2025	Claire Gardner-Queen		Annual Update

Topic	Timescale	Lead Officer/ Organisation Involved	Link to PMF (metrics)	Scrutiny's Role
Director of Public Health Annual Report	29 October 2025	Lorraine Hughes		Annual Update
Health Protection Assurance Report	29 October 2025	Ken Ross / Cherry Stephenson		Annual Update
Housing Services Tenant Involvement Strategy 2024-2029	29 October 2025 Last considered 23/10/2024	Claire Gardner-Queen		Annual Update
Housing Revenue Account MTFP	7 January 2026	Anthony Sandys		Prior to submission to Cabinet
MTFP	7 January 2026 TBC	Brett Neilsen		
Quality Accounts – 6 Monthly Update	7 January 2026	TEWV/ CDDFT		
Year End Update	May/June 2026			
Suicide Prevention	7 January 2026	TBC		
Preventing Homelessness and Rough Sleeping Strategy 2025-2030	4 March 2026 Last considered 15/01/2025	Janette McMain		Annual Review

Topic	Timescale	Lead Officer/ Organisation Involved	Link to PMF (metrics)	Scrutiny's Role
Housing Services Climate Change Strategy update	15 April 2026 Last considered 02/04/2025	Anthony Sandys		Annual update
Housing Services Tenancy Policy 2025- 2030	TBC	Claire Turnbull		
Child Accident Prevention	TBC	Victoria Cooling, CDDFT		

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PROCESS FOR ADDING AN ITEM TO SCRUTINY COMMITTEE’S
PREVIOUSLY APPROVED WORK PROGRAMME



PLEASE RETURN TO DEMOCRATIC SERVICES

QUAD OF AIMS (MEMBERS' REQUEST FOR ITEM TO BE CONSIDERED BY SCRUTINY)

SECTION 1 TO BE COMPLETED BY MEMBERS

NOTE – This document should only be completed if there is a clearly defined and significant outcome from any potential further work. This document should **not** be completed as a request for or understanding of information.

REASON FOR REQUEST?	RESOURCE (WHAT OFFICER SUPPORT WOULD YOU REQUIRE?)
PROCESS (HOW CAN SCRUTINY ACHIEVE THE ANTICIPATED OUTCOME?)	HOW WILL THE OUTCOME MAKE A DIFFERENCE?

Signed Councillor

Date

SECTION 2 TO BE COMPLETED BY DIRECTORS/ASSISTANT DIRECTORS
(NOTE – There is an expectation that Officers will discuss the request with the Member)

<p>1. (a) Is the information available elsewhere? Yes No</p> <p>If yes, please indicate where the information can be found (attach if possible and return with this document to Democratic Services)</p> <p>.....</p> <p>(b) Have you already provided the information to the Member or will you shortly be doing so?</p> <p>.....</p> <p>2. If the request is included in the Scrutiny Committee work programme what are the likely workload implications for you/your staff?</p> <p>.....</p> <p>3. Can the request be included in an ongoing Scrutiny Committee item of work and picked up as part of that?</p> <p>.....</p> <p>4. Is there another Council process for enquiry or examination about the matter currently underway?</p> <p>.....</p> <p>5. Has the individual or entity some other right of appeal?</p> <p>.....</p> <p>6. Is there any substantial reason (other than the above) why you feel it should not be included on the work programme?</p> <p>.....</p>	<p style="text-align: center;">Criteria</p> <p>1. Information already provided/or will be provided to Member</p> <p>2. Extent of workload involved in meeting request</p> <p>3. Request linked to an ongoing Scrutiny Committee item of work and can be picked up as part of that work</p> <p>4. Subject to another Council process for enquiry or examination (such as Planning Committee or Licensing Committee)</p> <p>5. About an individual or entity that has a right of appeal</p> <p>6. Some other substantial reason</p>
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Signed **Position** **Date**

PLEASE RETURN TO DEMOCRATIC SERVICES

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**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**



DARLINGTON
Borough Council

**FORWARD PLAN
FOR THE PERIOD: 4 JUNE 2025 - 30 OCTOBER 2025**

Title	Decision Maker and Date
Consultation on the Renewal of the Town Centre Public Space Protection Order and Introduction of a Borough Wide Public Space Protection Order	Cabinet 10 Jun 2025
Physical Activity Strategy	Cabinet 10 Jun 2025
Representation on Other Bodies 2025/26	Cabinet 10 Jun 2025
Climate Change Progress	Cabinet 8 Jul 2025
Collection of Council Tax, Business Rates and Rent 2024/25	Cabinet 8 Jul 2025
Consultation on a Homes Strategy for the Borough	Cabinet 8 Jul 2025
Council Plan Performance Reporting Update - Quarter 4	Cabinet 8 Jul 2025
Disabled Facilities Grant 2025/26	Cabinet 8 Jul 2025
Dolphin Centre – Invest to Save Projects	Cabinet 8 Jul 2025
Housing Services Fire Safety Policy 2025-2030	Cabinet 8 Jul 2025
Introduction of a Boroughwide Article 4 Direction to control changes of use to Houses of Multiple Occupation	Cabinet 8 Jul 2025
Project Position Statement and Capital Programme Monitoring Outturn 2024/25	Cabinet 8 Jul 2025
Revenue Budget Outturn 2024/25	Cabinet 8 Jul 2025
Schedule of Transactions	Cabinet 8 Jul 2025
Town Centre Regeneration	Cabinet 8 Jul 2025
Xentrall Shared Services Annual Report	Cabinet 8 Jul 2025
Annual Review of the Investment Fund	Cabinet 9 Sep 2025
Blue Badge Application Procedures	Cabinet 9 Sep 2025
Climate Change and Nature Restoration Strategy	Cabinet 9 Sep 2025
Community Asset Transfer Policy	Cabinet 9 Sep 2025
Complaints, Compliments and Comments Annual Reports 2023/24	Cabinet 9 Sep 2025
Complaints Made to Local Government Ombudsman	Cabinet 9 Sep 2025
Project Position Statement and Capital Programme Monitoring - Quarter 1 2025/26	Cabinet 9 Sep 2025
Regulatory Investigatory Powers Act (RIPA)	Cabinet 9 Sep 2025
Revenue Budget Monitoring 2025/26 - Quarter 1	Cabinet 9 Sep 2025
Single Use Plastic Policy	Cabinet 9 Sep 2025
Strategic Asset Plan	Cabinet 9 Sep 2025
Treasury Management Annual Report and Outturn Prudential Indicators 2024/2025	Cabinet 9 Sep 2025
Woodland Road Waiting Restrictions	Cabinet 9 Sep 2025

**DARLINGTON BOROUGH COUNCIL
FORWARD PLAN**

Procurement Plan Update	Cabinet 7 Oct 2025
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Climate Considerations

Questions for scrutiny committee members to ask

1. Will the proposal/project result in an increase in carbon emissions?
 - How have you ensured that energy is not wasted or lost through poor insulation, heating the wrong areas or inefficient lighting?
 - Will there be an increase in business travel or commuting?
 - How easy will it be for people to travel by public transport, bicycle or walking?
 - Is there a need for travel at all?
 - Will there be an increase in waste disposal?
2. How will you reduce emissions?
 - How can you reduce energy use?
 - How can you reduce use of natural resources?
 - How can you ensure suppliers are working in a sustainable way?
 - How can you reduce waste?
 - How can you improve energy efficiency?
3. Will the proposal have any impacts on biodiversity (positive or negative)?
 - Will there be a net reduction in trees?
 - Are there opportunities for planting?
 - Are there other habitats or wildlife considerations?
4. Does the proposal incorporate/promote the development of renewable energy?
 - How can you increase the use of renewable energy in your project?
5. How can you minimise emissions from transport?
 - How can your project enable and encourage active travel?
 - How can you reduce the need for travel at all?
6. How will you make the proposal/project resilient to the impacts of climate change, such as more frequent severe weather, floods and heatwaves?
 - How can your project be designed to be resilient to these occurrences?
 - How can you ensure the building does not overheat in summer?
 - How will your service travel during these events?
 - How can communities using your service be protected?

Supplementary questions

- Does any procurement consider the impact on the environment?
- How does the project/proposal support the climate change strategy, tree and woodland strategy and sustainable communities strategy?
- How does the project/proposal support local businesses and employers to be sustainable?
- How can the project/proposal help develop local skills?

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Tees Valley Joint Health Scrutiny Committee **MINUTES AND DECISION RECORD**

13 March 2025

The meeting commenced at 10am in the Civic Centre, Hartlepool.

Present:

Responsible Authority Members:

Darlington Borough Council -

Hartlepool Borough Council - Cllr Boddy (CH), Cllr Roy

Middlesbrough Council - Cllr Cooper

Redcar and Cleveland Borough Council – Cllr Cawley (VC), Cllr Kay,

Stockton Borough Council - Cllr Besford, Cllr Coulson (substitute for Cllr Miller), Cllr Hall

Also Present:

Mark Cotton, Assistant Director of Communications and Engagement, North East Ambulance Service (NEAS)

Rachael Lucas, Assistant Director of Quality & Safety, NEAS

Beverley Murphy, Chief Nurse, Tees Esk and Wear Valleys NHS Foundation Trust (TEWV)

Shaun McKenna, General Manager, Adult Mental Health – Urgent Care, TEWV

Officers:

Caroline Breheny (R&CBC)

Gemma Jones, (HBC)

Susan Lightwing (MBC)

Caroline Leng (R&CBC)

Joan Stevens (HBC)

Gary Woods (SBC)

32. Apologies for Absence

Cllr Crane, Cllr Holroyd, Cllr Layton, Cllr Moore, Cllr Morrish, Cllr Miller, Cllr Scott and Hannah Miller.

33. Declarations of Interest

None

34. Minutes of the meeting held on 9th January 2024

Confirmed.

35. North East Ambulance Service (NEAS) NHS Foundation Trust Quality Account for 2024/25 – Assistant Director of Quality and Safety, NEAS

Representatives from NEAS were in attendance to present to the Committee their current position and performance and to provide an update on the 2024/25 quality priorities.

Data was provided to Members in relation to Patient Safety Incidents. It was noted that 3,327 patient safety incidents had occurred in the period April 2024 to January 2025. This equated to 2.7% per 1000 calls answered. There were 18 patient safety incident investigations with 2 meetings taking place per month focussing on incident reporting.

In relation to patient experience/feedback, 418 complaints had been received with 1294 appreciations also recorded. Work is undertaken to investigate how to improve practice after complaints are received. Appreciation stories are also fed back to the board.

The Committee was informed that, of the 11 Ambulance Service Trusts in England, NEAS were first in relation to ambulance response times, although it was recognised there was still room for improvement. In terms of Friends and Family satisfaction the 111 service gained a satisfaction score of 78.4%.

An update on the 2024/25 quality priorities was provided and focussed on patient safety, clinical effectiveness and patient experience. With regards to patient safety, learning from deaths and the prevention of future deaths reports were discussed. It was noted that policies and procedures had been reviewed to improve learning, alongside bringing teams together to share learning outcomes from Coroners. Improved engagement with bereaved families and carers, Coroners and medical examiners was also highlighted. Future work included making the Learning from Deaths process more efficient so that resources could be focused on areas that lead to change.

The second element of patient safety discussed was infection and prevention control. Achievements had included the reviewing of governance arrangements, audit tools, reporting and training. An application software based audit process had been introduced as well as the development of a local action plan. NEAS will continue to review policies and procedures to ensure they comply with national standards.

In terms of Clinical Effectiveness the Committee was informed that work undertaken had focussed on –

- reviewing the process for identifying a deteriorating patient
- introduction of a critical care desk
- further training provided to Specialist Paramedics in Critical Care (SPCC)
- deploying 2 specialist care rapid response vehicles
- improving the learning from the clinical audit of incidents
- improving the use of pre-hospital alerts

The final priority discussed related to patient experience with NEAS working to improve how the Trust triangulates and shares learning from incidents, complaints and lived experience. This included working with voluntary organisations to gather public feedback to help inform the new clinical strategy. Other achievements were improving colleagues' awareness of processes relating to complaints, claims and 'learning from events' meetings. Future work will focus on introducing the learning from claims into forums such as multi-disciplinary meetings.

In the questions that followed Members gained the following information –

- Mechanisms regarding how Coroner information is fed back to staff were explained.
- Emphasis is placed on systemic learning and how the organisation can learn to prevent future deaths. This is achieved via an executive bulletin that is circulated monthly and is also available on the internal website. Elements of this are also fed back into training sessions.
- All staff have mandatory training and different teams feed into this.
- In respect of vehicle cleaning methods, an audit tool is used to understand the 'hot spots' and how these methods can be improved.
- The percentage of Paramedics with advanced training was not available to the Committee but would be shared at a later date.
- 2 rapid response vehicles are based in 2 separate units across the North East, one of which is based in Hartlepool. Concerns were expressed that this was quite far north for the people of Redar. It was noted that use of these vehicles is monitored and that specialist paramedics are also situated in emergency departments.
- Some complaints focused on response times to incidents, this was being considered as an area for improvement.
- In relation to response times, NEAS are the only Ambulance Service that achieves the cat 1 response target.

- NEAS were also the fastest for category 2 response times, with 90% responding within 40mins. Whilst the NHS England target is 30min, NEAS are aiming for 18 mins, it was acknowledged that this may take some years to achieve this.
- It was highlighted that there was still room for improvement in terms of response times.
- In response to Friends and Family satisfaction, there was high appreciation for crew attitude however, this was also the subject of some complaints and this was monitored.
- The way calls are prioritised was explained.
- Call categories can change depending on the situation.
- A vast amount of work has gone into hospital turn around times.
- Work has also taken place to support patients that do not require hospital care and can be treated at home.

Representatives from NEAS were thanked for their presentation.

Decision

- (i) The Committee considered and commented on the update on performance in 2024-2025 and the priorities for quality improvement in 2025-2026
- (ii) That a statement of assurance will be prepared and submitted to the Trust, with final approval delegated to the Committee Chair and Vice-Chair
- (iii) That data will be shared in relation to the number of Paramedics with advanced training.

36. Tees Esk and Wear Valleys (TEWV) NHS Foundation Trust Quality Account priorities update 2024/25 – Chief Nurse, TEWV

The Chief Nurse was in attendance to provide the Committee with the Quality Account priorities update for 2024/25. Priorities were co-created with people using the service and led by people with lived experience.

Priorities included –

- Patient experience: Promoting education using lived experience
- Patient Safety: Relapse prevention
- Clinical effectiveness: Improving personalisation in urgent care.

Work undertaken has focussed on the promotion of education using lived experience. This has meant an increase in peer support workers and work undertaken to reduce the number of children graduating into adult mental health services by making sure their needs are being met.

Relapse prevention involves looking at a patients relapse indicators and in advance care planning, taking a more personalised approach.

Clinical effectiveness includes working to improve personalisation in urgent care with a view of reducing the need for patients to tell their story more than once. 85% staff will have undertaken the online training module in personalised care planning. The impact of this training will be assessed by evaluating the quality of patient experience feedback. Work will continue with services users to identify the priorities ahead building on the elements discussed, ensuring that the focus is having an impact on the people in their care.

Members were given an overview of the Niche assurance review which was commissioned by NHS England. This assessed to what extent the care TEWV provide is compliant with current standards and expectations, with a focus on the experiences of young people in their care. The report found that the quality of child and adolescent services had improved significantly. This had provided the Trust with assurance that young people would receive care in line with good practice and mandatory practice. In terms of the Child Adolescent Mental Health Service (CAMHS) the Trust now provides support via intensive home treatment teams and intensive positive behaviour support multidisciplinary teams.

Referring to the latest CQC well led inspection, data was provided in terms of the findings of each service as detailed on the presentation. An update was provided regarding the improvement plan with only 1 action now overdue.

Referencing the recent CQC crisis report publication published in February 2025, Members were informed a rating of 'good' had been achieved. Representatives explained the report had demonstrated the Trusts continuous improvement and positive impact on peoples experience of the Trust. This was against a national backdrop of increased demand for services. It was acknowledged there was more work to be done including improving the reporting of mandatory and statutory training and line supervision.

In the discussion that followed a Member asked if more people are being treated at home as this was the cheaper option. The Representative explained that for some admission into hospital is appropriate to allow them to be kept safe. However, being admitted to hospital was problematic for a person as this could impact on their caring responsibilities and the loss of control over their life. Ensuring hospital admission was the correct option for a person was key.

A Member asked for more information about how young people decide on their own care. It was explained that evidence suggests that involving young people in the decisions relating to their care can help them develop and manage their own life with a sense of choice. Clear assessments are in place but choice is given where possible, alongside working with the young person's family and support network. The mechanism of how people share their stories was also explained including how information is shared and reported on the electronic systems.

Attention was also drawn to the fact that supporting patients is not done in isolation and TEWV work with partners to help address a patients issues. Work takes place with Local Authorities and the Voluntary Sector regarding areas such as employment options and taking part in meaningful activities. TEWV have also established a voluntary and peer support programme.

Members were pleased that the crisis service had received a rating of good but commented there was no breakdown of how this had been achieved. Concerns were also expressed about the waiting list for CAMHS. Representatives explained that improvements will focus on making sure staff are well trained and properly supervised. The quality of risk assessment and care plans had greatly improved in this area.

In terms of recruitment there are currently no vacancies in secure inpatient services. However, the Trust were mindful that a drop in student nurses was anticipated and were looking at what they could do to fill the gap. The Trust were also looking at new ways of capturing clinical supervision recording.

A discussion was held in relation to waiting lists across CAMHS in particular those waiting for assessments for neuro diverse disorders. Representatives commented that this was a national problem and ways to manage this were being explored.

In terms of the CQC well led inspection, the 1 recommendation overdue related to 2 policies being reviewed in line with best practice. In part this was due to the Trust being able to demonstrate that the training is being embedded which will take some months.

A Member referred to tables detailed in the presentation which related to the CQC well led inspection and asked if clinical supervision was happening on wards. Reassurances was provided that supervision is happening but previously there was not a systematic way of reporting this but this was now being reviewed.

Representatives from TEWV were thanked for their presentation.

Decision

- (i) The Committee considered and commented on the update on performance in 2024-2025 and the priorities for quality improvement in 2025-2026.
- (ii) That a statement of assurance will be prepared and submitted to the Trust, with final approval delegated to the Committee Chair and Vice-Chair.

37. Crisis Screening, Triage and Assessment Overview - Durham and Tees Valley – General Manager, Adult Mental Health – Urgent Care, TEWV

Information was provided to the Committee regarding crisis screening, triage and assessment in Durham and Tees Valley. Specifically, the implementation of the new digital telephony system launched in March 2024. Originally a 12-hour day shift service this was now 24/7 and could be accessed via NHS 111 (option 2). This was now a single source of access and with all calls being screened by the Durham and Tees Valley screening service. The use of screening tools has meant that patients are directed to the most appropriate source of support. This has allowed crisis team clinicians to focus their time on those that need it the most.

Since the implementation of the screening team the service has seen a reduction in call volume and repeat callers. Any patients waiting over 7 minutes are offered a call back. It was noted that only 3% of calls were abandoned by patients, with call answer rates remaining positive. However, despite being better than that national average it was acknowledged that there was still room for improvement. Further information on call times was detailed in the presentation.

The service, based at West Park Hospital, answers calls from Durham and the Tees Valley and calls are then passed to local teams. There has been a significant improvement to triage call answer rates. The child and adolescent mental health service has sustained a call answer rate of 95%. There had also been a significant volume of calls to the professional line. Data was provided in relation to the service for the month of December 2024.

The next steps for the service were outlined and the Committee were advised that in terms of workforce pressures, the service currently had no vacancies. There had been some technical issues which were expected to be resolved in April 2025. In terms of future improvements, 2 safe havens were to be opened across the Tees Valley and the service had begun to work closely with the voluntary sector and neighbourhood based services. This was with a view of supporting patients and preventing them from needing crisis care.

In the discussion that followed a query was raised in terms of multiple ambulances attending for one patient. It was explained that some situations, when assessed for safety, may generate that level of response however, learning from those types of situations was ongoing.

Members asked if the Samaritans number was still being shared with patients. Representatives explained that the majority of patients were being referred to the TEWV listening service and work was taking place around the publicity for accessing the 111 service for mental health.

Further information was provided in relation to the abandoned calls and the 7 minute call back function, this was being closely monitored.

Members were pleased to see that patients were being signposted to different sources of support and thanked Representatives for their detailed presentation.

Decision

- (i) Members noted the content of the adult mental health service urgent care presentation.

38. Work Programme for 2024/2025

The Work programme was noted. The Chair explained that future items for the work programme would be discussed at the first meeting of the municipal year

The Chair expressed thanks to Members for their attendance and contributions during 2024/25 as this was the final meeting scheduled for the current municipal year. As per the established rotational arrangements, support of the Committee would pass onto Redcar and Cleveland Borough Council for the 2025-2026 municipal year, with the first meeting being held on the 8th May 2025.

The meeting concluded at 12pm.

CHAIR