

Housing Health and Safety Compliance Report 2025/26



DARLINGTON
Borough Council



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Summary

This annual compliance report covers the period from **1 April 2025** to **31 March 2026**, focusing on DBC's sheltered schemes and tenanted properties.

RAG Rating provides a summary of performance against a target. **Green** indicates performance was strong. **Amber** shows performance needs improvement, but actions are in place to address the gap. **Red** highlights that performance was inadequate and action is required.

Alongside the RAG Rating, a trend indicator is also provided. This shows whether performance has improved, declined, or remained the same compared to the previous quarter. Where applicable, the percentage change is detailed within the relevant area of compliance section.

Trend Indicator	Explanation
▲	This indicates an increase from the previous quarters rating.
▼	This indicates a decrease from the previous quarters rating.
=	This indicates the rating has remained the same as the previous quarters.
N/A	The RAG Rating is not recorded for this compliance area.

RAG Ratings

Area of compliance	RAG Rating	Trend
Asbestos - Overall Rating	100%	=
Management Surveys Programme	100%	=
General Housing	100%	=
Residential Blocks	100%	=
Awaab's Law		
Emergency Hazards	86.79%	N/A
Significant Hazards	94.39%	N/A
Electrical Safety - Overall Rating	99.82%	
Sheltered Schemes	100%	=
General Housing	99.48%	▲
Residential Blocks	100%	=
Fire Risk Assessments - Overall Rating	100%	=
Sheltered Schemes / Community centres	100%	=
Residential Blocks	100%	N/A
Fire doors (Installations)	66.50%	▲
Fire doors (Inspections – new doors)	52.10%	▲
Gas Safety - Overall Rating	99.53%	
Sheltered Schemes	100%	=
General Housing	99.68%	▲
Residential Alarms		
Smoke Alarms	98.82%	▼
Carbon Monoxide Alarms	99.89%	▲
Legionella (Sheltered accommodation inspection, and monitoring)	100%	=
Radon	N/A	N/A
Stock Condition Surveys	77.80%	▲
Stairlifts & Lifts (Communal and residential)		
Housing Scheme Lifts	100%	=
Residential Stairlifts	95.83%	▲

N/A – Not comparable / new metric (Overall figure shown is a simple average and not based on TSM property-level calculation)

Outstanding Actions

Who?	Action	Action raised	Target date	Updates/notes	Completion date
Housing Asset and Compliance Manager	Develop Fire Alarm Activation Process - Need to pull together program to decommission other properties.	September 2024	Dec 2026	This is still in progress, however Housing are due to embark on decommissioning alarms in the low-rise flats due to the stay-put policy; so this will eliminate false call outs.	
Housing Asset and Compliance Manager	Review processes on Fire Risk Assessments	September 2024	September 2026	Housing Asset and Compliance Manager working with Building Surveying Manager. Need to document the plan. Work is ongoing with MRI to automate this in the system.	
QS and M&E Surveying /Compliance Manager	Update Housing Asset and Compliance Manager with where APEC are.	18/11/24	July 2026	A 50% checked data load test was completed by the Compliance Officer and handed back to the Systems Administrator with a few key points to resolve.	
All	Work on meeting Awaab's Law requirements	14/8/25	March 2026	First phase complete. Need to continue to monitor processes to make sure they're working.	June 2026
Building Surveying Manager and Service & Repairs	Complete sheltered fire door inspections,	10/11/25	August 2026	Received sample fire doors, will be testing a couple soon. Results may not be received back till next year.	

Manager (Public Build)	assess for automation.				
Housing Manager, Building Surveying Manager, and Housing Asset and Compliance Manager	Publicise Fire Risk Assessment	25/2/26	August 2026		
Housing Asset and Compliance Team Leader	Develop Radon testing programme	12/5/26	September 2026		
Housing Asset and Compliance Team Leader	Add new "External Validation" section to Report	12/5/26	May 2027		
Housing Asset and Compliance Team Leader	Fix Awaab's data quality issues	22/6/26	October 2026	Will be discussed as part of the Damp & Mould Working Group.	

Asbestos

Asbestos Management Survey Programme

During 2025/26, a total of **9 schemes** required an asbestos management survey or re-inspection.

Annual Performance Summary

Measure	Survey Completed
Schemes requiring survey	9
Schemes completed	9
Compliance	100%

Quarterly delivery profile (supporting detail):

Performance across the year is set out below:

Quarter 1 (April – June)

No schemes due for survey. Compliance maintained at 100%.

Quarter 2 (July – September)

3 schemes were due; all were completed – 100% compliance.

Quarter 3 (October – December)

3 schemes were due; all were completed – 100% compliance.

Quarter 4 (January – March)

3 schemes were due; all were completed – 100% compliance.

For regulatory reporting, compliance is measured based on dwelling units within relevant properties, rather than the number of buildings.

- 3 of the 9 buildings are Community Centres and contain no dwelling units; these are excluded from the regulatory return.
- The remaining 6 schemes contain 244 dwelling units, all of which are compliant

All required surveys were completed by year-end.

Year-end position: 100% compliance

TREND – 100%, no change from 2024/25 year-end position

Asbestos

Asbestos General Housing

The asset system is now configured to accept asbestos survey data; however, further work is required to establish a fully operational asbestos register. This includes the preparation and formatting of both historical and newly commissioned survey data for upload. The system is currently undergoing testing and quality assurance with MRI, with implementation anticipated in 2026.

Work is ongoing to ensure operatives have access to accurate and up-to-date information on the presence or presumed presence of asbestos.

There are two types of asbestos surveys applicable to general housing:

- Management surveys
- Refurbishment and demolition (major works) surveys

There is no legal requirement to undertake asbestos surveys within occupied tenanted properties.

Annual Performance Summary:

Measure	Value
Properties requiring surveys	412
Surveys recorded	412
Compliance	100%

Quarterly delivery profile (supporting detail):

Quarter	Required	Completed	Compliance
Q1	96	96	100%
Q2	89	89	100%
Q3	88	65	73.86%
Q4	139	162	100%

Performance in Quarter 3 was impacted by access constraints. These surveys were subsequently completed in Q4, resulting in completions exceeding the number originally due in that quarter.

Year-end position: 100% compliance

TREND – 100%, no change from 2024/25 year-end position

Asbestos

Asbestos Flat Blocks

An annual programme identified **77 residential blocks** requiring asbestos management surveys or re-inspection due to the presence of asbestos in communal areas.

Annual Performance Summary:

Measure	Value
Blocks requiring survey	77
Surveys completed	77
Compliance	100%

Quarterly delivery profile (supporting detail):

Quarter	No blocks requiring surveys	Surveys completed	Completion %
Q1	6	6	100%
Q2	9	9	100%
Q3	43	43	100%
Q4	19	19	100%

There are 77 blocks (379 dwelling units) requiring an asbestos management survey or re-inspection, and all are fully compliant.

Year-end position: 100% compliance

TREND – 100%, no change from 2024/25 year-end position

Awaab's - Emergency Hazards

Awaab's Law came into force on **27 October 2025**. Since implementation, work has been undertaken to review and strengthen processes and ICT systems to ensure emergency hazards are:

- Identified promptly
- Responded to within required timescales
- Accurately recorded and monitored

Controls have been introduced to reduce the risk of cases not being captured or actioned appropriately.

Benchmarking and engagement with sector partners, including Housemark, has supported the development of a consistent approach to data collection and reporting.

Due to the timing of implementation partway through the financial year, performance data reflects a partial-year position (Q3–Q4 only).

Annual Performance Summary:

Measure	Total
Emergency cases reported	2714
Cases per 1,000 properties	518
Emergency cases resolved	2506
% resolved within 24 hours	86.79%

Quarterly delivery profile (supporting detail):

Quarter	Reported	Resolved	% within 24 hrs
Q3	1521	1394	89.16%
Q4	1193	1112	83.72%

Year-end position

- 86.79% of emergency hazards resolved within 24 hours.
- 81 cases recorded as overdue at year-end.

Update 29th June: 77 cases are still listed as overdue. This is a difficult metric to monitor manually. From Q1 2026/27, cases will be replaced by individual jobs, regardless of any duplicate entries, as they are currently too difficult to track and this change will simplify audit reporting. It is unlikely that these jobs are still ongoing; however, the tickets were never formally closed. Work will begin in July to email all unresolved job tickets for review, with the aim of assessing and closing them where appropriate.

“Resolved” refers to completion of work required to make the property safe and mitigate the immediate hazard. Any follow-on or preventative works are excluded from this measure.

Key Observations

- Damp and mould hazards accounted for 1.69% of emergency cases from Q3 onwards; on a full-year basis this increased from 0.02% (2024/25) to 1.2% (2025/26), reflecting improved identification and reporting following the introduction of Awaab’s Law.
- Most emergency hazards related to heating and electrical issues.
- 2 properties required rehousing, with 1 refusal recorded.

Reported volumes in Q3 were likely elevated due to the stock condition survey programme, which continued into Q4. As this activity reduces, reported cases are expected to stabilise from Q1 2026/27 onwards.

Year-end position: 86.79% compliance

TREND – Not comparable (Awaab’s Law introduced October 2025)

Awaab's - Significant Hazards

A 'significant hazard' under Awaab's Law is one that poses a significant risk of harm to the health or safety of an occupier of a social home.

Due to the legislation coming into force during the year, performance data reflects a partial-year position (Q3–Q4 only).

Annual Performance Summary:

Measure	Total
Significant cases reported	856
Significant cases investigated	856
% investigated within target	94.39%
% damp & mould repairs initiated within 5 days	55.96%

Quarterly delivery profile (supporting detail):

Quarter	Reported	Within target %	Repair initiation %
Q3	496	98.99%	58.50%
Q4	360	88.10%	52.78%

Year-end position

- 94.39% of cases investigated within required timescales.
- Reported performance for repair initiation remains developing and subject to data limitations.

Key observations

- Reported volumes in Q3 were elevated due to stock condition survey activity.
- This activity continued into Q4 and is expected to reduce from Q1 2026/27.
- Further work is required to improve data capture and reporting accuracy.
- Significant damp and mould cases increased from 1,073 in 2024/25 to 1,583 in 2025/26; this rise may reflect the impact of Awaab's Law and improved identification and reporting processes.

Year-end position: 94.39% compliance

TREND – Not comparable (Awaab’s Law introduced October 2025)

Data limitations and methodology (supporting context)

Measurement of the percentage of **damp and mould repairs initiated within 5 working days** is still a concern due to:

- Hazards identified through the stock condition survey programme not being recorded through standard workflows.
- Repairs not consistently logged as distinct, trackable events.
- Missing or incomplete timestamps required to assess performance.
- Cases still ongoing at the point of reporting.

As the stock condition survey programme slows down, there will be fewer “investigations” taking place outside of the repairs system, so it should get easier to track this.

Where sufficient and reliable data was not available, cases were excluded from the calculation.

Among cases where data was available, performance was mixed, with a proportion of repairs initiated within required timescales.

Electrical Safety

Electrical Safety – Sheltered Schemes, Extra Care & Community Centres

Electrical installations in our 18 properties are subject to an EICR at 5-year intervals.

Annual Performance Summary:

Measure	Value
Schemes requiring EICR in year	2
Completed within timescale	2
Compliance	100%

Quarterly delivery profile (supporting detail):

A total of 2 schemes required electrical inspection during 2025/26.

Quarter 1 April – June

1 due for safety check, 1 completed within date.

Quarter 2 & Quarter 3 – September & December

1 due for safety check, 1 completed within date.

Quarter 4 January – March

0 properties due.

8 of the 18 buildings are Community Centres and contain no dwelling units; these are excluded from the regulatory return.

In the 10 schemes, there are 353 dwelling units. Of these, **100%** are compliant.

Year-end position: 100% compliance

TREND – 100%, no change from 2024/25 year-end position.

Inspection results

Two DEICR inspections were undertaken during the year. One inspection was assessed as satisfactory, with no remedial actions required. The other was assessed as *Unsatisfactory*, indicating that the electrical installation either presented an immediate danger to life or contained potentially hazardous defects.

- **C1** – Immediate danger; urgent remedial action required.
- **C2** – Potentially dangerous condition that, while not immediately life-threatening, could escalate into a serious hazard.
- **C3** – Non-dangerous issue where improvement is recommended.
- **FI** – Further investigation is required to determine the safety of the installation.

Actions

Risk Level	Total identified during the year	Total completed during the year	Outstanding at year end
C1	0	0	0
C2	2	2	0
C3	12	N/A	N/A
FI	0	0	0

C3 classifications are advisory recommendations only, typically relating to installations that do not meet current regulations but remain compliant with the regulations in place at the time of installation. As such, there is no requirement for retrospective remedial action.

FI classifications indicate that further investigation is required to determine the safety of the installation. **No FI cases were identified during the year.** Where FI cases are identified, they will be reviewed and managed in line with the agreed compliance process.

Following internal compliance discussions, C3 cases will be recorded within the risk remedial log going forward. Recommendations will be documented and reviewed; however, they may not necessarily be actioned.

A total of **12 C3 cases were identified during the year.** These are excluded from the “Outstanding” figures reported above, as they do not constitute mandatory works and are therefore not considered outstanding.

Electrical Safety

Electrical Safety – Domestic Electrical Installation Conditions Report (DEICR) Council Housing

Electrical installations in our properties are subject to an EICR at 5-year intervals. The current five-year inspection programme has now been completed, with ongoing activity focused on maintaining compliance through cyclical re-inspection.

Overall compliance for quarters

Date	Overall, compliance at end of quarter	Overall, out of compliance	Total	Total compliance as %
Q1	5161	82	5243	98.44%
Q2	5167	67	5234	98.72%
Q3	5211	34	5245	99.35%
Q4	5216	27	5243	99.48%

TREND – 99.48%, an increase of 3.31 percentage points from the 2024/25 year-end position.

Year-end Breakdown

Status	End of year totals
Abatement Notice Letter	3
Job Raised	1
Notice of Intended Entry	19
Property Void	4
Total	27

(A Notice of Intended Entry is a formal written notice issued when a tenant fails to provide access. It gives at least 24–48 hours of the landlord's intent to enter the property.)

Time Spent Out of Compliance

Length of time	Total
0-3 Months (1–90 Days)	5
3-6 Months (91–180 Days)	0
6-12 Months (181–365 Days)	0
Over 12 Months (366+ Days)	22

Update 29th June:

There are currently 16 properties non-compliant, comprising 3 within 0–3 months and 13 over 12 months. Of the 13 over 12 months, three have appointments scheduled in July, with recent activity also including a no access visit in May, contact made in June, and telephone contact in May across other cases. While some records show no new updates since the last quarter, these cases reflect ongoing access constraints and previous repeated attempts to gain entry. They continue to be actively managed, with next steps under review and further action progressing where required.

Tenancy Management Update:

Legal proceedings and active chasing remain in place for all outstanding addresses, with Housing teams continuing to work closely with tenants to secure appointments or gain access to properties.

Warrants:

- Two properties had warrants applied for during the year where servicing had not yet been completed. Of these, one property had a safety check completed in April 2026, and the second property is scheduled to be serviced in mid-May 2026. (Update – property no accessed again in May so remains outstanding).

Injunctions:

- No injunctions were applied for during the year.

Inspection results

- C1 – Immediate danger requiring urgent remedial action.
- C2 – Potentially dangerous condition that, while not immediately life-threatening, could escalate into a serious hazard.
- C3 – non-dangerous issue where improvement is recommended.
- FI – Further investigation is necessary to determine the safety of the installation.

Codes	Number of observations (year so far)	Number of addresses affected (year so far)	No. properties with outstanding observations
C1	37	24	0
C2	333	149	4
C3	3669	869	9
FI	357	237	237

(Out of 1110 addresses)

All C1 actions are addressed and resolved on the same day as the electrical service. C2 actions are addressed on the same day where possible, or the next working day if immediate rectification is not feasible.

Of the **four outstanding C2 cases at year-end**, one has been completed, one has works scheduled, and two remain outstanding due to access issues despite multiple attempts. These have been escalated, with further appointments arranged and cases under ongoing monitoring.

Electrical Certificate Quality Checks

Annual Performance Summary

Measure	Value
Checks due	360
Checks completed	584
Requiring validation	54
Overall quality	98.01%
Outstanding at year-end	4

Quarterly Delivery Profile (Supporting Detail)

Quarter	Checks due	Completed	Requiring validation	Outstanding	Quality
Q1	90	90	9	0	100%
Q2	90	90	8	2	97.77%
Q3	90	90	11	4	95.55%
Q4	90	314	26	4	98.73%

Narrative

The team undertakes random quality checks of electrical certificates to verify accuracy, including correct property details and certification dates. Where discrepancies or missing documentation are identified, cases are escalated to the Electrical Manager.

Where more than 16% of checks identify issues within a given period, the sample size is increased to 20%, alongside recommendations for improved practice.

A higher number of checks were completed in Quarter 4 in response to issues identified earlier in the year. As a proportion of checks undertaken, issues reduced in Q4 and so sampling will return to normal levels.

Update:

Four certificates were outstanding at year-end where works had been completed but certification had not yet been received. All documentation has since been provided and verified, and there are now no outstanding certificates.

Electrical Safety

Electrical Safety – Residential Flat Blocks

Our communal flat blocks operate under a structured five-year electrical service schedule, with each phase completing maintenance in consecutive years.

Programme Overview

Year & group	Number of blocks	Next due
Phase A	39	2024/25
Phase B	34	2025/26
Phase C	34	2026/27
Phase D	37	2027/28
Phase E	53	2028/29

Across all phases there are **978 dwelling units**. The 2025/26 programme (Phase B) comprised 34 flat blocks, all scheduled for servicing during the financial year.

Annual Performance Summary

Measure	Value
Blocks requiring service	34
Blocks compliant at year-end	34
Compliance	100%

Year-end position: 100% compliance

TREND – 100%, no change from 2024/25 year-end position

Update:

Communal flat blocks have now been incorporated into the Asset system, improving visibility of compliance data and supporting ongoing monitoring.

Fire Risk Assessment

Fire Risk Assessment – Fire Regulatory Reform Audits (FRRA)

FRRAs operate on a three-year cycle, covering 18 sheltered schemes and community centres.

During 2025/26, 9 schemes required an FRA.

Annual Performance Summary

Measure	Value
Schemes requiring FRA	9
Schemes completed	9
Completed within target date	1
Compliance	100%

Quarterly Delivery Profile (Supporting Detail)

Quarter	Due	Completed	Completed in date	Compliance
Q1	1	1	1	100%
Q2	3	3	0	100%
Q3	0	0	0	100%
Q4	5	5	0	100%

Narrative

For regulatory reporting, compliance is measured based on the number of dwelling units within properties requiring an FRA, rather than the number of individual schemes.

Of the 18 buildings included in the programme, **8 are community centres** and contain no dwelling units. These are excluded from the regulatory return.

Across the remaining **10 schemes (353 dwelling units)**, 100% are compliant.

Year-end position: 100% compliance

TREND – 100%, no change from 2024/25 year-end position

Actions

Risk Level	Total Identified (Year)	Total Completed (Year)	Outstanding 2025/26	Outstanding 2024/25
Priority 1 - High Risk	8	0	8 (1 still within date target)	2
Priority 2 - Medium Risk	12	3	9 (2 still within date target)	5
Priority 3 - Low Risk	8	4	4 (3 still within date target)	2
TOTAL	28	5	21 (6 still within date)	9

Outstanding from 2024/25:

High Risk

King William Street Community Centre

- Rear fire exits external signage:
The rear fire exit requires a 'Fire Exit Keep Clear' sign on the outside of the door to ensure it is kept clear. **Works now complete, as of 30/06/26.**

Wesley Court Community Centre

- Rear fire exits external signage:
The rear fire exit requires a 'Fire Exit Keep Clear' sign on the outside of the door to ensure it is kept clear. **Works now complete, as of 30/06/26.**

Medium Risk

King William Street Community Centre

- Visiting groups fire safety training:
Fire emergency plan in place but visiting groups' awareness is unclear—provide all users with fire safety instructions or training as part of facility use agreements.
Corporate Landlord has requested an update from scheme manager as this is their responsibility to organise (30/06/26).

Richard Court Community Centre

- Visiting groups fire safety training:
Fire emergency plan in place but visiting groups' awareness is unclear—provide all users with fire safety instructions or training as part of facility use agreements.
Corporate Landlord has requested an update from scheme manager as this is their responsibility to organise (30/06/26).

Roxby Court

- Electrical meter cupboard doors:
Issue identified 23/07/2024 regarding unknown fire resistance of meter cupboard doors. Check instigated 09/01/2026 and chased 23/01/2026. Site visit carried out 29/01/2026, confirming doors are original and not fire-resistant. Matter discussed with Gary Bage and client, to be progressed. **Works now complete, as of 26/05/26.**
- Stair edging – stone staircase:
Requirement for contrasting stair edge markings identified 23/07/2024. Check instigated 09/01/2026 and chased 23/01/2026. Site visit completed 29/01/2026, confirming staircase remains unpainted. Issue referred to Gary Bage for remedial works. **Contractor Mitie have been chased by Corporate Landlord multiple times to provide suitable dates for the work.**

Wesley Court Community Centre

- Visiting groups fire safety training:
Fire emergency plan in place but visiting groups' awareness is unclear—provide all users with fire safety instructions or training as part of facility use agreements. **Corporate Landlord has requested an update from scheme manager as this is their responsibility to organise (30/06/26).**

Low Risk

Dalkeith House

- Goodwill Advice – Advice only:
It is recommended that a class F extinguisher is provided in the kitchen due to the use of a deep fat fryer. **Purchase order raised 06/07/26 by Corporate Landlord for extinguisher to be provided.**

Richard Court Community Centre

- Lack of fire extinguishers:
An additional water or foam extinguisher should be provided in the main room of the centre. **Works now complete, as of 30/06/26.**

Outstanding 2025/26:

High Risk

Dinsdale Court:

- Compartmentation (laundry room door): **(Completed 22/04/2026)**
- Compartmentation (plant room door): **(Completed 22/04/2026)**

- Compartmentation (scooter door): (Completed 22/04/2026)
 - Compartmentation (flat doors):
Included within the Housing Surveying Team's fire door replacement programme.
(Housing Surveying Team is currently running a programme of replacing all fire doors
- works on schemes due to start October 2026)
-

Linden Court

- Fire Door Repair:
Door furniture (spy hole and letterbox) fire rating unknown—inspect and replace if required to ensure flat entrance doors maintain their fire resistance performance.
(Housing Surveying Team is currently running a programme of replacing all fire doors
- works on schemes due to start October 2026)
-

Oban Court

- Compartmentation above cross-corridor door:
Missing fire stopping identified 16/02/2026. Partial works undertaken. EFS Quote received; approval pending. (Works completed as of 05/05/26, paperwork provided 06/07/26)
 - External fire escape route – slip hazard:
Issue identified 16/02/2026. Cleaning requested 10/03/2026, reminder issued 19/03/2026. (Completed 22/04/2026)
-

Windsor Court

- Compartmentation above cross-corridor door:
Issue identified 24/02/2026. Referred for advice 14/04/2026 following omission from fire door survey. Quote requested 21/04/2026. (Job ticket raised 10/07/26, by Corporate Landlord, to check works are completed. Completed 13/7/26)

Compliance update: three of the nine outstanding medium-risk actions from 2025/26 and three of the four low-risk actions have now been completed.

Fire Risk Assessment

Fire Risk Assessment – Blocks of Flats

Fire Risk Assessments (FRAs) for blocks operate on a three-year cycle. There are **199 blocks** in total, split across three cycle groups.

Although legislation does not prescribe a fixed timeframe, it requires FRAs to be reviewed regularly to ensure they remain up to date.

Programme Overview

Year & Group	Number of blocks	No of Units	Next due
2023/24 (Group A)	80	400	2026/27
2024/25 (Group B)	52	268	2027/28
2025/26 (Group C)	67	310	2028/29

Annual Performance Summary

Measure	Value
Blocks requiring FRA	67
Blocks completed	67
Compliance	100%

Quarterly Delivery Profile (Supporting Detail)

Quarter	Completed Blocks	Completed Dwellings	Outstanding Blocks	Outstanding Dwellings
Q1	3	16	3	17
Q2	64	294	0	0
Q3	0	0	0	0
Q4	0	0	0	0

Narrative

All blocks due for a fire risk assessment during 2025/26 have been assessed, with all documentation completed and confirmed.

Across all phases, there are **978 dwelling units**, of which 100% are compliant.

Year-end position: 100% compliance

TREND – Not comparable

FRA Log Actions

Risk Level	Total Raised	Total Complete	Total Ongoing	Total Overdue
Priority 1 - Urgent	699	698	0	1
Priority 2 - Short Term	545	405	135	5
Priority 3 - Medium Term	350	134	71	145
Priority 4 - Long Term	188	183	5	0
Priority 5 - Consideration for future	384	374	9	0

Overdue Summary

Overdue Priority 1

- For Surveying, 1 action remains outstanding and overdue, for confirming fire resistance of boxing. (Update May 2026 – Priority 1 action completed)

Overdue Priority 2

- There remain 5 actions overdue for Tenancy Management, all involving the removal of items from balconies. All have been sent initial and follow up letters with latest action on 30/03/2026 to raise to Management Officers. Fire doors due to be replaced in area in July 2026 so items will be reviewed during visit.

Overdue Priority 3

- Actions remain overdue relating to the completion of PCFRA's for lifeline (extra care) flats and the development of improved fire safety data recording and monitoring systems.
- Work is ongoing to implement identified actions and establish consistent reporting and oversight arrangements.

Fire Risk Assessment

Fire Safety – Doors

- Housing commenced a 3-year programme to replace fire doors in communal blocks to meet Fire Safety (England) Regulations 2022.
- An enhanced inspection regime has been introduced to complement Fire Risk Assessments, ensuring non-compliant doors are replaced on a responsive basis.
- A fire safety document is in development, providing detailed guidance on fire door management and policy.
- Housing will replace flat entrance doors within communal schemes, while Building Services will replace communal doors.

All non-sheltered scheme doors are included within the replacement programme. A total of **842 doors** have been inspected, with re-inspections undertaken by Anglian following the initial survey.

Programme progress is summarised below:

Annual Performance Summary

Measure	Value
Doors requiring replacement	842
Doors completed	560
Completion	66.50%

The programme commenced from a baseline of 0%. By the end of Year 2 of 3, **66% completion has been achieved**, indicating the programme is on track.

Access is attempted on three occasions by the contractor before cases are referred to Management Services for escalation.

TREND – 66.50%, an increase of 26.94 percentage points from 2024/25 year-end position.

Fire Safety Door Inspections:

Fire door inspections are carried out on a cyclical basis, aligned to installation cohorts, to ensure ongoing compliance.

Annual Performance Summary

Measure	Value
Doors due for inspection	336
Doors inspected	175
Inspection rate	52.10%
Passed inspection	136
Failed inspection	39

The majority of failures appear to be due to gaps being too narrow, so need adjustments. We are arranging training with our Contractor so that our Surveyors will be able to carry this out themselves.

The % fire doors inspected was low in 2025/26 due to staffing resources and no access issues. However, the current performance is now approx. 85% and we are confident of full compliance in 2026-27.

Quarterly Delivery Profile (Supporting Detail)

Quarter	Due	Inspected	% Inspected
Q1	91	61	61.90%
Q2	37	21	57.00%
Q3	47	29	61.70%
Q4	161	64	39.75%

Narrative

Where access issues have delayed inspections, progress against each quarterly cohort is updated cumulatively. This means inspections completed in later quarters are attributed back to the original due period.

TREND – 52.10%, an increase of 31.70 percentage points from 2024/25 year-end position.

Ongoing developments

Fire door compliance will be incorporated into the Asset system, with a defined inspection process now in place.

A survey is being carried out to ensure certification of compliance is in place for all recent new build schemes. We are awaiting results.

Gas Safety

Gas Safety – Sheltered Schemes

Gas safety inspections are conducted every 12 months, with 16 schemes scheduled for completion annually.

Annual Performance Summary

Measure	Value
Schemes requiring gas safety inspection	16
Schemes completed	16
Compliance	100%

Quarterly Delivery Profile (Supporting Detail)

Quarter	Due	Completed
Q1	2	2
Q2	2	4
Q3	6	6
Q4	6	4

Narrative:

Of the 16 schemes, 7 are community centres and contain no dwelling units; these are excluded from the regulatory return.

Across the remaining **9 schemes (335 dwelling units)**, all are compliant.

Year-end position: 100% compliance

TREND – 100%, no change from 2024/25 year-end position

Gas Safety

Gas Safety - General Housing

At year-end, **4,980 of 4,996 properties** requiring a gas safety check had a valid certificate in place, achieving **99.68% compliance**, exceeding the annual target of 99.5%.

Annual Performance Summary

Measure	Value
Properties requiring gas safety check	4,996
Properties compliant at year-end	4,980
Compliance	99.68%

Quarterly Delivery Profile (Supporting Detail)

Quarter	Properties requiring check	Compliant at quarter end	Overdue	% compliant
Q1	4995	4978	17	99.66%
Q2	4986	4960	20	99.60%
Q3	5003	4978	25	99.50%
Q4	4996	4980	16	99.68%

Narrative: Fluctuations in stock numbers reflect Right to Buy sales and new build properties being added during the year.

Enforcement and Activity

- 130 abatement notices issued.
- 17 successful Management Officer visits (69 unsuccessful).
- 4,929 calls made relating to gas servicing.
- 5 warrants executed.

All properties subject to warrant action were compliant at year-end, either through completed servicing or safe capping of the gas supply.

TREND – 99.68%, an increase of 0.14 percentage points from 2024/25 year-end position.

Time Spent Out of Compliance

Length of time	Properties at year-end	Position at 29/04/2026
0-3 Months (1–90 Days)	12	0
3-6 Months (91–180 Days)	3 (1 void)	3 (1 void)
6-12 Months (181–365 Days)	1 (1 void)	1 (1 void)
Over 12 Months (366+ Days)	0	0
Total	16	4

Update:

Following year-end, all properties within the 0–3 month category were serviced or safely capped in April. A small number required manual intervention to raise jobs.

Of the 4 properties remaining:

- 2 have potentially been capped but are awaiting supporting documentation.
- 2 are void properties.

Capped Properties

Length of time Capped	Tenanted properties	Void properties
3 months (0-90 Days)	16	101
3 months or above (91+ days)	76	47

Narrative

Capped properties are not automatically recorded within the Asset system and rely on manual job creation. A review of this process is underway to improve tracking and reduce the risk of cases being missed.

Tenancy Management Officers continue to support tenants in restoring gas supply where properties have been capped for extended periods.

Gas Certificate quality check

Annual Performance Summary

Measure	Value
Checks due	335
Checks completed	372
Requiring validation	8
Overall quality	100%
Outstanding at year-end	0

Quarterly Delivery Profile (Supporting Detail)

Quarter	Due	Completed	Requiring validation	Outstanding	Quality
Q1	90	117	3	0	100%
Q2	90	100	3	3	96.67%
Q3	90	90	1	0	100%
Q4	65	65	1	0	100%

Quality checks are undertaken on a sample basis to ensure certification accuracy and completeness. Where discrepancies are identified, cases are escalated to the Gas Manager for validation.

Gas Safety

Smoke & Carbon Monoxide Alarms

Smoke alarms are needed for all properties, and these have all been installed. They are then checked annually during the gas service.

CO alarms - not needed for electric storage and ASHP properties. Checked annually at gas service along with the smoke alarms.

Smoke Alarms

Quarter	Due for inspection	Completed	Outstanding	% Checked
Q1	5005	4965	40	99.20%
Q2	4996	4948	48	99.04%
Q3	5007	4966	41	99.18%
Q4	5007	4948	59	98.82%

Performance remains high overall; however, a small decrease is linked to a rise in capped properties, which limits access for full internal checks, including smoke alarm testing.

TREND – 98.82%, a decrease of 0.42 percentage points from the 2024/25 year-end position.

Carbon Monoxide

Date	Due for inspection	Completed	Outstanding	% Checked
Q1	4811	4800	11	99.77%
Q2	4791	4782	9	99.81%
Q3	4743	4730	13	99.72%
Q4	4777	4772	5	99.89%

TREND – 99.89%, an increase of 0.65 percentage points from the 2024/25 year-end position.

Legionella

Legionella – Risk Assessment, Council Housing

The risk assessment covering council housing is generic and is being reviewed to bring up to date with the current housing portfolio specification.

Legionella – Sheltered Accommodation Inspection & Monitoring

2 yearly risk reviews

There are 18 schemes requiring risk reviews for legionella at least every two years. This means not all schemes will have a review each year.

Quarter 1 April – June

Two schemes completed

Quarter 2 July – September

Eight schemes completed

Quarter 3 October – December

Six schemes completed

Quarter 4 January – March

Zero schemes completed

For the Regulator, we must present this as the “Number of dwelling units owned for which an LRA was required to have been carried out as at year end” rather than the number of schemes.

8 of the 18 blocks listed are community centres, therefore have no dwelling units within them and are excluded from the figures we will submit to the Regulator.

In the 10 remaining schemes, there are 353 dwelling units. 353 dwelling units were compliant at the end of March 2026 **(100%)**.

TREND – 100%, no change from 2024/25 year-end position

RAAC & Radon

RAAC

Inspections have confirmed none of our schemes or flat blocks contain RAAC.

Radon

Radon, a naturally occurring radioactive gas resulting from the decay of uranium in the earth, can be present in rocks, soil, and water. It is imperceptible by human senses, necessitating testing to detect elevated levels.

An evaluation of postcodes was conducted to pinpoint properties located in radon-affected regions. The findings of the evaluation ascertained the radon risk level; any area with a radon probability range exceeding 1% will be categorized as radon affected.

Assessment summary:

- Total number of postcodes assessed: 454
- Postcodes in Radon Affected Areas ($\geq 1\%$): **7**

The postcode evaluation has identified 7 postcodes located in a radon-affected area with a probability range of 1-3%. There are a total of 82 properties within the postcodes that need testing. Once the testing program commences, we will fill in table below.

The programme for this is not yet established. This will require us to ensure these are set up in tenants homes correctly upon receipt as they are delivered 'active' to record findings. Asset & Compliance Team to take lead on this going forward with tenancy/surveying to agree how this will be managed.

Quarter	Total tested
The testing conducted in the initial quarter will be documented in this section.	The total number of tests conducted during that quarter will be provided here.

Stock Condition Surveys

Housing Stock Condition – Inspection Programme

The RSH's Consumer Standards state that social housing providers must have an accurate, up to date and evidenced understanding of the condition of their homes that reliably informs their provision of good quality, well maintained and safe homes for tenants. Their code of practice indicates that this is best achieved via stock condition surveys undertaken every 5 years.

Annual Performance Summary

Measure	Value
Properties with survey (last 5 years)	4,138
Total housing stock	5,320
Coverage	77.80%

Quarterly Delivery Profile (Supporting Detail)

Quarter	Surveys completed	Total in-date	Outstanding	% in-date
Q1	48	N/A	N/A	N/A
Q2	70	929	4,278	21.7%
Q3	2,509	3,438	1,882	65.8%
Q4	728	4,138	1,182	77.8%

Narrative

By the end of Quarter 4, 77.8% of properties had a stock condition survey completed within the last five years.

This follows a large-scale programme delivered with Savills, which completed over **3,136 surveys**, alongside additional surveys undertaken by internal teams.

The remaining properties are largely those where access has not been achieved, with previous attempts made by the contractor. A significant proportion of these outstanding properties relate to access constraints rather than a backlog of unprogrammed works.

A targeted approach is being taken to improve access rates, including aligning surveys with existing appointments such as gas servicing.

Data and Programme Development

Work is ongoing to validate survey data and ensure accuracy within the Asset system. This will support:

- assessment of component lifecycles (e.g. roofs, windows, doors).
- energy performance analysis.
- future investment planning through the Medium-Term Financial Plan and 30-year business plan.

Forward Plan (2026/27)

A programme has been established to achieve 100% coverage, with the majority aiming to be completed in 2026/27 and any remaining to be completed in Q1 2027/28. As the programme was created once we had already started 2026/27's surveys, the total figure to complete is less than the 1,182 outstanding at the end of 2025/26.

Quarter	Target to complete
Quarter 1	224
Quarter 2	224
Quarter 3	224
Quarter 4	290
Total	962

TREND – 77.8%, up from approx. 14% 2024/25 year-end position

Stairlifts & Lifts

Housing Scheme Lifts – Inspection Programme

A total of **10 schemes** require regular lift inspections.

- **7 schemes** are subject to monthly inspections (279 dwelling units), with all inspections completed within the reporting period
- **3 schemes** are subject to quarterly inspections (74 dwelling units), with all inspections completed within the reporting period

For regulatory reporting, compliance is measured based on **the number of dwelling units within properties with communal passenger lifts**, rather than the number of schemes.

The position at year-end is summarised below:

Annual Performance Summary

Measure	Value
Schemes requiring inspection	10
Dwelling units covered	353
Compliance	100%

Year-end position: 100% compliance

TREND – 100%, no change from 2024/25 year-end position

Stairlifts & Lifts

Residential Stairlifts – Lift Servicing

Our stairlift supplier is TK Elevator UK (TKE), who undertake repairs and servicing. Stairlifts are serviced every six months.

Annual Performance Summary

Quarter	No. stairlifts	No. compliant	Overall compliance to date (cumulative)
Q1	51	44	86.27%
Q2	50	44	88.00%
Q3	48	44	91.66%
Q4	48	46	95.83%

Narrative

At year-end, **95.83% of stairlifts were compliant.**

Two properties remained overdue at the end of the reporting period. One relates to a void property, where the stairlift has since been removed. For the second property, Housing and TKE are working jointly to secure access, with a service visit planned to coincide with a scheduled Housing Tenancy Management (HTM) appointment on 27th May 2026. (Update: The appointment on 27th did not go ahead. A follow-up visit was scheduled for 9th June but was subsequently cancelled by a family member of the tenant. TKE have new appointment booked for 21st July)

TREND – 95.83%, increased by 1.48 percentage points from the 2024/25 year-end position.

Time Spent Out of Compliance

Length of time	Total
0-3 Months (1–90 Days)	1
3-6 Months (91–180 Days)	0
6-12 Months (181–365 Days)	0
Over 12 Months (366+ Days)	1

Update:

The remaining overdue cases are actively being managed:

- The 0–3-month case related to a void property has been resolved, with stairlift removal completed on 21 April 2026.
- The over 12-month case has an appointment booked, with access being coordinated alongside tenancy management activity.

Appendices

Definitions

BS01 – Gas safety checks (P30)

Proportion of homes for which all required gas safety checks have been carried out. This TSM must reflect the compliance position at the end of each reporting year.

Providers must ensure that all statutory obligations in relation to carrying out gas safety checks relating to this unit were met and that these were appropriately recorded. This includes statutory obligations for keeping gas safety checks up to date, but not the completion of remedial actions that may be identified in gas safety checks.

Gas safety checks relating to a dwelling unit include all checks required both inside the dwelling and on any communal or relevant part that serves the dwelling. For example, if a gas safety check is required on a communal boiler that serves a number of relevant dwelling units, providers must ensure that this check is carried out to be able to report compliance for these units. Dwelling units for which all required gas safety checks were not carried out as at year end must not be counted within item A of the TSM calculation, even if the reason for this concerned an inability to gain access to the dwelling unit (or a communal or other relevant part). If a vacant dwelling had its gas supply disconnected, then any required records relating to disconnection would be included as a gas safety check reflected in this TSM.

See more info at [Annex 4: Tenant Satisfaction Measures - Technical requirements \(accessible\) - GOV.UK](#)

BS02 – Fire safety checks (P32)

Proportion of homes for which all required fire risk assessments have been carried out.

Providers must ensure that all statutory obligations in relation to carrying out FRAs for a particular property were met, and that these were appropriately recorded, in order to report compliance for the dwelling units in that property in item A above. This includes statutory obligations for keeping FRAs up to date through interim reviews, but not the completion of remedial actions that may be identified in FRAs. Although this TSM does not measure remedial actions, providers must of course ensure that these are carried out as

required.

A 'property' in this context means a building that requires an FRA – this is typically a building with two or more dwelling units and at least one communal part (e.g., a tower block). All communal parts (e.g., lifts, stairwells etc.) and other relevant parts of the property (e.g., storage rooms, external wall systems, balconies, and flat front doors etc.) which are required to be included within the scope of FRAs must be covered. If multiple FRAs were required for a property, providers must have ensured that all these FRAs were carried out in order to report compliance for the dwelling units within this property.

This TSM must reflect the compliance position at the end of each reporting year. Subject to statutory obligations, it may reflect FRAs conducted within the current reporting year or previous reporting years.

See more info at [Annex 4: Tenant Satisfaction Measures - Technical requirements \(accessible\) - GOV.UK](#)

BS03 – Asbestos safety checks (P33)

Proportion of homes for which all required asbestos management surveys or re-inspections have been carried out.

Providers must ensure that all statutory obligations in relation to carrying out asbestos management surveys or re-inspections for a particular property were met, and that these were appropriately recorded, in order to report compliance for the dwelling units in that property in item A above. This includes statutory obligations for keeping surveys and re-inspections up to date but not the completion of remedial actions that may be identified (except for those related to re-inspection specifically).

If multiple asbestos management surveys or re-inspections were required for a property, providers must have ensured that all these were carried out in order to report compliance for the dwelling units within this property.

This TSM must reflect the compliance position at the end of each reporting year. Subject to statutory obligations, it may reflect asbestos management surveys or re-inspections conducted within the current reporting year or previous reporting years.

See more info at [Annex 4: Tenant Satisfaction Measures - Technical requirements \(accessible\) - GOV.UK](#)

BS04 – Water safety checks

Proportion of homes for which all required legionella risk assessments have been carried

out. This includes statutory obligations for keeping LRAs up to date but not the completion of remedial actions that may be identified in LRAs (except for those relating to re-inspection specifically). Although this TSM does not measure remedial actions more generally, providers must of course ensure that these are carried out as required.

This TSM must reflect the compliance position at the end of each reporting year. Subject to statutory obligations, it may reflect LRAs conducted within the current reporting year or previous reporting years.

Legionella Risk Assessment, (LRAs) relating to a dwelling unit include all LRAs or re-inspections required both within the dwelling and on any communal or other relevant parts of the property that serve the dwelling. This includes hot and cold-water systems which serve dwelling, whether or not such systems are communal, or only serve the dwelling. For example, if an LRA is required on a communal water tank that serves a number of relevant dwelling units, providers must ensure that this LRA is carried out to be able to report that all required LRAs have been carried out for these dwelling units. If multiple LRAs were required for a dwelling unit (e.g., within the dwelling and on a related communal part), providers must have ensured that all these checks were carried out to report compliance.

See more info at [Annex 4: Tenant Satisfaction Measures - Technical requirements \(accessible\) - GOV.UK](#)

BS05 – Lift safety checks

Proportion of homes for which all required communal passenger lift safety checks have been carried out. This TSM must reflect the compliance position at the end of each reporting year.

In order to report that all LOLER inspection reports have been carried out for a particular property – and therefore for the dwelling units in that property – providers must ensure that LOLER inspection reports had been carried out for every communal lift within the property and that these were appropriately recorded.

For the purposes of this TSM, carrying out a LOLER inspection report for a communal passenger lift means meeting the requirements of LOLER in relation to examinations and inspections as if the lift were subject to those requirements. This is irrespective of whether the requirements of LOLER strictly apply or not. This includes the requirements of LOLER in relation to keeping examination and inspection reports up to date, but not the completion of remedial actions that may be identified in inspection reports. Although this TSM does not measure remedial actions, providers must of course ensure that these are carried out as required.

A communal passenger lift within a property is a lift provided for use of the occupants of a dwelling unit in common with the occupants of at least one other unit in the property. In

this context, a property is a building with at least one such communal lift (e.g., a tower block).

The calculation of this TSM must reflect LOLER inspection reports on all communal passenger lifts in properties in which there are one or more relevant dwelling units owned by the provider. This includes communal passenger lifts which are owned or controlled by a third party. For example,

Where the provider owns LCRA and/or LCHO units in a property owned by a third-party landlord, then these dwelling units must not be counted within item A of the TSM calculation unless the provider had obtained evidence or otherwise made sure that LOLER inspection reports had been carried out for every communal passenger lift in the property. Dwelling units must not be double counted in either part A or B of the TSM calculation. Any vacant LCRA or LCHO dwelling units within each property must be included within the calculation of this TSM.

See more info at [Annex 4: Tenant Satisfaction Measures - Technical requirements \(accessible\) - GOV.UK](#)

Awaab's Law

Awaab's Law came into force for the social rented sector on 27 October 2025. From this date, social landlords are required to address all emergency hazards, including damp and mould hazards that pose a significant risk of harm to tenants, within prescribed timeframes.

An 'emergency hazard' poses an imminent and significant risk of harm to the health or safety of an occupier of the social home. Examples of hazards that could be emergency hazards requiring emergency action include, but are not limited to:

- gas or carbon monoxide leaks
- broken boilers
- total loss of water supply
- electrical hazards such as exposed wiring
- significant leaks
- broken external doors or windows that present a risk to home security
- prevalent damp and/or mould that is having a material impact on a tenant's health
- significant structural defects or disrepair

A 'significant hazard' under Awaab's Law is one that poses a significant risk of harm to the health or safety of an occupier of the social home. Currently this is only damp and mould.

From 2026, the scope of Awaab's Law is being extended to include a wider range of hazards where they present a significant risk of harm. These include:

- excess cold and excess heat
- falls associated with baths etc., on level surfaces, on stairs and between levels

- structural collapse, and explosions
- fire, and electrical hazards
- domestic and personal hygiene and food safety

Awaab's Law requirements on social landlords

1. Emergency Repairs — Within 24 hours

- For issues classified as emergency hazards (e.g. severe damp/mould affecting breathing), landlords must undertake relevant safety work as soon as practicable, and within 24 hours of being made aware of the issue.

2. Significant Investigation — Within 10 calendar days or quicker

- Once the landlord is informed of a potential significant hazard, they must complete an investigation within 10 calendar days.

3. Written Summary — Within 3 working days after investigation concludes

- After completing the investigation, the landlord must issue tenants a written summary of findings (including risk level and next steps) within 3 working days, unless the hazard has been fixed and no further action is needed.

4. Safety work for Significant Hazards — Start within 5 working days

- If the mould/damp is determined to pose a significant risk to health, relevant safety work must commence within 5 working days of the investigation conclusion.

5. Supplementary preventative work — Start within 5 working days

- If the mould/damp is determined to pose a significant or emergency risk to health, any supplementary preventative work to prevent a significant or emergency hazard recurring must begin, or steps must be taken to begin, within 5 working days. If steps cannot be taken to begin work in 5 working days this must be done as soon as possible, and work must be physically started within 12 weeks.

See more detail at [Awaab's Law: Guidance for social landlords - Timeframes for repairs in the social rented sector - GOV.UK](#)

Electrical safety checks

Proportion of homes for which all required electrical safety checks have been carried out .

This measure is aligned with the Regulator of Social Housing proposed Tenant Satisfaction Measure covering electrical safety checks.

This measure is a snapshot at the end of the month. Proportion of homes for which all required electrical safety checks have been carried out at the end of the benchmarked period. Note that an annual version of this measure is also collected in our regulatory measure module.

Formula

$$(A \div B) \times 100$$

A = Number of domestic properties (i.e. dwelling units) owned for which all required electrical safety checks were carried out and recorded as at the end of the month.

In order to report that all required electrical safety checks were carried out for a particular dwelling unit, you must ensure that all statutory obligations in relation to carrying out electrical safety checks relating to this unit were met, all physical checks had taken place and that these were appropriately recorded.

Electrical safety checks include inspections, testing and investigative work that relate to the electrical safety of electrical installations or electrical equipment.

B = Number of domestic properties (i.e. dwelling units) owned for which electrical safety checks were required to have been carried out as at the end of the month.

The number of low-cost rental accommodation dwelling units where you have landlord responsibility for complying with electrical health and safety regulations.

Stock type

Low-Cost Rental Accommodation (LCRA) and Low-Cost Home Ownership (LCHO) where units served by communal or other relevant parts that require electrical safety checks.

Further information

In order to report that all required electrical safety checks were carried out for a particular dwelling unit, you must ensure that all statutory obligations in relation to carrying out electrical safety checks relating to this unit were met, all physical checks had taken place and that these were appropriately recorded (e.g. carry out an Electrical Inspection Condition Report within the last five years).

Statutory obligations in relation to carrying out electrical safety checks include statutory obligations for keeping electrical safety checks up to date, but not the completion of remedial actions (except for those related to further investigative work specifically) that may be identified in electrical safety checks.

Electrical safety checks relating to a dwelling unit include all checks required both for the dwelling and on any communal or relevant part that serves the dwelling. For example, if an electrical safety check is required on an electrical installation (or other fixture), fitting or appliance that serves a number of relevant dwelling units, you must ensure that this check is carried out to be able to report compliance for these units.

Dwelling units for which all required electrical safety checks were not carried out as at year end must not be counted within item A of the TSM calculation, even if the reason for this concerned an inability to gain access to the dwelling unit (or a communal or other relevant part).

If multiple electrical safety checks were required for a dwelling unit (e.g. both on an electrical installation and electrical equipment) providers must have ensured that all these checks were carried out in order to report compliance – dwelling units must not be double counted in either part A or B of the calculation.

Providers must determine what statutory obligations with respect to electrical safety checks apply to any vacant LCRA or LCHO dwellings and reflect these in the calculation of this TSM. If any vacant LCRA or LCHO dwellings were served by communal or related parts requiring an electrical safety check, these dwellings must be included in reported compliance with respect to these communal or related parts.

The calculation of this measure must reflect all electrical safety checks that relate to dwelling units owned, including checks for which a third party is responsible. These may include, for example, checks on an electrical installation (or other fixture) in a building owned by a third-party landlord, which serves LCRA and/or LCHO units owned by the provider. In these circumstances, a dwelling unit must not be counted within item A of the TSM calculation if the provider was not able to obtain evidence or otherwise make sure that required checks on communal or other parts that serve the dwelling were carried out.