



Wednesday, 10 July 2024

Dear Sir/Madam

A meeting of the Overview and Scrutiny Committee will be held on Thursday, 18 July 2024 in the Council Chamber, Council Offices, Foster Avenue, Beeston, NG9 1AB, commencing at 7.00 pm.

Should you require advice on declaring an interest in any item on the agenda, please contact the Monitoring Officer at your earliest convenience.

Yours faithfully

Chief Executive

To Councillors:	S Dannheimer (Chair)	J M Owen
	T J Marsh (Vice-Chair)	A W G A Stockwell
	E Williamson (Vice-Chair)	C M Tideswell
	H L Crosby	S Webb
	K Harlow	E Winfield
	H Land	K Woodhead
	R D MacRae	

A g e n d a

1. Apologies

To receive apologies and to be notified of the attendance of substitutes.

2. Declarations of Interest

(Pages 3 - 10)

Members are requested to declare the existence and nature of any disclosable pecuniary interest and/or other interest in any item on the agenda.

3. Minutes

(Pages 11 - 14)

The Committee is asked to confirm as a correct record the minutes of the meetings held on 22 February 2024 and 28 February 2024.

4. Consideration of Call - In

To consider any matter referred to the Committee for a decision in relation to the call in of a decision.

5. Spotlight Review

5.1 Housing Repairs

(Pages 15 - 20)

6. Overview and Scrutiny Working Group Report

6.1 Equality, Diversity and Inclusion at the Council

(Pages 21 - 112)

To present the report of the Equality, Diversity and Inclusion at the Council from the Overview and Scrutiny Working Group to Committee along with the recommendations for Cabinet approval.

7. Cabinet Work Programme

(Pages 113 - 114)

To inform the Committee of items on the Cabinet's work programme, from which items for scrutiny may be identified.

8. Work Programme

(Pages 115 - 118)

Committee is asked to approve its Work Programme, including identifying topics for scrutiny, that will help to achieve the Council's key priorities and associated objectives.

Report of the Monitoring Officer

DECLARATIONS OF INTEREST

1. Purpose of Report

Members are requested to declare the existence and nature of any disclosable pecuniary interest and/or other interest in any item on the agenda. The following information is extracted from the Code of Conduct, in addition to advice from the Monitoring Officer which will assist Members to consider any declarations of interest.

Part 2 – Member Code of Conduct

General Obligations:

10. Interest

10.1 You will register and disclose your interests in accordance with the provisions set out in Appendix A.

Section 29 of the Localism Act 2011 requires the Monitoring Officer to establish and maintain a register of interests of Members of the Council. The register is publically available and protects you by demonstrating openness and willingness to be held accountable. You are personally responsible for deciding whether or not you should disclose an interest in a meeting which allows the public, Council employees and fellow Councillors know which of your interests gives rise to a conflict of interest. If in doubt you should always seek advice from your Monitoring Officer.

You should note that failure to register or disclose a disclosable pecuniary interest as defined in Appendix A of the Code of Conduct, is a criminal offence under the Localism Act 2011.

Advice from the Monitoring Officer:

On reading the agenda it is advised that you:

1. Consider whether you have any form of interest to declare as set out in the Code of Conduct.
2. Consider whether you have a declaration of any bias or predetermination to make as set out at the end of this document
3. Update Democratic Services and the Monitoring Officer and or Deputy Monitoring Officers of any declarations you have to make ahead of the meeting and take advice as required.
4. Use the Member Interest flowchart to consider whether you have an interest to declare and what action to take.
5. Update the Chair at the meeting of any interest declarations as follows:

‘I have an interest in Item xx of the agenda’

'The nature of my interest is therefore the type of interest is
DPI/ORI/NRI/BIAS/PREDETERMINATION
'The action I will take is...'

This will help Officer record a more accurate record of the interest being declared and the actions taken. You will also be able to consider whether it is necessary to send a substitute Members in your place and to provide Democratic Services with notice of your substitute Members name.

Note: If at the meeting you recognise one of the speakers and only then become aware of an interest you should declare your interest and take any necessary action

6. Update your Member Interest Register of any registerable interests within 28days of becoming aware of the Interest.

Ask yourself do you have any of the following interest to declare?

1. DISCLOSABLE PECUNIARY INTERESTS (DPIs)

A "Disclosable Pecuniary Interest" is any interest described as such in the Relevant Authorities (Disclosable Pecuniary Interests) Regulations 2012 and includes an interest of yourself, or of your Spouse/Partner (if you are aware of your Partner's interest) that falls within the following categories: Employment, Trade, Profession, Sponsorship, Contracts, Land, Licences, Tenancies and Securities.

2. OTHER REGISTERABLE INTERESTS (ORIs)

An "Other Registerable Interest" is a personal interest in any business of your authority which relates to or is likely to affect:

- a) any body of which you are in general control or management and to which you are nominated or appointed by your authority; or
- b) any body
 - (i) exercising functions of a public nature
 - (ii) anybody directed to charitable purposes or
 - (iii) one of whose principal purposes includes the influence of public opinion or policy (including any political party or trade union) of which you are a Member or in a position of general control or management.

3. NON-REGISTRABLE INTERESTS (NRIs)

"Non-Registrable Interests" are those that you are not required to register but need to be disclosed when a matter arises at a meeting which directly relates to your financial interest or wellbeing or a financial interest or wellbeing of a relative or close associate that is not a DPI.

A matter "directly relates" to one of your interests where the matter is directly about that interest. For example, the matter being discussed is an application about a particular property in which you or somebody associated with you has a financial interest.

A matter “affects” your interest where the matter is not directly about that interest but would still have clear implications for the interest. For example, the matter concerns a neighbouring property.

Declarations and Participation in Meetings

1. DISCLOSABLE PECUNIARY INTERESTS (DPIs)

1.1 Where a matter arises at a meeting which **directly relates** to one of your Disclosable Pecuniary Interests which include both the interests of yourself and your partner then:

Action to be taken

- **you must disclose the nature of the interest** at the commencement of that consideration, or when the interest becomes apparent, whether or not such interest is registered in the Council’s register of interests of Member and Co-opted Members or for which you have made a pending notification. If it is a sensitive interest you do not have to disclose the nature of the interest, just that you have an interest
- **you must not participate in any discussion** of that particular business at the meeting, or if you become aware of a disclosable pecuniary interest during the meeting you must not participate further in any discussion of the business, including by speaking as a member of the public
- **you must not participate in any vote** or further vote taken on the matter at the meeting and
- **you must withdraw from the room** at this point to make clear to the public that you are not influencing the meeting in anyway and to protect you from the criminal sanctions that apply should you take part, unless you have been granted a Dispensation.

2. OTHER REGISTERABLE INTERESTS (ORIs)

2.1 Where a matter arises at a meeting which **directly relates** to the financial interest or wellbeing of one of your Other Registerable Interests i.e. relating to a body you may be involved in:

- **you must disclose** the interest at the commencement of that consideration, or when the interest becomes apparent, whether or not such interest is registered in the Council’s register of interests of Member and Co-opted Members or for which you have made a pending notification. If it is a sensitive interest you do not have to disclose the nature of the interest, just that you have an interest
- **you must not take part in any discussion or vote** on the matter, but may speak on the matter only if members of the public are also allowed to speak at the meeting
- **you must withdraw from the room** unless you have been granted a Dispensation.

3. NON-REGISTRABLE INTERESTS (NRIs)

3.1 Where a matter arises at a meeting, which is not registrable but may become relevant when a particular item arises i.e. interests which relate to you and /or other people you are connected with (e.g. friends, relative or close associates) then:

- **you must** disclose the interest; if it is a sensitive interest you do not have to disclose the nature of the interest, just that you have an interest
 - **you must not take part in any discussion or vote**, but may speak on the matter only if members of the public are also allowed to speak at the meeting; and
 - **you must withdraw** from the room unless you have been granted a Dispensation.
-

Dispensation and Sensitive Interests

A “Dispensation” is agreement that you may continue to participate in the decision-making process notwithstanding your interest as detailed at section 12 of the Code of the Conduct and the Appendix.

A “Sensitive Interest” is as an interest which, if disclosed, could lead to the Member, or a person connected with the Member, being subject to violence or intimidation. In any case where this Code of Conduct requires to you to disclose an interest (subject to the agreement of the Monitoring Officer in accordance with paragraph 2.4 of this Appendix regarding registration of interests), you do not have to disclose the nature of the interest, if it is a Sensitive Interest in such circumstances you just have to disclose that you have a Sensitive Interest under S32(2) of the Localism Act 2011. You must update the Monitoring Officer when the interest is no longer sensitive, so that the interest can be recorded, made available for inspection and published.

BIAS and PREDETERMINATION

The following are not explicitly covered in the code of conduct but are important legal concepts to ensure that decisions are taken solely in the public interest and not to further any private interests.

The risk in both cases is that the decision maker does not approach the decision with an objective, open mind.

This makes the local authority’s decision challengeable (and may also be a breach of the Code of Conduct by the Councillor).

Please seek advice from the Monitoring Officer or Deputy Monitoring Officers, if you need assistance ahead of the meeting.

BIAS

Holders of public office must act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias. If you have been involved in an issue in such a manner or to such an extent that the public are likely to perceive you to be biased in your judgement of the public interest:

- a) you should not take part in the decision-making process
- b) you should state that your position in this matter prohibits you from taking part
- c) you should leave the room.

PREDETERMINATION

Where a decision maker has completely made up his/her mind before the decision is taken or that the public are likely to perceive you to be predetermined due to comments or statements you have made:

- a) you should not take part in the decision-making process
- b) you should state that your position in this matter prohibits you from taking part
- c) you should leave the room.

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Registerable Interests

These are interests that you are required to register in accordance with the Code of Conduct. They are interests that you would know about in advance of an item coming up (e.g. land you own) and you should have included them when filling in your register of interests.

What type of Registerable Interest do you have in this matter?

Disclosable Pecuniary Interests

These are any interests that are described as DPIs under the Code of Conduct and include both the interests of yourself and of your partner.

Other Registerable Interests

These are personal interests that relate to certain types of bodies that you may be involved in as set out in the Code of Conduct.

Does the matter directly relate to one of your Disclosable Pecuniary Interests?

No

Does the matter directly relate to the financial interest or wellbeing of one of your Other Registerable Interests?

No

Does the matter affect a financial interest or the wellbeing of yourself or of a friend, relative or close associate?

No

Yes

Yes

Is the financial interest or wellbeing affected to a greater extent than the financial interests or wellbeing of the majority of inhabitants?

No

Yes

Yes

Would a reasonable member of the public knowing all the facts believe that it would affect your view of the wider public interest?

No

Yes

You must:

- Disclose the interest;
- Not speak on the matter;
- Not participate in any discussion or vote; and
- Not remain in the room unless you have a Dispensation

You must:

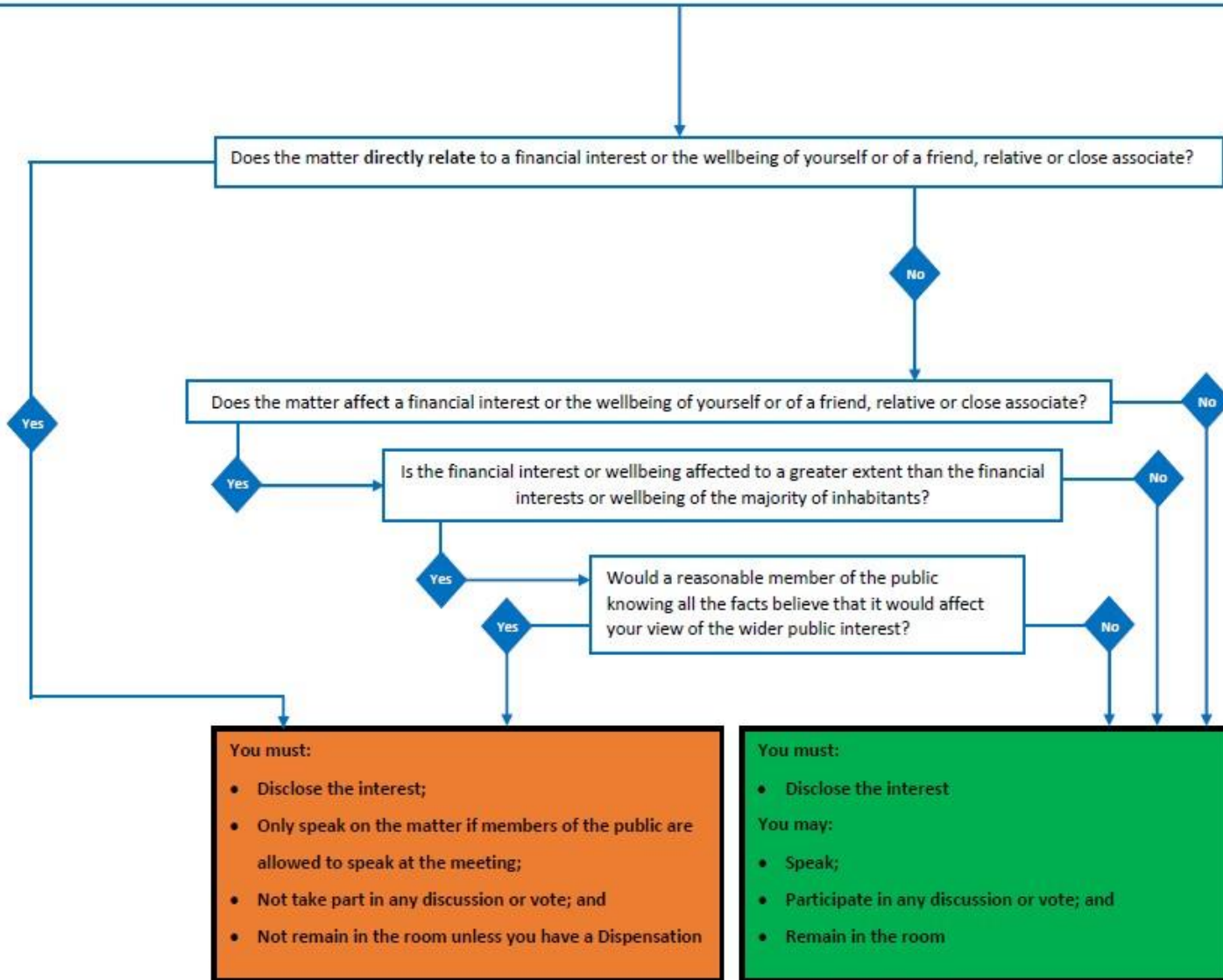
- Disclose the interest;
- Only speak on the matter if members of the public are allowed to speak at the meeting;
- Not take part in any discussion or vote; and
- Not remain in the room unless you have a Dispensation

You must:

- Disclose the interest
- You may:
- Speak;
 - Participate in any discussion or vote; and
 - Remain in the room

Non-Registerable Interests

These are interests that you are not required to register but may become relevant when a particular item arises. These are usually interests that relate to other people you are connected with (e.g. friends, relatives or close associates) but can include your own interests where you would not have been expected to register them.



OVERVIEW AND SCRUTINY COMMITTEE

THURSDAY, 22 FEBRUARY 2024

Present: Councillor S Dannheimer, Chair

Councillors: W Mee
K Harlow
H Land
R D MacRae
J M Owen
C M Tideswell
S Webb
E Winfield
R Bullock (Substitute for K Woodhead)
G S Hills (Substitute for A W G A Stockwell)

Apologies for absence were received from Councillors E Williamson, H L Crosby, A W G A Stockwell and K Woodhead

48 DECLARATIONS OF INTEREST

There were no Declarations of Interest.

49 MINUTES

The minutes of the meetings held on 21 December 2023, 29 and 30 January 2024 were confirmed and signed as a correct record.

50 MINUTES FROM WORKING GROUPS

The minutes of the Equality, Inclusivity and Diversity at the Council Working Group were noted by the Committee.

51 CONSIDERATION OF CALL - IN

This item was noted with a reminder to the Committee that there was a Call in to be held at a meeting of the Overview and Scrutiny Committee on 28 February 2024.

52 CONSIDERATION OF TOPIC - INTERNAL DISCIPLINARY PROCEDURE

Councillor R Bullock presented the Scrutiny Suggestion of looking at the internal disciplinary procedure, in particular the appointment of Deciding Officer and whether it was appropriate for the Deciding Officer to be the Head of the same department as the employee under investigation. An explanation of the current procedure was provided to the Committee and that in all cases, the appellant could object if they felt

the Deciding Officer was not appropriate before or during the investigation or if there was any conflict of interest. The point raised was part of the procedure within the policy and all policies were reviewed through Local Joint Consultative Committee. Members decided that it was not a topic they wished to add to the work programme of Overview and Scrutiny Committee. However, they recommended it be reviewed as part of the next policy review with Human Resources and the relevant Committee.

RESOLVED that the procedure be reviewed within the Policy at Local Joint Consultative Committee.

53 CABINET WORK PROGRAMME

Members noted the Cabinet work programme.

54 WORK PROGRAMME

The Committee considered the work programme. Flooding and phone calls were discussed. A reminder that the Housing Repairs would be scrutinised as a spotlight topic at the next meeting.

RESOLVED that the work programme be approved.

OVERVIEW AND SCRUTINY COMMITTEE

WEDNESDAY, 28 FEBRUARY 2024

Present: Councillor S Dannheimer, Chair

Councillors: E Williamson
K Harlow
R D MacRae
J M Owen
C M Tideswell
S Webb
E Winfield
S P Jeremiah
D D Pringle

55 APOLOGIES

Apologies for absence were received from Councillors H Crosby, W Mee, A G W A Stockwell and K Woodhead.

56 DECLARATIONS OF INTEREST

There were no declarations of interest.

57 CONSIDERATION OF CALL - IN

Discussion took place on roles of Members who had called-in the item. Councillor H Land and would speak as a Member who had called-in the item rather than as a Member of the Committee.

Further discussion ensued regarding the need for the meeting to include information that could only be discussed with the exemption of public and press. It was agreed by Members that the meeting would continue in public session unless specific information had to be considered which would necessitate the exclusion of public and press.

Councillors D K Watts, S J Carr, B C Carr, H Land and A Kingdon spoke as Members who had requested the call-in.

Statements included concerns around the lack of consultation with residents, breaches of openness and transparency and that Cabinet did not have the information contained in the survey report until 30 minutes before the meeting. It was further stated that the costs had raised since the initial consideration of the item. Further concerns were raised over traffic congestion and the increasing risk of flooding in the area.

Councillors G Marshall and V Smith spoke as the relevant Portfolio Holders.

It was stated that one of the Council's main priorities was housebuilding. The application had been passed through Planning Committee and this represented good value for money. There had always been transparency and a significant number of submissions had been received through consultation for the Planning Committee application. Local residents were being supported through the provision of homes.

Mr Mohammed Habib, the Council's Head of Asset Management and Development, spoke as the relevant Officer responsible for the service area.

It was stated that the contractors had held their costs in relation to inflation which represented good value for money. It was further stated that the Cottage was not in use due to disrepair and although Homes England had been approached for financial assistance, the scheme was not reliant on the potential grant.

The Overview and Scrutiny Committee considered the statements and asked questions of the relevant Members. On hearing the evidence and opinions presented, the Committee concluded that when the report was considered by Cabinet, the late submission of the Surveyor's report did not allow for Members to be fully informed when reaching a decision on the item. It was stated that the potential cost of repair of Fishpond Cottage may not be viable when considering the details of the Surveyor's report. Furthermore, the uncertainty regarding the potential grant from Homes England did not allow for Cabinet to be fully apprised of the financial outlay for the proposals leading to a lack of clarity in the report.

Further suggestions from the Committee included that there was extensive consultation during the original planning process, the scheme represented value for money as the payback period was 33-years rather than the industry standard of 40-years, flooding concerns were not based on local evidence and that the Cottage would fall into further disrepair should no action be taken.

Councillors G Marshall and V Smith, as the relevant Portfolio Holders, were invited to sum up.

The Committee considered the options following the conclusion of the debate. It was proposed by Councillor R D MacRae and seconded by Councillor E Williamson that the matter be referred to full Council for its views. On being put to the meeting, the proposal was defeated.

Following the vote, it was proposed by Councillor S Dannheimer and seconded by Councillor R D MacRae that the Committee refer the decision back to the Cabinet for reconsideration

On being put to the meeting, the proposal was carried.

RESOLVED that the Committee refer the decision back to the decision-maker for reconsideration, setting out the nature of the Committee's concerns; the decision-maker must then re-consider the matter within a further 10 working days, taking into account the concerns of the Overview & Scrutiny Committee, before making a final decision.

Report of the Chief Executive

Housing Repairs

1. Purpose of Report

To update the Overview and Scrutiny Committee on the improvements to the Housing Repairs Service.

2. Recommendation

The Committee is asked to NOTE the improvements to the Housing Repairs Service.

3. Detail

In July 2022, Overview and Scrutiny Committee considered a scrutiny review of Housing Repairs. At that time Housing Repairs was part of Asset Management and Development, in the Deputy Chief Executive's department. Shortly after the committee considered the topic the decision was made to transfer Housing Repairs to the Housing Service, in the Chief Executive's department. Due to this the Committee did not progress with the scrutiny review.

An update on the improvements made to the service is included in the **Appendix**. This includes updates on the areas originally identified as part of the scoping exercise.

4. Financial Implications

The comments from the Head of Finance Services were as follows:

There are no direct financial implications arising from the update. All current projects have either previously been approved by Cabinet or will be achieved using existing budgets. Any significant budget implications in the future, over and above virement limits, would require approval by Cabinet.

5. Legal Implications

The comments from the Monitoring Officer / Head of Legal Services were as follows:

6. Human Resources Implications

The comments from the Human Resources Manager were as follows:

Not applicable

7. Union Comments

The Union comments were as follows:

Not applicable.

8. Climate Change Implications

The climate change implications are contained within the report.

9. Data Protection Compliance Implications

This report does not contain any OFFICIAL(SENSITIVE) information and there are no Data Protection issues in relation to this report.

10. Equality Impact Assessment

Not applicable.

11. Background Papers

Nil.

Housing Repairs

Review of Housing Repairs structure

During 2022 a consultant worked with the Council to help review and improve Housing Repairs. The review of the structure of the service began whilst the team were working in Asset Management and Development and continued when the service moved to Housing. The key findings from the review were:

- The number of employees in Housing Repairs was not sufficient to meet the needs of the service
- The involvement of two teams in the repair booking process was one of the main reasons for increased tenant dissatisfaction and inefficiency
- There was a need for a more senior role with responsibility for compliance matters
- The generic role of Senior Maintenance Officer was not achieving the required results and the structure would benefit from a number of specialist roles

The restructure was completed in two phases.

Restructure – Phase one

In December 2022, phase one of the restructure was approved by Cabinet, this focussed on the former work planning team. This team did not previously take calls directly from tenants. The calls were taken by the Council's Contact Centre, which then could raise the repair job and book an appointment. However, some jobs, such as larger jobs or those requiring two operatives to attend, were not booked by the Contact Centre and were referred to the Work Planning Team.

Under the phase one of the restructure a new larger team was created, which replaced the Assistant Work Planner, Work Planner and Senior Work Planner roles with new Customer Services Officers, Team Leader and Manager roles. The main purpose of the new team was to take all calls regarding repairs.

Restructure – Phase two

In January 2023, phase two was approved by Cabinet for the remaining roles in Housing Repairs. One of the key changes in the structure was the creation of a Compliance Manager role. This moved the responsibility for compliance matters, including gas and electrical under the remit of one manager. Another key change was the creation of two Repairs Inspectors, two Multi-Skilled Team Leaders and a Voids Surveyor. Previously repair and void inspections and the management of operatives had been undertaken by Senior Maintenance Officers on a patch basis.

In regards to the operative roles, the new structure retained the posts of Multi-Skilled and Single Trade operatives rather than each post being trade specific. On approval of the restructure there were 11 vacancies for Multi-Skilled and Single Trade operatives. Prior to recruitment commencing, analysis was completed to look at the

specific skills required to fill the gaps in the current strengths and weaknesses of the current team. This information then informed the practical tests that candidates completed as part of the interview process, to ensure that those with the necessary skill set were employed.

Repairs Contact Centre

The new Repairs Contact Centre deal with all incoming and outgoing calls for repairs matters. They also deal with repairs reported via the repairs inbox and online form. Out of a team of six, five of the Customer Services Officers were new to the Council. A comprehensive training plan was implemented to train all employees to the required level. This particularly focussed on ensuring that the technical knowledge of the team was sufficient to be able to correctly diagnose repairs.

In 2023/24, 11,613 repair appointments were made. Of these only 284 needed to be rearranged. 163 were due to emergency jobs taking priority; 106 were due to operative sickness and 15 were due to weather. On all occasions where a repair needs to be cancelled the tenant is contacted by telephone, an explanation is provided and an alternative appointment is offered.

The new role of Customer Services Team Leader was also created as part of the restructure. This role manages the Repairs Contact Centre on a day to day basis, providing advice and support to the Customer Services Officers to ensure that repairs are correctly diagnosed at first point of contact and that unnecessary inspections and inaccurate logging of jobs is minimised.

More support for operatives on-site

The new Multi-Skilled Team Leader roles provide the operatives with more day to day support. They do not have work routinely booked into their diaries, but are available to cover for emergencies or sickness absence. They spend the majority of their day visiting operatives whilst they are completing work and working with their team to provide solutions to any problems identified whilst the work is completed. They also post-inspect a sample of completed work to ensure that high standards are met. This role has been particularly important over the last year with the induction of new employees and ensuring that probation periods are closely monitored and adequate support is given.

Repairs Inspections

Under the old Housing Repairs structure inspections of tenanted properties was one of the responsibilities of the Senior Maintenance Officers that they had to balance with inspections of empty properties and the management of a team of operatives. This approach often caused delays with inspection notes being completed and work being issued.

The two Repairs Inspectors can now concentrate on the completion, recording and follow-up of inspections. Changes have been made to their diaries so that they complete five inspections each per day, and then complete their notes and raise works at the end of every day. This ensures that repairs can be completed promptly.

Void processes for empty properties

Another role that was created as part of the restructure, is the role of Voids Surveyor. Like tenanted repair inspections this was previously a part of the Senior Maintenance Officer role. As tenanted properties were usually prioritised, due to the impact on the person living in the property, inspection of empty properties were sometimes delayed. By summer 2022 a backlog of void properties had built up. At the peak, there was over 130 empty Council properties awaiting works.

Following the recruitment of a new Voids Surveyor the process for dealing with empty properties was reviewed and improved. Pre-termination inspections are now completed by the Voids Surveyor prior to the tenant leaving the property. These visits identify any damage to the property that it is the responsibility of the outgoing tenant, and also gives an indication of the level of work that will be required once the property is empty. New weekly voids meetings have also been introduced, with all teams involved in the process, to discuss priority properties, for example, a property that is required for a homeless family, and progress on all voids.

There are typically around 20-25 empty properties at any one time, which is the usual level you would expect from a stock of approximately 4,300.

Improvements to system use

Prior to the review, the full capability of the housing management system was not being utilised. Previously notes were not always detailed enough, and photographs were not routinely uploaded onto the property records. This has improved significantly. The quality of notes now provides a full audit trail of the actions taken since a repair was reported. Operatives are now asked to take photographs of repairs required and completed work, to supplement the notes made. These are very useful if a complaint is received or further repair reports are made.

There are further improvements to the system which are currently in progress. A full review of all of the codes within the system is being undertaken. Once new codes are implemented this will provide more detailed information regarding the cost of a job and the expected time taken. This will improve diary management and accurate job costing. Following these system improvements, changes will be made to way that tenants are recharged for works and how leaseholder service charges are produced.

Tenant Satisfaction

This year new tenant satisfaction measures were introduced for all social landlords. These provide specific indicators that must be recorded and reported to the Regulator of Social Housing. The Council completed the first Tenant Satisfaction Survey to meet the new requirements of the regulator in late 2023/early 2024. The satisfaction with Repairs was 71%. The comments made in the survey highlighted concerns about outstanding and forgotten repairs, and the time taken for repairs to be completed. It was expected that some complaints like these would be received due to the historic backlog of repairs from when the team was not fully staffed. It is

expected that there will be an improvement in responses to this when the survey is repeated in 2024/25.

All tenants are sent a survey following a repair being completed in their home. During 2023/24 quarter 4, which is the last set of complete data, 140 surveys were returned. If tenants raise any concerns, either the Repairs Customer Services Manager or a Multi-Skilled Team Leader, depending on the issue, will contact the tenant to discuss further.

As part of the restructure, the Senior Work Planner role was replaced with the role of Customer Services Manager. In addition to having overall responsibility for the Repairs Contact Centre, this role investigates and responds to all complaints regarding the repairs service. The number of complaints received has reduced in the last year as improvements have been made to the service.

Housing Improvement Board

In November 2023, a new Housing Improvement Board was created to monitor the progress in improvements required to Housing Repairs and Asset Management. The board meets monthly, and is attended by all members of the General Management Team and the Heads of Service responsible for these areas. This group ensures that actions are progressed and any barriers to achieving improvements are identified and resolved.

Disrepair

In addition to making the improvements that have previously been identified, Housing Repairs also need to respond to new challenges. The Housing Repairs and Legal teams typically had a caseload of 20-25 disrepair cases at any one time. However, at the end of 2023 the number of cases increased dramatically, due to the pro-active work of two solicitors. These companies were door knocking and telephoning Council properties to actively encourage tenants to make a disrepair claim. This led to an increase of over 100 active cases. To address this in January 2024 Cabinet approved two new roles of Disrepair Inspector and Disrepair Assistant. These roles have recently been appointed, and the Council is ensuring that cases are progressed and legal deadlines are met.

Change Delivery Manager

Whilst there has been substantial improvement to Housing Repairs and the service offered to tenants there are further improvements that can be made to ensure that a high quality service is provided and that policies and procedures follow good practice. To support this work a new Change Delivery Manager started in July 2024. This new Officer will be reporting to the Head of Asset Management and Development, but will be working with Housing Repairs to review and update policies, procedures and process maps.

Report of the Overview and Scrutiny Working Group

Equality, Diversity and Inclusion at the Council

1. Purpose of Report

To present the report to the Overview and Scrutiny Committee of the findings from the Working Group and propose the recommendations to Cabinet.

2. Recommendation

The Committee is asked to Consider the recommendations from the Working Group and to RECOMMEND to Cabinet that the following recommendations be considered.

1. **The Human Resources Manager share the Neurodiversity Policy with all Members and employees.**
2. **To increase awareness of Neurodiversity and support available to employees and Members.**
3. **To consider the provision of additional resources to the Communities team to ensure at least one event per quarter and a minimum of four in a year, be organised.**
4. **To consider changing the counter space at the D.H. Lawrence Museum to be more accessible to customers and incorporate an area for a wheelchair user to access the digital tour.**
5. **To consider the provision of ear defenders, to offer visitors who may have sensory processing differences and additional audio headsets to enhance the D.H. Lawrence experience to all.**
6. **To increase signage within the museum to increase awareness of health and safety issues and accessibility and to provide signposting to the nearest accessible toilet.**
7. **To increase advertising of the D.H. Lawrence digital experience to promote live tours to Groups.**
8. **The Working Group notes that the current Council Offices required substantial works to resolve the current issues of disrepair and accessibility issues and at the earliest opportunity plans should be considered for the future of the Kimberley Depot Offices.**
9. **To ensure all fire risk assessments are up to date in residential accommodation.**

10. To ensure independent living schemes have automated doors to support living independently.

3. Detail

The Overview and Scrutiny Committee established a review of Equality, Diversity and Inclusion at the Council, to be carried out by the Overview and Scrutiny Working Group and was appointed at the meeting on 23 November 2023. The review was requested by Councillor S Dannheimer who suggested that a review should be considered to see if the Council met the needs of all service users, Members and employees. The review is in accordance with the Council's Always Improving, value providing continuous improvement and delivering value for money. The report contained within **Appendix A** is part of a wider review that is currently still being conducted.

The purpose of the review was to achieve the following outcomes:

- To develop recommendations to support improvements.
- To improve the overall Equality, Diversity and Inclusion within the Council including service users, Members and employees.

4. Financial Implications

The comments from the Head of Finance Services were as follows:

Whilst there are no additional financial implications to consider at this stage, the proposed recommendations would include additional cost implications, both revenue and capital, which may not be contained within existing budgets. Any significant budget implications in the future, over and above virement limits, would require approval by Cabinet.

5. Legal Implications

The comments from the Monitoring Officer / Head of Legal Services were as follows:

The Public Sector Equality Duty came in to force in April 2011, s.149 of the Equality Act 2010 requires Councils when carrying out their functions, to have due regard to the need to achieve the objectives set out under s149 of the Equality Act 2010. This is to:

- a. eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- b. advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- c. foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The proposed recommendations as set out in the report supports compliance with the above legal obligation.

6. Human Resources Implications

The comments from the Human Resources Manager were as follows:

Not Applicable

7. Union Comments

The Union comments were as follows:

Not Applicable.

8. Climate Change Implications

The climate change implications, if applicable, are contained within the report.

9. Data Protection Compliance Implications

This report does not contain any OFFICIAL(SENSITIVE) information and there are no Data Protection issues in relation to this report.

10. Equality Impact Assessment

An equality impact assessment is not required for this report.

11. Background Papers

Nil.

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Appendix A



Report of the Overview and Scrutiny
Committee

**Review of Equality, Diversity and Inclusion
within the Council**

2024

Contents

Summary	2
Members of the Overview and Scrutiny Working Group	3
Recommendations	4
Background	6
What does Equality, Diversity and Inclusion mean?	7
Neuro Diversity and Policy	9
Equalities and Events	11
D.H. Lawrence Museum	14
Kimberley Depot	17
Housing: Independent Living Scheme and update on void properties	18

Appendices

1. List of witnesses
2. Scoping report
3. Appendix 3 Accessibility Checklist
4. Appendix 4 Access Plan report D.H. Lawrence Museum
5. Appendix 5 Collections Access Policy
6. Appendix 6 Fire Risk Assessment Independent Living Scheme

Summary

1. Broxtowe Borough Council's Overview and Scrutiny Committee established a review of Equality, Diversity and Inclusion at the Council, to be carried out by the Overview and Scrutiny Working Group appointed at the meeting on 23 November 2023. The review was requested by Councillor S Dannheimer who suggested that a review should be considered to see if the Council met the needs of all service users, Members and employees. The review is in accordance with the Council's Always Improving, value providing continuous improvement and delivering value for money.
2. This review is part of the wider scrutiny that is still being reviewed. This report contains recommendations from meetings after collecting information from a range of sources and witnesses¹. Over the course of the review the Group met three times, on 15 January 2024, 1 March 2024 and 17 May 2024. The Chair of the Working Group also met with the Head of Housing on 24 May 2024.
3. The purpose of the review was to achieve the outcomes outlined in the scoping report². The review sought the following outcomes:
 - To develop recommendations to support improvements.
 - To improve the overall Equality, Diversity and Inclusion within the Council including service users, Members and employees.
4. This report sets out the review process that was adopted, options considered and the conclusions and recommendations.

¹ The list of appendices is attached at **Appendix 1**.

² The scoping report is attached at **Appendix 2**.

Members of the Overview and Scrutiny Committee Working Group

1. The Working Group was chaired by Councillor S Dannheimer, with Councillor S Webb as the Vice Chair.
2. Four other Councillors were part of the Working Group:
 - Councillor W Mee
 - Councillor E Winfield
 - Councillor C M Tideswell.
 - Councillor E Williamson

Councillor W Mee withdrew from the Working Group after 15 May 2024.

3. The Working Group was assisted by the Democratic Services Manager, Head of Housing, Head of Environment and Climate Change, Museum and Collections Manager, Head of Asset Management & Development, Human Resources Manager, Chief Communities Officer and the Equalities Officer.

Recommendations

It is proposed to the Overview and Scrutiny Committee to recommend to Cabinet to consider that:

- 1. The Human Resources Manager share the Neurodiversity Policy with all Members.**
- 2. To increase awareness of Neurodiversity and support available to employees and Members.**
- 3. To consider the provision of additional resources to the Communities team to ensure at least one event per quarter and a minimum of four in a year, be organised.**
- 4. To consider changing the counter space at the D.H. Lawrence Museum to be more accessible to customers and incorporate an area for a wheelchair user to access the digital tour.**
- 5. To consider the provision of ear defenders, to offer visitors who may have sensory processing differences and additional audio headsets to enhance the D.H. Lawrence experience to all.**
- 6. To increase signage within the museum to increase awareness of health and safety issues and accessibility and to provide signposting to the nearest accessible toilet.**
- 7. To increase advertising of the D.H. Lawrence digital experience to promote live tours to Groups.**
- 8. The Working Group notes that the current Council Offices required substantial works to resolve the current issues of disrepair and accessibility issues and at the earliest opportunity plans should be considered for the future of the Kimberley Depot Offices.**
- 9. To ensure all fire risk assessments are up to date in residential accommodation.**
- 10. To ensure independent living schemes have automated doors to support living independently.**

Background

1. The topic was suggested by Councillor S Dannheimer to consider Equality, Diversity and Inclusivity at the Council.
2. The review was scoped on at the meeting of Overview and Scrutiny Committee on 4 December 2023 where the Scrutiny Working Group was appointed. The Working Group sought to provide an update throughout the progression of the review.
3. The Equality, Diversity and Inclusivity topic is still being reviewed and site visits have been planned to scope the topic further. The Working Group have met on three occasions and scoped Neurodiversity, Equality events, visited the D.H. Lawrence Museum and Kimberley Depot, and visited an Independent Living Scheme and a void property within Housing.
4. The topic was considered to be a long-term scrutiny and this report is based on the last three meetings held with the Group. Further site visits have been requested to cover other areas of the Council as part of the scrutiny scoping form and site visits have been planned to scope the topic further. This report contains the reviews of:
 - Neurodiversity and the Policy from The Human Resources Manager
 - Equality Diversity and Inclusion events from the Communities Team
 - D.H. Lawrence Museum
 - Kimberley Depot
 - Independent Living Scheme Housing.

What does Equality, Diversity and Inclusion mean?

The Centre for Governance and Scrutiny explains that Equality, Diversity and Inclusion are three separate, but interlinked issues.

[Equality, Diversity and Inclusion - Centre for Governance and Scrutiny](#)

Equality is about ensuring that everyone is treated fairly, that they have equal or equity of opportunity and that everyone is treated with dignity and respect. Equality aims to challenge discrimination, remove barriers to opportunity and to eradicate prejudice so that individuals, or a Group of individuals are not treated less favourably because of their protected characteristics. Discrimination on the grounds of any of these characteristics below is illegal. Discrimination can take many forms including direct discrimination, indirect discrimination, bullying, harassment, and victimisation. Organisations have a statutory obligation to have due regard to the Equality Act 2010.

The nine protected characteristics as outlined in The Equality Act 2010 are:

- age
- disability
- gender reassignment (the process of transitioning from one sex to another)
- marriage and civil partnership
- pregnancy and maternity
- race, religion or belief. (*Religion* refers to any religion, including a lack of religion. *Belief* refers to any religious or philosophical belief and includes a lack of belief)
- sex
- sexual orientation.

No individual is defined by a protected characteristic. Intersectionality describes the ways in which systems of inequality based on gender, race, ethnicity, sexual orientation, gender identity, disability, class and other forms of discrimination “intersect” to create unique dynamics and effects.

Inclusion is about providing a space where everyone has equal access to opportunities and resources, and where everyone feels valued, welcomed and accepted. Inclusion refers to “the act or practice of including and accommodating people who have historically been excluded (because of their race, gender, sexuality, or ability).”

An accessibility requirement means making your content and design clear and simple enough so that most people can use it without needing to adapt it, while supporting those who do need to adapt things.

Diversity refers to the variety of differences among people, encompassing race, gender, age, experiences, talents, skills, and opinions.

An article was published in the Broxtowe Employee Briefing dated 22 March 2024 celebrating Neurodiversity Week and provided employees with information about Neurodiversity.



Neurodiversity describes the the idea that people experience and interact with the world around them in different ways; there is no one "right" way of thinking, learning, and behaving, and differences are not viewed as deficits.

Most people are neuro typical, meaning that the brain functions and processes information in the way society expects.

However, it is estimated that around 1 in 7 people (more than 15% of people in the UK) are neuro divergent, meaning that the brain functions, learns and processes information differently.

Neurodiversity refers to the different ways in which a person's brain processes information. It is an umbrella term used to describe alternative thinking styles such as Dyslexia, DCD (Dyspraxia), Dyscalculia, Autism and Attention Deficit Hyperactivity Disorder (ADHD).

There are many strengths of neurodiverse people

These may include:

- Strong pattern recognition
- Analytical thinking
- Deep focus
- Enhance memory
- Heightened sensory awareness, creativity and visual processing skills are also common

Benefits of having workplace cultural diversity

In terms of a neurodiverse workforce, instead of organisations being concerned about difference, the difference should be seen as a positive and embrace the benefits, such as:

- Increased creativity
- Boosts productivity
- Various perspectives
- Improved innovation

- Faster problem solving
- Improve decision making
- Reduced employee turnover
- Helpful language skills

The Council has a [Neurodiversity Policy](#) which outlines its approach to supporting equality and diversity in the workplace for employees who are neurodiverse. Neurodiversity” is a word used to explain the unique ways people's brains work. While everyone's brain develops similarly, no two brains function just alike. Being neurodivergent means having a brain that works differently from the average or “neurotypical” person. In today’s workplace, neurodiversity is a fairly new, but often used word, which really, at its core means “different”.

Neuro Diversity and Policy

Councillors in attendance at the meeting held on 15 January 2024:

S Dannheimer, S Webb, E Winfield.

1. The Council had introduced a Neurodiversity Policy in March 2021 to support employees, managers and new employees to the establishment. The Policy outlined the Council's commitment to promoting equality and fairness and to celebrate neurodiversity within the workplace. Since the introduction of the Policy, various training opportunities had taken place to employees of the Council. Members of the Group were pleased to recognise from a benchmarking exercise with other Local Authorities that Broxtowe was leading in its formal commitment to neurodiversity and that the Policy was the first of its kind within the local area. The Council won the Diversity and Inclusion Apprenticeship Award in 2023. The Policy can be located within the link below:

<https://intranet.broxtowe.gov.uk/media/4848/neurodiversity-Policy.pdf>

2. Members were reassured that when applicants apply for a job vacancy that they could make the Council aware on their application form when applying that they required support with the application form and at the interview. Appropriate reasonable adjustments could be offered at the interview stage. On success of the applicant, any reasonable adjustments would be followed up should the person be offered a role via a pre-employment medical questionnaire which was reviewed by the Occupational Health Team. Additional support could be provided through Access to Work including the purchasing of specialist equipment. In terms of supporting hidden disabilities during employment, it was done on a case by case basis and usually the Manager would liaise with HR about making reasonable adjustments to support the employee.
3. The HR department had arranged for some neurodiversity testing support for employees via 'Genius Within'. This included coaching and a detailed report for the Manager and HR team outlining support needs for employees with dyslexia testing and pre-screening tests for dyscalculia.
4. Training has been provided to managers in neurodiversity and this was organised via The Brain Charity during 2023. Work was being undertaken with the Training Officer to update Broxtowe Learning Zone. The Equalities Working Group was organised by the Chief Executive and a date for the next meeting would be 15 July 2024.
5. Members considered the Neurodiversity Policy and were pleased to see that Broxtowe was supporting applicants and employees and that they received newsletter bulletins and training. The Group would like to see this communicated to Members and employees of the Council for awareness and support, where necessary.

Conclusions

1. The Group concluded that they were encouraged with the support offered within the recruitment process and supporting employees throughout the lifespan of their employment. Members of the Group were pleased to recognise from a benchmarking exercise with other Local Authorities that Broxtowe was leading in its formal commitment to Neurodiversity and that the Policy was the first of its kind within the local area. The Group recognised that if an employee required extra support in relation to their employment, that the Council was committed to upholding its values on transparency, equality, innovation and valuing its employees.
2. Where reasonable adjustments, are necessary to support the employee they would be made on a case by case basis and would be agreed with line managers in relation to the employee's job role. Examples of reasonable adjustments would include specific work related equipment, differently presented documents or other recommended adjustments. Guidance was provided for both the manager and employee. Members were not aware that they could be supported where necessary, and would like to see this information along with the Policy, communicated to all Members so they can receive support as requested in line with the Policy. Members received a Cabinet report, 5 September 2023, Workforce Profile 2022/23, to support them with the review.

Recommendations

1. **The Human Resources Manager share the Neurodiversity Policy with all Members.**
2. **To increase awareness of Neurodiversity and support available to employees and Members.**

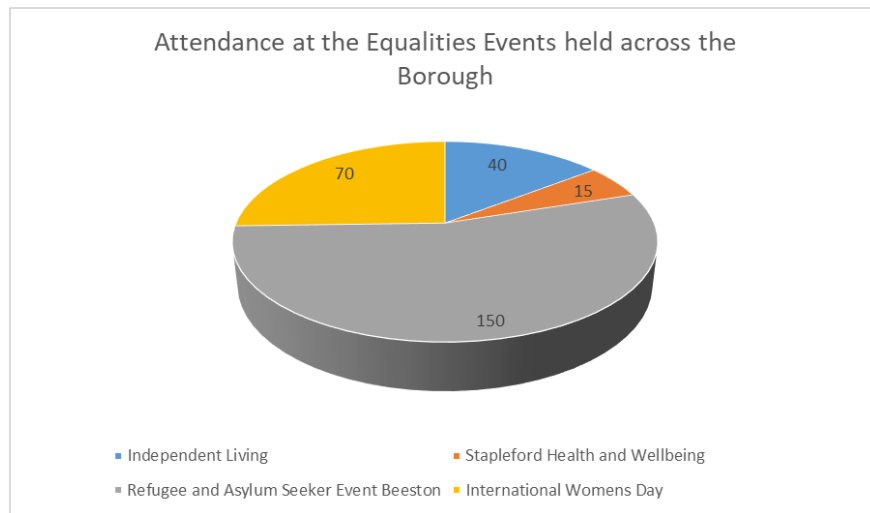
Equalities Events

Councillors in attendance at the meeting held on 15 January 2024:
S Dannheimer, S Webb, E Winfield.

1. A presentation was provided to the Group from the Equalities Officer on 15 January 2024. The Communities team works with members of the public and partnerships to host and deliver up to four events throughout the year across the Borough. The Group considered the events being spread across the Borough instead of the one event that was held in Beeston in the past. The events were limited due to resources. Members of the Group concluded that they would like to see more events, if possible, planned in the future.
2. The Aims and Objectives of the Hate Crime Action Plan for 2023/26 were as follows:
 - Hold a minimum of 3 events per year
 - To promote community cohesion, increase tolerance, educate and reduce community tensions and hate crimes
 - To celebrate and support our communities with protected characteristics
 - To signpost to support services and inform them on how to identify and report hate incidents and hate crimes.
 - To make safeguarding personal by allowing our diverse community to lead in practice and contribute to events, making them intentional and specific to the needs of the community and achieving the wider arching aim of tackling discrimination
3. Previous events held in 2023 included a Refugee and Asylum Seekers Celebration Event, Older Persons Wellbeing Event and a Health and Wellbeing Event for Physical Disabilities. The Refugee and Asylum Seekers event was held in partnership with Heya Nottingham and Broxtowe Women's Project. The event brought the community together to celebrate the diversity of Broxtowe and to share information from shared services, activities and shared cultural food. The older persons wellbeing event was held in partnership with the Broxtowe Independent Living team and raised awareness of the needs of the older community in Broxtowe. The event provided awareness of support provisions available within the community and was held in Beeston, Stapleford and Eastwood, The Health and Wellbeing Event was a multi-agency arrangement to signpost and raise awareness of services and opportunities for the disabled community. This event was held in Stapleford.

4. The events planned for 2024 included: Mental Health, Young People and Black History. Events proposed for 2025 were Learning and Disability, LGBTQ and Community, and Multi Faith.





Conclusions

1. The Group welcomed the variety of events and the spread across the Borough and understood the issues with resources and the events limited throughout the year. The events allowed for multiple agencies to participate and engage with the community to support and signpost and provide awareness within the Borough. Data of attendance was requested and was provided to the Group after the meeting.
2. It was proposed that further support and resources be allocated to the Communities team to ensure at least one event per quarter, minimum of four in a year, be accommodated.

Recommendation

3. **To consider the provision of additional resources to the Communities team to ensure at least one event per quarter and a minimum of four in a year, be organised.**

D.H. Lawrence Museum

Members in attendance at the site visit held on 1 March 2024:

Councillors S Dannheimer, S Webb, E Williamson, C Tideswell

Councillor H Skinner was also in attendance.

1. Members of the Group visited the D.H. Lawrence Museum to consider accessibility within the building. They were joined by the Head of Asset Management, and the Museum and Collections Manager.
2. The Group was provided with an accessibility checklist to support them with the site visit. See **Appendix 3**.
3. The Group was pleased to see handrails had recently been fitted on all the stairways. It was noted that all exit routes would require the need of a temporary ramp for wheelchair users including the entrance into the shop. The main entrance door did not have a window or an automatic opening. This could restrict a customer with mobility issues from accessing the building without additional support. However, it was noted that there were restrictions due to the character of the building.
4. Members appreciated that the character of the building prevented some changes to be made such as lifts and an accessible toilet. The nearest accessible toilet was at the nearby Morrison's Supermarket, they considered that unless the customer asked, this information was not visible to see. The Group considered it would be useful to provide this information before attending the museum, either on the website or provide a leaflet informing the customer prior to attending the museum. Signage informing customers where the nearest accessible toilets was located would also be useful.
5. Members appreciated the thought behind providing chairs within each room to allow visitors to sit on them if required and that they were not just part of the exhibition.
6. The shop area did not allow for a wheelchair user to access the digital tour in a zoned quiet area and the counter was too high to communicate effectively. Members considered that the space in the shop should be adapted for these purposes.
7. The digital experience of viewing rooms within the house by camera and a walk and talk demonstration of each room offered to Groups was noted as a good idea. It was thought that this could be promoted more widely to schools, community groups, to provide a digital experience that could provide additional income and could also allow access to users who were unable to access the

building with a wheelchair or reduced mobility. An option of You tube 'vlogs' was suggested and digital tours on the website.

8. Further investment in ear defenders to offer visitors with neurodegenerative conditions and audio headsets would be welcomed. There was an induction loop available.
9. Members were concerned with some of the landing areas around the stairs and the potential risk of someone falling. There was limited lighting within these areas. There should be increased signage to customers to make them aware of any health and safety issues to be mindful of.
10. After the meeting the group was presented with an Action Plan that was part of an Access Audit. This was conducted externally by a company called Direct Access Consultancy Ltd, and this was organised and paid by Museum Development at **Appendix 4**. The results of this Audit provided Members with a further understanding of what could be considered to make the Museum more accessible. Some of the recommendations had already been considered. Members also received the Collections Access Policy to review at **Appendix 5**.



Conclusion

1. Members welcomed the recommendations from the Access Audit that was undertaken externally. This information was provided to Members after the site visit and it hoped some of the recommendations from this would be implemented. The Working Group was pleased some of the recommendations had already been completed. The Group would like to see some further improvements made, especially with the counter space, the shop front entrance if possible, increased signage, advertising opportunities, and enhancements to the experience of visiting the D.H. Lawrence Museum with sensory packs including ear defenders and additional audio headsets to aid visitors who may have sensory processing differences.

Further information provided to the Members to conclude this area included:

[Designing for Accessibility \(bathnes.gov.uk\)](http://bathnes.gov.uk)

[A councillor's workbook on equality, diversity and inclusion | Local Government Association](#)

[Building inclusive workplaces | CIPD](#)

Recommendations

- 4. To consider changing the counter space to be more accessible to customers and incorporate an area for a wheelchair user to access the digital tour.**
- 5. To consider the provision of ear defenders to offer visitors who may have sensory processing differences, and additional audio headsets to enhance the D.H Lawrence experience to all.**
- 6. To increase signage within the museum to increase awareness of health and safety issues and accessibility and to provide signposting to the nearest accessible toilet.**
- 7. To increase advertising of the D.H. Lawrence digital experience to promote live tours to Groups.**

Kimberley Depot

Members in attendance at the site visit on 1 March 2024:

Councillors S Dannheimer, C Tideswell, E Winfield, E Williamson, and S Webb. Councillor H Skinner was also present as Portfolio for Environment and Climate Change.

1. The Group visited Kimberley Depot on the site visit 1 March 2024 to check accessibility of the building and site. Members had a tour of the offices and some of the outbuildings in line with Health and Safety. Members had been informed that changes to Environmental Waste collections in 2026 meant that the current Kimberley Depot would have to be redesigned to accommodate new vehicles, working practices and employees.
2. It was considered that the current design of the offices was poor and was in significant disrepair. The design of the building did not allow for major changes without substantial costs incurred to accommodate the changes required to meet accessibility needs.
3. It was reiterated to the Group that if there were any reasonable adjustments required to accommodate an employee then these would be carried out. The employee could also work from the Beeston Offices or from home. This would be in discussions with Human Resources, Occupational Health and the Manager.
4. Members noted most of the building in its current state did not comply with accessibility. The Group decided that because of the significant issues then plans should be considered for the future of the Kimberley Depot Offices.

Conclusion

1. Members considered that the Council office building at Kimberley Depot did not meet accessibility requirements and was in significant disrepair. They would like to see some plans considered for the future of Kimberley Depot Offices and ensure any future development incorporated accessibility requirements as standard.

Recommendation

- 8. The Working Group notes that the current Council offices required substantial works to resolve the current issues of disrepair and**

accessibility issues and at the earliest opportunity plans should be considered for the future of the Kimberley Depot Offices.

Housing:

Members in attendance at the site visit on 17 May 2024:

Councillors S Dannheimer, C Tideswell, E Winfield, E Williamson, and S Webb.

1. Members visited an Independent Living Scheme and a void property to look at accessible adaptations that had been installed at the sites. Further information was required to complete the scoping topic for Housing and would be considered further as part of the scoping topic. The Independent Living Scheme has been completed within this review.
2. Members visited an Independent Living Scheme. They noted the wide doors, large secure keypad on entry, glass in the doors, well lit rooms and signage. The corridors had handrails to support the tenants whilst walking. The internal and external fire doors raised some concern. Two internal doors in a passageway, used by residents had no automatic buttons and were heavy to operate. The doors made it difficult for the tenant with mobility issues to access and they required assistance to access the corridor. Another concern was the fire exists within the communal rooms. Both fire doors in this room and the access doors to the patio did not meet the ground level to outside and would need a temporary ramp or assistance to access. The fire door from the kitchen also had a shutter to navigate on a timer if tenants could only use this exit. The fire door in the communal area opened into a bin storage area and in addition, opened up into the pathway of another fire door from a corridor. Chairs and a table had also been placed in front of the fire door. The fire doors had a handle to operate the door, this was considered awkward if the tenant had mobility issues. Tenants are informed to stay in their own room in the event of the fire alarm being sounded. In the event of a fire, the communal area fire exit was not so clear especially with reduced mobility. The Chair of the Working Group met with the Head of Housing on 24 May 2024 as there was concern with the risks identified. A fire report was requested to the Head of Housing and Head of Asset Management and would be provided to the Group once the assessment became available.
3. The Group was invited to view a void property within the independent scheme. They noted the accessible window openings, plug sockets and radiator valves were at waist height. The bathroom had been adapted to a wet room with shower. The bedroom was adequate for a single bed but small to accommodate a double bed with access. It was unknown if there was more than one tenant renting the room. Members considered the property had been made more accessible for a tenant.

Further information that assisted the Group included:

Current building regulations

There are currently three levels of accessible housing, defined in regulations under 'Part M':

Category 1 or M4(1)

Visitable dwellings:

The lowest level and current baseline standard for building new homes. The basic criteria are level access to the main entrance, a flush threshold, sufficiently wide doorways and circulation space, and a toilet at entrance level.

But Category 1 is more lenient on allowing exceptions meaning that homes often don't end up with step-free access or amenities that can be easily used. This standard also doesn't future-proof homes, as they aren't easily adaptable.

Category 2 or M4(2)

Accessible and adaptable dwellings:

Also known as 'age-friendly' or 'lifetime' housing. These standards are slightly stricter than Category 1 and ensure no steps between the pavement and the main entrance, more space to move around in all areas of the home, and that features are easily adaptable to improve accessibility in the future as needed. These standards make life comfortable for millions of us who find it hard to move around our homes or use a wheelchair some of the time.

For example: the walls are strong enough to install grab rails, there's a hidden floor gulley to allow a walk-in shower to be easily installed, the staircase is wide enough to allow a stairlift - simple things built into the structure and space of the home that allow us to remain independent for longer.

Category 3 or M4(3)

Wheelchair user housing:

This is the only category intended to provide a home suitable for those of us who use a wheelchair all of the time.



05

Conclusions

1. Members concluded that the maintenance on void properties was very patchy and was probably due to the resource and time restraints to turn the properties around and not all void properties required accessibility needs. They recognised that some of the issues were outside the remit of the scrutiny for the accessibility topic, but felt the property visited at the site visit had some issues relating to maintenance and the effects this would have on the mental health of the tenant.
2. The topic for Housing would be considered further by the group for accessibility and to allow for further information to be made available such as evidence of a maintenance programme and existing budgets. Members were informed that the current building regulations of three levels of accessible housing, defined in regulations under Part M applied to new build properties only.

3. The fire doors at the Independent Living Scheme concerned the Members with the lack of automated buttons, the weight of some of the internal doors to open if the tenant had mobility issues and that the fire doors did not meet the level of the floor to outside within the Communal areas. Members would like to see the latest fire risk assessment when available.
4. Members were pleased with the large key pad on entry to help the tenant with access, bannisters to assist with mobility, and the openings of the windows within the homes at waist height.
5. Members of the Working group received the fire risk assessment as requested for the Independent Living Scheme. This has been attached at **Appendix 6**.

Recommendations

9. **To ensure all fire risk assessments are up to date in residential accommodation.**
10. **To ensure independent living schemes have automated doors to support living independently.**

Independent Living Scheme visited

Photos taken at the Independent Living Scheme. The communal area shows the large area with chairs and tables and the fire door with a push handrail to open with no automated button.



Handrails in the corridors



Communal area



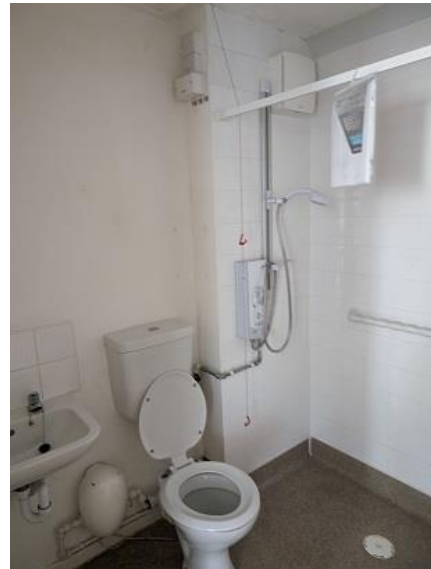
Fire door exit with push handrail.



Accessible window openings



Radiator valve at waist height.



Wet Room within an Independent Living Scheme.



Enlarged key pad on entry to the scheme.

Appendix 1

The following is a list of witnesses who gave evidence to the Working Group:

Date	Witness
15 January 2024	Human Resources Manager, Head of Communities and Crime, Equalities Officer
1 March 2024	Museum and Collections Officer, Head of Environment
17 May 2024	Independent Living Scheme Officer and Housing Officer
24 May 2024	Head of Housing

Scoping Report

Title of review	Equality, Diversity and Inclusion within the Council
Expected outcomes	<ul style="list-style-type: none"> • To develop recommendations to support improvements • To Improve the overall Equality, Diversity and Inclusion within the Council including service users, Members and employees
Terms of reference/Key lines of enquiry	<p>Who is the Diversity and Inclusion Officer (Check Equalities Officer and HR Officer look at the Policies and EIA form. Equality Impact Assessments Check relevant and assessments are carried out to meet the needs of the user. Apprenticeship Award. To question if recruitment and accessibility needs are met.</p> <p>Accessibility of all buildings/sites and rooms. Car park access. Accessibility to Council Offices (travel and transport) Accessibility to the Councils Websites/forms. Is the same shared across the Authority?</p> <p>Training awareness for all Members and employee's accessibility of Training for Members</p> <p>Accessibility to services the Council provides and inclusivity of leaflets, how residents/businesses pay etc..</p> <p>To consider if there is a North/South divide within the Borough including access to services and travel.</p> <p>Accessibility for leisure provided across the Borough including parks and play equipment. Benchmark across other Authorities</p> <p>Councillor inclusion</p> <p>Town Centres including signage for all and assets across the Authority Head of Asset Management.</p>
Possible sources of information	<p>Equality, Diversity and Inclusion - Centre for Governance and Scrutiny (cfgs.org.uk) https://www.local.gov.uk/publications/equality-framework-local-government-eflg-2021</p> <p>HR statistics and reports from Head of HR re recruitment (Hidden disabilities) Diversity and Inclusion report.</p>

	<p>Copy of the Equality, Diversity and Inclusion report. Do employees feel that there are barriers within the organisation? Employee Survey questions. Websites for accessibilities and other Scrutiny conducted on the topic. Previous reports to Cabinet including Equality, Play Strategy, Recruitment policies.</p> <p>What works well how can this be replicated across the Authority.</p>		
How review could be publicised	Website, Members Matters, Report to Cabinet, email me briefings.		
Specify site visits	<p>Kimberley Depot, Main Offices, Housing Complex, Accessible toilets. Check Housing properties for accessibilities including the non-visual disabilities any relets the Group could visit or willing tenants. Equalities Working Group attend next meeting</p>		
Possible witnesses	<p>Benchmark other Authorities Head of HR Equalities Officer Employees of Broxtowe Borough Council Residents (Senior Private Sector Housing Officer Accessibility) Head of Housing Head of Asset Management Head of Environment</p>		
Resource requirements	<p>Transport off site Background papers such as exiting reports and policies</p>		
Projected start date	04.12.2023	Draft report deadline	December 2024 Cabinet tbc
Projected completion date	04.11.2024		

Equality, Inclusion and Diversity at the Council Working Group

Accessibility Assessment.

Please use this form as a guide to your visit. If you feel there are areas of concern or areas that are missed, please make notes and inform your guide that this is the case.

This assessment checklist will help you on your journey to reviewing how accessible our premises and services are. This checklist isn't exhaustive and some may not apply to all buildings and areas. However, please let us know where you may think we need to make improvements. If you answer 'No' to any of the questions, take the opportunity to investigate further; Read up on guidance available.

Area / service	Yes	No	Your notes
We have designed our public website and intranet pages to allow people with varying disabilities to use them.			
We can provide disabled people with information on request e.g. how to get to our locations via the best accessible routes and the accessible features of our premises.			
Disabled car parking spaces we provide meet current guidelines.			
Reception areas/service counters of our premises are accessible for seated and standing disabled people and, we have an induction loop.			

Overview and Scrutiny Working Group

<p>Disabled people can move about our premises and use facilities provided without facing hazards (temporary and permanent) such as:</p> <ul style="list-style-type: none">• Changes in floor level or floor surfaces e.g. thick carpet and gravel• Clear glass (i.e. without manifestations)• Staircases without handrails• Poor lighting• Noise distractions.			
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Area / service	Yes	No	Your notes
Facilities provided are within easy reach for disabled users e.g. counter tops are at the recommended height ranges.			
Doors throughout our premises are easy for disabled people to use independently and are within recommended ranges of force to use them.			
Stairs provided meet guidance.			
Passenger lifts and/or vertical lifts are provided, and they meet guidance.			
Welfare facilities provided for disabled people (toilets, showers etc.) meet the required guidance and are fitted with handles.			
We provide furniture (e.g. tables and seating) that ranges in height to accommodate a variety of disabled users.			
Disabled customers/audiences have accessible facilities provided (e.g. seating, viewing distances, assisted listening systems etc.).			
Our premises are provided with signage and wayfinding information to allow disabled people to use our premises independently.			

Area / service	Yes	No	Your notes
We openly accept all assistance dogs into our premises.			
We have a means to assess reasonable adjustments we can make for employees.			
We can implement evacuation plans for disabled people (including staff, visitors, customers etc.) so they can escape in the event of a fire at our premises.			
We have given our employees disability and discrimination awareness training to support each other as well as disabled customers/clients.			

Guidance:

- BS 8300-1:2018 Design of an accessible and inclusive built environment. External Environment. Code of practice
- BS 8300-2:2018, Design of an accessible and inclusive built environment. Buildings. Code of practice
- Approved Document M: Access to and use of buildings, volume 2: buildings other than dwellings.

Section 4 – Action Plan

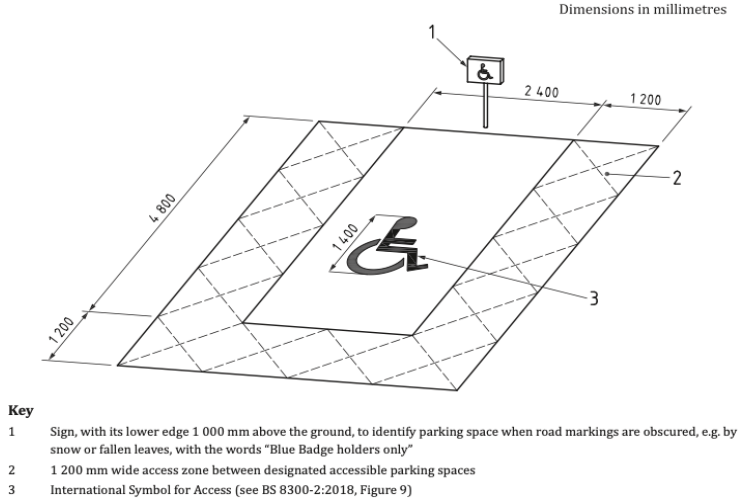
4.1 - ACTION TABLE

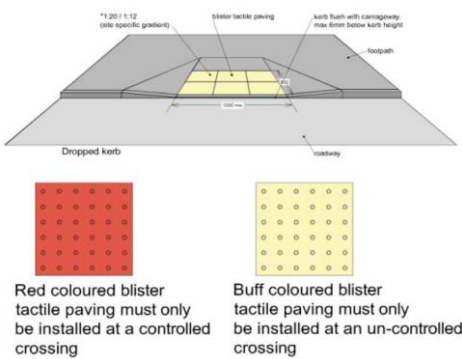
Appendix 4

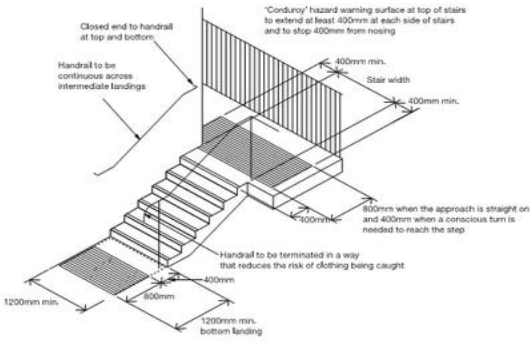
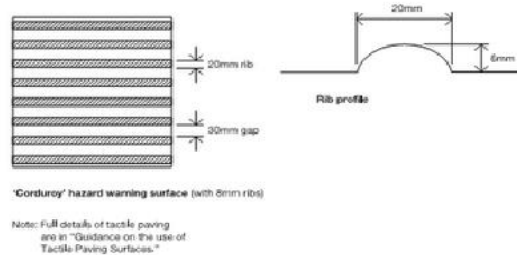
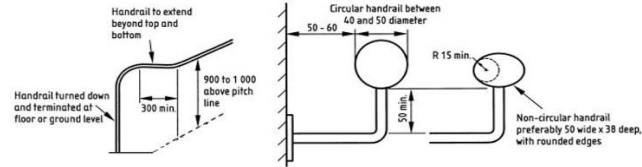
COSTS - N = NONE M = MINIMAL OG = ONGOING MAINTENANCE ST = STRUCTURAL CHANGE EX = MAJOR STRUCTURAL CHANGE				
Item Ref.	Details / Issue	Recommendation	Est Cost	Action Taken
PRIORITY 1				
6.5	Portable loop system is available on site - not fully charged on day of survey. Staff confirmed there is no fixed loop on site.	<p>Install an induction loop to the reception desk. Install signage indicating the availability of the facility and ensure that staff members are aware of how to use the system.</p> <p>Direct Access has its own bespoke desk induction loop for people with hearing impairments. We are able to supply, install and provide brief training. Please see here and contact us for more information - https://directaccessgp.co.uk/induction-loops-and-hearingenhancement-systems/</p> <p>BS8300 - A hearing enhancement system, using induction loop, infrared or radio transmission, should be installed at service or reception counters.</p>	M	Added charging of current hearing loop to regular checks. Placed on reception counter.
17.2	All exit routes are stepped. Wheelchair users would require assistance.	<p>Ideally a permanent ramped exit should be provided. It is acceptable in the short-term to provide a portable temporary ramp made available on demand with appropriate assistance.</p> <p>Any equipment and accompanying assistance must be made available for disabled people in the event of an emergency as part of a PEEP, refer to 18.7. With generic plans provided for disabled people as visitors.</p>	M	

18.6	Staff confirm checks are undertaken weekly and monthly. Staff inductions are used to ensure correct procedures and processes are followed.	Site management need to ensure that the appropriate procedures are in place to frequently check the exit routes to make sure that there are no obstacles.	N	This is part of regular checks
18.7	Staff confirmed that no personal egress plans are currently required at the museum.	<p>As part of any induction procedure staff should be asked if they require any assistance during an emergency and a PEEP (Personal Emergency Evacuation Plan) should be agreed in consultation with the staff member.</p> <p>PEEPS (Personal Emergency Evacuation Plans) are recommended to be provided, practiced and implemented by building management to ensure that correctly trained personnel and the correct equipment is in place to facilitate the efficient evacuation of disabled people, as recommended in BS9999/46.2 & Part B/B1.xvi. Guidance on providing PEEPS can be found here https://www.gov.uk/government/publications/fire-safety-risk-assessment-means-of-escape-for-disabled-people</p> <p>PEEPS (Personal Emergency Evacuation Plans) must be planned in consultation with individual disabled people that are expected to regularly access the building. Additional generic PEEPs should be provided to cater for the possibility of wheelchair users, Deaf and partially hearing people and Blind and partially sighted people using the building.</p>	N	
18.8	Staff confirmed that the general escape strategy and egress plans are checked regularly.	Site management need to ensure that both the general escape strategy and personal emergency egress plans continue to be regularly checked for efficiency and effectiveness.	N	Ongoing

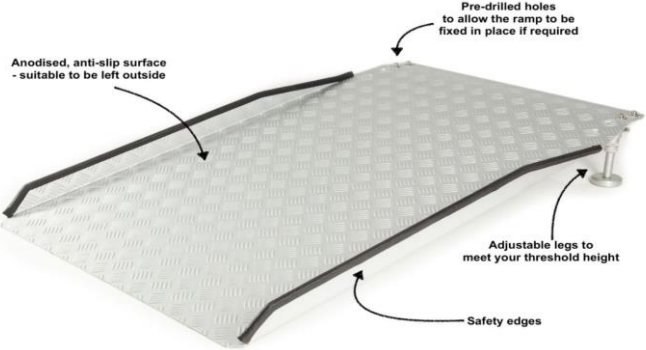
PRIORITY 2				
1.2	Crossings on nearby approaches have turn cones and tactile paving. There are dropped kerbs on street leading to the museum but no tactile paving on crossings.	Site management should undertake liaison with the Highways Dept to provide tactile paving in the area to aid people with impaired vision.	N	
1.3	Footpath leading down from main thoroughfare does not exceed 1200mm width.	<p>During future works, consideration should be taken to widening the access route. To be accessible, the minimum surface width of an access route (i.e. between walls, kerbs or path edgings) should be at least 1 800 mm for general routes (see Note 1), although a width of 2 000 mm is preferable to accommodate larger electric mobility scooters.</p> <p>Where the surface width of an access route is less than 1 800 mm, passing places should be provided to allow two wheelchair users to pass each other. Passing places should also be provided at junctions (e.g. corners) along an access route.</p> <p>A passing place should be 2 000 mm long x1 800 mm wide and located within direct sight of another passing place, or at a maximum distance of 25 m from another, whichever is the closer.</p> <p>Where it is necessary to introduce occasional narrowing of the access route, the restricted width should be at least 1 200 mm and should extend for not more than 2 m in length .</p>	ST	

<p>1.5</p>	<p>Museum is well signposted. However, there is a broken sign above the museum entrance facing pedestrian route from A608 direction.</p>	<p>The broken sign should be replaced to ensure museum is clearly identifiable and visible from all directions.</p> <p>People with hearing impairments make up the largest group of disabled people. They can be helped or hindered by signage. Good signage can mean that a person with a hearing disability can manage without having to ask questions. For further information on signage please refer to - JMU Access Partnership and The Sign Design Society. 2000. ISBN 185878 412 3.</p>	<p>M</p>	
<p>2.2</p>	<p>Accessible bays are not signposted on entrances, but positioned immediately by the entrances. Museum logo on parking sign for short stay car park partially obscured with directional signage. There is no signage at the front of the bays.</p>	<p>Liaison should be undertaken with the relevant department in the Local Authority to highlight the issue.</p> <p>Refer to diagram for best practice BS8300 specification.</p>	<p>N</p>	
<p>2.2</p>	 <p style="text-align: center;">Dimensions in millimetres</p> <p>Key</p> <ul style="list-style-type: none"> 1 Sign, with its lower edge 1 000 mm above the ground, to identify parking space when road markings are obscured, e.g. by snow or fallen leaves, with the words "Blue Badge holders only" 2 1 200 mm wide access zone between designated accessible parking spaces 3 International Symbol for Access (see BS 8300-2:2018, Figure 9) 		<p>N</p>	

2.3	<p>Long stay car park, bay 1, has hatched area on one side and rear only and there appears to be cafe waste at the front of the bay. At the opposite end of the car park a further accessible bay (28) is hatched on one side and rear only.</p> <p>Short stay car park accessible bays have hatching on each side/enough space for drivers or passengers to transfer, though no dropped kerb on pavement next to bay in front of parking sign.</p>	<p>Liaison should be undertaken with the relevant department in the Local Authority to highlight the issue.</p> <p>Refer to diagram for best practice BS8300 specification.</p>	N	
2.5	<p>Dropped kerbs are provided, but no tactile paving. Car park surface is smooth.</p> 	<p>Site management should undertake liaison with the Highways Dept to provide tactile paving in the area to aid people with impaired vision.</p> <p>Refer to diagram for specification.</p>	N	
2.7	<p>Lighting provision was observed for both car parks. Survey took place during daylight hours, and one lamp was lit for the duration of the audit in the short stay car park.</p>	<p>Site management to undertake investigation of the lighting levels within the car parking areas during darker hours to ensure that they are sufficient.</p>	N	

<p>4.1</p>	<p>There are no visual or tactile warnings at the top and bottom of steps leading to museum garden and picnic area.</p>	<p>Install tactile paving to both the top and bottom of steps.</p> <p>BS8300 - To give advance warning of a step, tactile paving with a corduroy hazard warning surface should be provided at the top and bottom of each flight, excluding intermediate landings with continuous handrails. Where the approach to the stair is wider than the flight, the tactile surface should extend beyond the line of each edge of the flight.</p> <p>Refer to diagram for specification.</p>	<p>M</p>	
<p>4.1</p>			<p>M</p>	
<p>4.2</p>		<p>BS8300 compliant handrails should be installed to both sides of the external steps. These should be well contrasted and not cold to touch.</p> <p>The handrails need to be one with a suitable profile (circular: 40 – 45mm, oval 50mm, in diameter)</p> <p>The handrail should be installed at a height of 900mm and needs to continue horizontally at least 300mm beyond the top and the bottom and should not project into the route of travel at final landings.</p>	<p>M</p>	

4.3	Survey was conducted in daylight hours. Site management should undertake a lighting review.	Site management should undertake a review of the step lighting levels during darker hours to ensure that the step treads are evenly lit. Lighting on external steps and ramps should achieve a minimum level of 100 lux where they are external and adjacent to entrances/exits of buildings.	N	
4.6	Nosings are not provided to the steps to the garden. Step nosings have poor contrast against their surrounds.	<p>Bright colour contrast needs to be painted to the edge of the step nosings to clearly highlight their presence.</p> <p>BS8300 - Each step nosing should incorporate a durable, permanently contrasting continuous material for the full width of the stair on both the tread and the riser to help people who are blind or partially sighted appreciate the extent of the stair and identify individual treads. The contrasting material should extend 50 mm to 65 mm in width from the front edge of the tread and 30 mm to 55 mm from the top of the riser, and should contrast visually with the remainder of the tread and riser.</p>	N	

<p>5.3</p>	<p>No level threshold provided, one step with portable ramp available for staff to manage visitor entry. Internally the step is not flush with reception flooring.</p> <p>Staff confirm that as museum entrance from street is on a slope a portable ramp for one side of a wheelchair is provided. Nosings are absent from the entrance step.</p>	<p>Remedial works should be undertaken to the threshold to ensure a flush entrance threshold is provided that eliminates the cross-all gradient at the entrance. This will aid wheelchair users as well as remove a potential tripping hazard.</p> <p>In the short term an improved bespoke portable ramp to be provided that will take into account the sloped entrance and to cover the full width of a wheelchair. An Adjustable Threshold Bridge Ramp may offer a suitable solution to accommodate the uneven threshold height.</p> <p>Bright colour contrast to be painted to the edge of the step nosing to clearly highlight its presence.</p> 	<p>M</p>	
<p>5.5</p>	<p>A solid entrance door is provided.</p>	<p>Consideration to be given to providing a vision panel on the entrance door to prevent a potential collision hazard.</p> <p>BS8300 - Entrance doors and lobby doors should have viewing panels to alert people approaching a door to the presence of another person on the other side.</p>	<p>M</p>	

5.7	The door felt heavy to open on the day of the survey. Two weights are used to prop the door open, (positioned by staff as required) and these weights just hold the door open.	All doors should be adjusted to provide a BS8300 compliant light opening action 30N from 0° (the door in the closed position) to 30° open, and not more than 22.5N from 30° to 60° of the opening cycle.	M	
5.8	No entry phone or intercom is provided.	A simple intercom system is recommended to ensure that a disabled person using the entrance can call reception in order to open the door. The intercom/call button should be relocated at a height of between 900mm and 1100mm from finished floor level.	M	
6.3	Reception desk should be designed to accommodate both standing and seated customers.	The reception should be designed to accommodate both standing and seated customers with at least one section of the counter 1500mm wide, with its surface no higher than 760mm, and a knee recess 500mm deep up to a height of 700mm.	M	Left hand side of counter (little bookshelf) to be kept clear for visibility
6.4	Edges are not highlighted. Flooring in front of reception desk requires suitable colour contrast to aid people with impaired vision.	It is recommended that a section of the flooring in front of the reception desk be replaced with an alternative that is suitably colour contrasted. This will aid people with impaired vision when attempting to locate the reception desk.	M	
6.7	Seating provided for visitors in reception/shop area, does not have armrests. Other seats can be brought in from other parts of the museum as and when required.	Provide some seating in the reception waiting area which has armrests to aid ambulant disabled people. Ensure all seating is well contrasted against the background upon which they are seen. According to BS8300 - If a seat is too high or too low, or if there are no armrests or side supports, a person may experience considerable discomfort as a result of poor posture. A person may also have difficulty rising from a seated position if the seat is set too low, or if it has no armrests.	M	Armrest chair placed in shop
6.8	Retail items were are various heights, which may not be readily available for all visitors.	Ensure procedures are in place to assist visitors who may require access to the various retail items.	N	Museum staff to take items from higher shelves on request

6.10	Information sheet is handed to visitors on arrival and staff provide information as part of welcome.	<p>It may be beneficial to provide an access brochure to develop awareness of the facilities available in the museum.</p> <p>Refer to https://www.accessibilityguides.org/ for further information on the development of access statements and guides.</p> <p>It is also recommended that any Access Brochure provided is available for the site in a range of formats.</p> <p>These formats are Audio, Braille, Large Print, Easy-Read and electronic formats such as WORD and PDF that are more accessible to screen reading technology.</p>	M	
6.11	Museum safety notices are located throughout the museum highlighting some issues visitors may encounter on their visit. No access services signage was seen on day of survey.	Access signage outlining the various access services should be provided within reception.	M	The introduction that visitors receive at the museum has now been updated to include this
6.12	Access services are not publicised with the exception of the museum website.	Any access service provided, such as audio descriptions, induction loop systems and tactile experiences , should be included, as events, performances, new exhibitions and further information are publicised by the museum.	N	
7.2	There is no wheelchair access to the corridors in the museum. Corridors are kept clear. The grill heater cover on the first floor does not contrast well against its background and narrows the corridor which could potentially be an issue for people with vision impairment.	Improved contrast should be added to make the heater cover apparent to Blind/partially sighted people.	M	

7.7	There are brightly coloured floor coverings and busy wall coverings in some of the display rooms as part of the decoration of the era in which the display is set. Loose rug warnings are given on the safety information sheet at the start of a visit and on signage.	Brightly coloured flooring can be an issue for some cognitive & neurodiverse disabled people who are vulnerable to hypersensitivity. Coloured and patterned surfaces should be avoided on all main access routes. Transitions between different surfaces must be flush with any loose rugs, carpets or matting firmly fixed to the floor so that it does not represent a trip hazard.	M	
8.1	Internal doors are distinguishable from their surroundings in the set dress rooms and visitor reception. Most doors are left open when the museum is open to the public. Remaining doors do not contrast well against their surroundings.	Ideally all doors should have contrast against the surroundings upon which they are seen. This could be achieved by painting the door frames a contrasting colour. Adding colour contrast will aid people with impaired vision.	M	
8.5	All doors are kept open for visits with the exception of the exit door to the garden and courtyard WC's, with a door handle positioned higher than recommended. Door can only be opened by unlocking the bolt lock which is of poor contrast to its surround and won't be easy to operate for people with limited dexterity.	Consideration should be given to unlocking the door to the garden and courtyard when open to the public - staff reported that some visitors do not explore this area, despite the signage provided.	M	
8.6	Door handle is clearly visible, but the locking mechanism is not. Staff confirm that some visitors get confused that they are able to visit this space and don't unlock the door.	When considering door opening options, door knobs are generally difficult for use by people with ambulant disabilities - people who may have dexterity impairments or arthritis due to the wrist action required to open them.	N	
10.4	Handrails are not fitted to both sides on the flights of stairs. The shop/reception area handrail has merchandise displayed from them.	Handrails should be added to provide the required full length handrails and 300mm horizontal landing extensions with the entire handrail located at a height of 900mm from the slope and landing surface. As required by BS8300.	M	New bannisters and grab rails fitted throughout - merchandise removed
10.5	Handrails within the historic areas have good contrasting against their backgrounds. The handrail on the staircase at the beginning of the visit and the AV room have poor contrast against their background.	BS8300 compliant handrails should be installed to the other side of the flight. Colour contrast should be added to the existing handrail.	M	New bannisters and grab rails fitted throughout

12.3	The fittings in the courtyard WC's have fittings that do not contrast well against their surroundings.	<p>Greater contrast should be considered for the fixtures and fittings within the WCs. This can be achieved by having light sanitary ware seen against a dark background or vice versa.</p> <p>According to BS8300 - to help blind and partially sighted people identify key objects within sanitary accommodation, support rails and grab rails should contrast visually with the wall, the WC seat and cover should contrast visually with the WC pan and cistern, and sanitary fittings and accessories should contrast visually with the background against which they are seen.</p>	M	
12.4	Latch mechanism for opening and closing courtyard WC's can be difficult to operate for people with dexterity impairments. These are not well contrasted against their background.	Door locks and door-furniture should be easy to operate using a 'closed-fist', limited dexterity and/or minimal force.	M	
12.6	Lever tap was fitted to one WC in the courtyard.	<p>All taps should be replaced with lever style, this will aid people with limited dexterity in their wrists.</p> <p>According to BS8300 - Taps should either be mixer taps with an up and down action to control water flow or individual hot and cold lever operated taps with not more than a quarter turn from off to full flow.</p>	M	
12.7	No ambulant WC was provided.	As the courtyard WC's are small, consideration should be given and advice sought to creating one larger WC from the two for an accessible facility.	ST	
14.2	<p>Two information panels lying flat on cushion in the display case could be angled to make them easier to read. Third panel is already at an angle.</p> <p>In the Laundry the 'Beware' signs are either obscured or at an angle.</p>	<p>Keep in mind the natural line of sight when mounting labels. Labels mounted at 45 degree angles to the front of a case or vitrine are more accessible to people who have low vision than those that are mounted flat on the floor of the case. Labels should also be as close to the front of the case as possible, when not obstructed by a solid cabinet front.</p> <p>Reposition signage in the Laundry.</p>	N	Signs in display case adjusted - safety sign in wash house redone and repositioned

14.4	Signage design, such as the 'Things Men Have Made' sign on display case has poor letter contrast against its background. The 'Travel Trunk' label has more characters on average than is recommended.	Colours for text must have a high contrast between the letters and the background. Smithsonian Guideline - Text containing too many characters on a line is difficult to read. Exhibit text should have a maximum of 55 characters (average) per line. Narrower columns with a 45-50 characters per line are preferable. Alternative forms of labels should be provided (Braille, audio, large print) within the exhibition space.	M	
14.5	All areas are not wheelchair accessible. Must see items of the collection are highlighted on the information sheet and boards around the museum and referred to by staff.	Digital access tours are available, recommend this is readily available on a drop-in basis in addition to pre-booked.	N	
14.10	No sensory pack and no ear defenders on site. Reading room, resource trunk cubes with smell of pit ponies, sound of steamboat. Parlour has sound of barking dogs from outside and Victorian street scene.	Consideration should be given to providing a sensory pack with ear defenders to aid visitors who may have sensory processing differences. This includes people with neurodegenerative conditions (such as dementia), neurodivergent conditions (such as autism, ADHD, dyspraxia), or hearing differences due to hyperacusis or misophonia. The types of noise people are sensitive to are different for different people. It might be a continuous noise, intermittent noise, unexpected noise, high volume noise, or specific frequencies of noise.	M	
14.11	Museum staff respond to specific enquires as they come in - though no procedure is in place in terms of communication support.	It would be beneficial if the museum had procedures in place to provide communication support when required, and to advertise this.	N	

14.13	Staff confirmed there are two versions of the introductory film, one with subtitles and one without. This is not on a loop system, staff switch on for visitors and discuss the versions available. Translation sheets are available for other languages in addition to English. No Braille provided and uncertainty whether there are provided in large print.	Provide written material in alternative formats such as Large Print, Easy Read and Braille and include the phrase "Alternative Formats Available on Request" on written material. You must have contacts and procedures in place to satisfy a request. See https://www.gov.uk/government/publications/inclusive-communication/accessible-communication-formats Consider adding BSL option to information videos.	M	Some new films have been made - to see if editing can make them suitable
15.1	The layout of the museum is reasonably clear. There is no braille or tactile signage with the exception of the courtyard WC's.	Review of way finding signage required. Whilst the latest BS8300 revision has downplayed the requirement for Braille, it has highlighted the importance of pictorial signage. Pictorial signage should be considered for throughout the site. There should be new directory boards and tactile/Braille signage on the actual doors. Words entirely in upper case type (capital) should also be avoided. A sans serif type face with a relatively large "capital" height to "x" height should be used. BS8300 - Signs and universally accepted symbols or pictograms, indicating lifts, stairs, circulation routes and other parts of the building should be provided. Visual signs should be self- evident and, in particular, legible to visually impaired people. Plain English and pictograms together should be used to assist people with learning difficulties.	N	
15.2	There is a lack of signage conveying information within the main lobby area.	Signs and universally accepted symbols or pictograms, indicating stairs, toilets, circulation routes and other parts of the building, should be clearly provided in the reception area.	M	

15.10	Leaflets displayed were positioned at a height that would make it difficult for wheelchair users and people of short stature.	Site management to implement a procedure to ensure that all leaflets are provided at a height no greater than 1200mm.	N	Leaflets moved
15.11	No site leaflets currently. Staff confirmed that new leaflets are in the pipeline. Recommend new leaflets are in accessible formats.	Have procedures in place to produce documents in accessible formats. These formats are Audio, Braille, Large Print, Easy-Read and electronic formats such as WORD and PDF that are more accessible to screen reading technology.	M	New leaflets now available
16.2	Visitors only control the lighting in the permanent exhibition room. The positioning of the light control is above recommended level and is of poor contrast against its background. The accompanying signage should contrast visually with its background.	At the next refurbishment for the site, it would be beneficial to change the existing light switch plates with alternatives that have a grey/silver plate. This will ensure that they are easily located by people with impaired vision.	M	
16.7	Portable induction loop is available. It required charging on the day of the survey.	Where a Portable Induction loop is present it is important to ensure that procedures are in place to provide training and charging so that the system is available on demand.	N	Charging now part of regular checks
18.9	Staff confirmed that panic alarms on site tested regularly. There are no emergency cord alarms provided. Portable induction loop will require regular testing.	Any hearing enhancement system must be subject to testing and maintenance as part of an enforced maintenance schedule that ensures that the equipment is working at all times. Inspection and servicing at intervals not exceeding 12 months needs to be carried out.	M	Charging now part of regular checks

PRIORITY 3				
6.4	Edges are not highlighted. Flooring in front of reception desk requires suitable colour contrast to aid people with impaired vision.	It is recommended that a section of the flooring in front of the reception desk be replaced with an alternative that is suitably colour contrasted. This will aid people with impaired vision when attempting to locate the reception desk.	M	
10.3	Nosings were identifiable from the tread and riser - the use of the nosings on the entrance route flight using the works of DH Lawrence is novel (lettering upper case).	Signage text should be replaced with text beginning with an upper-case letter and continuing with lower case letters. Text entirely in upper-case type (capitals) should not be used because it can blur the word shape and reduce legibility.	M	
10.6	Landings are small - this is highlighted in the safety information visitors are provided with at the beginning of their visit.	Deemed fit to retain. Consideration should be given to improving landing areas to achieve more accessible dimension in the event of a major alteration or refurbishment.	OG/ST	Hazard tape now fitted at top of staircase on first floor landing in historic side
10.7	There is no contrasting area at the top or base of step flights.	Adding contrasted surfaces to the head and foot of stairs can help blind and partially sighted people identify floor levels and the head and foot of stair flights.	M	
14.3	Signage was provided stating items cannot be touched. The Reading room has a resource trunk for handling and include cubes with smell of pit ponies, sound of steamboat. Parlour has sound of barking dogs and Victorian street scene. Staff inform that a pendulum clock is due to return following repair to add to audio. There are no audio description tours. Critical items are kept behind ropes with security alarms in place.	Signage indicating handling collection within rooms to be provided.	M	
14.6	Staff are not specifically trained but feel experienced enough to translate.	Regular scheduled training should be scheduled for staff on subjects such as Disability Awareness, Deaf Awareness, Blind & Partially Sighted Awareness and Dementia and Autism. These issues accompanied by regular refresher sessions can add value to staff and enhance the overall visitor experience.	M	

14.17	Lever taps are provided. There is no split height work surface.	<p>The staff kitchens/refreshment areas should feature a worktop at 850mm height that includes an 800mm long section with a clear space beneath the depth of the work surface and at least 700mm in height.</p> <p>The ideal solution where dual heights cannot be provided is for an adjustable height work surface to be provided. The use of an adjustable height work surface gives greater flexibility and is therefore preferred.</p>	M	
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**D.H. Lawrence Birthplace Museum
Access Policy**

Name of museum: *D.H. Lawrence Birthplace Museum*

Name of governing body: *Broxtowe Borough Council*

Date on which this policy was approved: 5 March 2024

Date at which this policy is due for review: 5 March 2029

Our commitment to Accessibility

- This access policy reflects the commitment of the D.H. Lawrence Birthplace Museum and its governing body to providing the widest possible access, and to enable audiences from all sections of the community to enjoy the use of the museum, collections and services
- The D.H. Lawrence Birthplace Museum recognises there are many and varied barriers to access
- This policy will establish priorities and help to guide and shape the work of the D.H. Lawrence Birthplace Museum in considering access in all projects, services and management decisions. An access audit will be carried out every five years, and a subsequent Access Plan will be implemented and followed
- Our policy is to build accessibility into everything we do from services available at the museum, to the information and communication related to the services and to the staff providing them
- Improving access to services for disabled people improves access to services for everyone, including people who might not consider themselves being disabled but would appreciate easier access and friends/family of disabled users. If a property is accessible, it will be relevant to more people and valued by a wider community, which helps to ensure its survival
- Our commitment to accessibility encompasses staff and volunteers as well as visitors and users

Definition of Access

We define access as something that is made possible when physical, intellectual, cultural, social, financial, psychological and emotional barriers are removed, reduced, or overcome.

Barriers to Access

The emphasis of the policy is on the removal of barriers to access, which can be:

- **Physical:** to enable people with physical disabilities to reach and appreciate every part of the museum service. Physical barriers can also exist for the elderly and of people caring for young children
- **Sensory:** to enable those with impaired vision or hearing to enjoy and appreciate the museum's building, exhibitions and collections
- **Intellectual:** to enable people with learning disabilities to engage with and enjoy the museum and its collections. We also recognise that people learn in different ways and will provide interpretation in a range of learning styles
- **Cultural:** to consider the needs of people for whom English is not a first language, or whose knowledge of English history and culture may be limited
- **Emotional and attitudinal:** to ensure that the museum environment and workforce are welcoming to visitors from all sections of the community
- **Financial:** we will take into account that ability to pay can be a barrier to access for some people and we will offer such people opportunities to access the museum service

Access to the Museum Building

- The D.H. Lawrence Birthplace Museum is a listed building and some physical adaptations, which would make it more accessible, are not possible or extremely difficult to undertake. Historic buildings regulations and Health and Safety laws must all be considered when considering changes. However, efforts will always be made to achieve as much reasonable accessibility as possible

Overview and Scrutiny Working Group

- Where physical access is not possible, alternative means of offering the service will be considered ensuring that solutions offer an equal degree of dignity at all times
- We will highlight access difficulties as well as access achievements to allow disabled people to make their own decisions about our service

Access to Collections and Learning

- We will provide various means of access to the collections to visitors onsite, including displays, handling items, translation sheets, events and digital access tours
- We will provide access to our collection and the heritage and legacy of D.H. Lawrence offsite and beyond the museum's geographical reach through: outreach to various sites, organisations and events; loans of exhibitions to other sites; digital tours; loan boxes; other ways of engagement such as Arts Award and Writing Competitions
- We will promote the museum's offering through media coverage and on-line services such as social media
- We will provide learning opportunities for different audiences and levels of ability and tailor our tours to the needs of specific groups.
- We will ensure that exhibition information is written in clear language without unnecessary jargon or pretension and that any videos contain subtitles
- We will endeavour to make more collections items available for audience engagement with due regard to the Collections Care and Conservation Policy (for condition checking and technical assessment, to check the object can be safely used and to see if conservation is needed), the Collections Information Policy (for recording when, how and by whom the object is used), and the Collections Development Policy (which includes the museum's mission statement, aims and objectives)

Access to general services

- Our front of house team will ensure that all visitors receive a warm and friendly welcome as well as appropriate and sensitive treatment
- We will train all staff in disability equality and awareness and ensure all staff are aware of the Access Policy and Access Plan

Overview and Scrutiny Working Group

- We will ensure that signage is appropriate and clear
- We will promote access availability for appropriate events
- The comfort of our visitors will be considered when planning interpretation, and exhibition layout, including in the historic rooms.

Access to Communication

- We will make information on the service accessible to disabled people before and during their visit through an access statement available on-line or with relevant information on marketing material
- We will follow guidelines from the Royal National Institute for the Blind (RNIB) regarding clear print
- We will produce promotional material suitable for all or provide alternative formats
- We will provide a range of ways that people can communicate with us such as email, telephone, social media and in person
- We will work to ensure that our website is fully accessible
- We will promote the museum and its narrative using a range of media to maximise engagement with diverse audiences.
- We will evaluate our services and projects to ensure they meet the provision of this policy. We will consult users and non-users on new developments, and we will communicate our future plans to them when appropriate

Document Version 1
Survey Date 16/04/2024
Suggested Review Date 16/04/2025

FIRE RISK ASSESSMENT

TYPE 1

YEW TREE COURT

Yew Tree Court
Beeston
Nottingham
Nottinghamshire
NG9 2NA

This report must be retained on the premises for inspection by statutory authorities.
Management is responsible for actions required in this report and should brief all staff on the report's findings.

Enforcement Officers are requested to note that this document is designed to inform the Lessee Tenant Manager of the existing Fire Safety Arrangements and any Significant Findings. Issues relating to the control and management of fire safety management for fire safety measures can be found in in-house documents such as:

Fire Policy and Testing and Maintenance records

Table of Contents

Cover Page	1
Table of Contents	2
Scope of Report	4
Introduction	5
Certificate of Conformity	7
Asset Information	8
Findings	11
Action Plan	19
Photos	22

1 Scope of Report

The customer has instructed us to carry out this Fire Risk Assessment to assist them in satisfying their responsibilities under the RR(FS)O 2005.

Article 9 of The Regulatory Reform (Fire Safety) Order 2005 requires every responsible person to make a suitable and sufficient assessment of the fire risks to which relevant persons are exposed, concerning premises within their control. This is to identify the general fire precautions that are needed to comply with the requirements and prohibitions imposed by the Order.

The responsible person, or any other person who has to any extent control of the premises, must ensure that the duties imposed by the relevant articles of The Regulatory Reform (Fire Safety) Order 2005 are complied with in respect of those premises, so far as the requirements relate to matters within their control.

Where the premises are licensed, an alterations notice is in force, or the responsible person has five or more employees, it is a requirement to record the significant findings of the fire risk assessment including the measures which have been or will be taken as a result of the assessment and details of any group of persons identified by the assessment as being especially at risk.

A Type 1 Fire Risk Assessment (FRA) is non-destructive, and the most common. A Type 1 FRA assesses all the common parts of a building, such as a lobby area in a shared block of flats – but not individual dwellings.

A Type 1 FRA has the purpose of ensuring that common parts of a building have the arrangements which allow people to escape if there were to be a fire – such as clear signage pointing to entry and exit points.

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.

2 Introduction

Overview

A **fire risk assessment** is an organised and methodical examination of your premises, the activities carried out there and the likelihood that a fire could start and cause harm.

The Regulatory Reform (Fire Safety) Order 2005, which came into effect on 1st October 2006, applies to the majority of non-domestic premises. The legislation places certain obligations on the 'Responsible Person or Duty Holder' for the premises, which includes carrying out a suitable and sufficient fire risk assessment by a competent person. The assessment set out in this document is intended to satisfy this requirement.

The 'responsible person or duty holder' is typically the employer and any other person who may have control of any part of the premises, e.g. occupier, owner, or manager.

Enforcement

Your local fire and rescue authority enforces this legislation. They have the power to inspect your premises to check that you are complying with your duties under the Order. They will look for evidence that you have carried out a suitable fire risk assessment and acted upon the significant findings of that assessment.

Assessment Review

The fire risk in any building may be subject to change. Under the Order, part of the duties of the 'responsible person' is to review this assessment periodically and in the event of:

- A fire or near miss occurs
- Failure of fire safety systems (e.g. fire detection or emergency lighting)
- Changes to work processes undertaken in the building
- Alterations to the internal layout of the building
- Introduction, change of use or increase in the storage of hazardous substances
- Significant changes to the type and quantity and/or method of storage of combustible materials
- Significant changes in the number or type of people (e.g. young persons, those with disability)

Managing Fire Safety

Good management of fire safety is essential to ensure that fires are unlikely to occur; that if they do occur they are likely to be controlled quickly, effectively and safely or that if a fire does occur and grow, to ensure that everyone in your premises are able to escape to a place of total safety easily and quickly.

Significant Findings

The Significant Findings section contains actions that should be addressed based on their priority scores. Continue to implement control measures and monitor them for effectiveness.

Assessment Risk Scoring & Methodology

The building risk score is a subjective calculation based on how likely the assessor believes a fire is to occur and how severe the consequences (severity of injury or death) might be if that fire were to happen.

The type of people that occupy a building, the risk of arson, and the ignition sources present are common examples of what affects the likelihood of fire. However, fairly simple steps can often be taken to reduce the possibility of fire.

The other objective is to mitigate the severity of a fire, its intensity and the smoke it produces. Occupants' mobility and their ability to escape are primary considerations, along with how quickly the fire would spread and how many people it might affect.

The matrix below explains how the assessor determines the building risk score. Carrying out the assessment's action recommendations should reduce the risk score.

Severity ▸ ▼ Likelihood	Slight Harm	Moderate Harm	Extreme Harm
Low	Trivial	Tolerable	Moderate
Medium	Tolerable	Moderate	Substantial
High	Moderate	Substantial	Intolerable

Trivial	Rating	Limited action is required, review FRA as recommended; existing controls are generally satisfactory.
Tolerable	Rating	No major additional controls required. However, there might be a need for some improvements.
Moderate	Rating	Essential action must be made to reduce the risk. Risk reduction measures should be implemented within a defined time period.
Substantial	Rating	Considerable resources might have to be allocated to reduce the risk. Improvements should be undertaken urgently.
Intolerable	Rating	Imminent risk of significant harm. Immediate action required.

Action Timescales and Severities

All remedial actions are given a **timescale**. Ideally, this is the time to resolution, but where work takes longer (for example, because it is a large or more complicated piece of work), it must have at least been initiated within this timescale.

Planned Works	Long Term	Medium Term	Short Term	Immediate
---------------	-----------	-------------	------------	-----------

All remedial actions are also given a **severity** which distinguishes between matters that constitute breaches of legislation and those that do not. Under the relevant fire safety legislation, a breach of the requirements of the legislation in respect of fire precautions constitutes a criminal offence only if the breach results in the risk of serious injury or death of one or more persons who are lawfully on the premises, or near the premises, in the event of fire.

Low Severity	Medium Severity	High Severity
Matters that need to be addressed as good practice, but that do not constitute a significant threat to occupants	Matters that breach legislation but are not considered to constitute a serious threat to life safety	Serious breach of legislation, having the potential for serious injury to occupants

Certificate of Conformity

Life Safety Fire Risk Assessment



The life safety elements of this fire risk assessment comply with the BAFE SP205 scheme which ensures that we and our risk assessment staff have met the required technical and quality management standards.

Firntec Ltd (BAFE 104059) certify all requirements in the BAFE SP205 scheme in respect of life safety fire risk assessment have been complied with. Any questions can be addressed to the assessor or the quality manager.

Assessment and Certificate Reference
RB-7U42DV

Produced For the Overall Responsible Person
Broxtowe Council

Assessed On, By
16/04/2024, Deane Millard

Specification Conforms To
Our own internal quality system.

Approved / Validated On, By
23/05/2024, Matt Bello-Baamonde
MIFSM / TechIOSH / Tier 3 – (NAFRAR)

Assessment Scope
Assessment applies only to the building specified.

Start Date — Recommended Review Date
16/04/2024 — 16/04/2025

Findings
13 Actions / 38 Controls

Assessed Property

Property Name
Yew Tree Court

Address
Yew Tree Court
Beeston
Nottingham
Nottinghamshire
NG9 2NA

Property Reference
RB-P4KGXN

Fire Risk Rating

Likelihood Medium

Normal fire hazards for this type of occupancy, with fire hazards generally subject to appropriate controls (other than minor shortcomings).

Severity Moderate Harm

Reasonable risk of fire spread involving multiple occupants which could result in significant injury. Eg, poor construction detailing or breaches to purpose built construction.

Risk Moderate

Essential action must be made to reduce the risk. Risk reduction measures should be implemented within a defined time period.

Assessing / Accredited Organisation

Firntec Ltd
4a Darklake View, Estover, Plymouth, Devon, PL6 7TL
0345 646 1566 — www.firntec.com



Third Party Certification Body

NSI, Sentinel House, 5 Reform Road, Maidenhead, SL6 8BY



4 Asset Information

Guidance and Methodologies

Design Guidance

BS 9991:2015 - Fire safety in the design, management and use of residential buildings – Code of practice.

Benchmark Guidance.

Local Government Association - Fire safety in purpose-built blocks of flats.

Applicable Legislation.

The Fire Safety Act 2021.

Responsibility

Client Name

Broxtowe Council

Responsible Person

Broxtowe Council

General Fire Precautions

Fire Alarm System

Detection installed within the communal parts, Detection installed within the dwellings

FD&A Description

Grade A, L3 coverage which extends into the flats but not connected to the communal areas.

Emergency Lighting

Installed in communal parts

Smoke Control

Natural smoke control

Suppression Systems

No suppression system installed

Fire Fighting Facilities

No Wet/Dry riser installed

Access for fire-fighting vehicles

Vehicular access for fire appliances is adequate

Fire Hydrant Location/ Water Supply

The location of the hydrant could not be located

Housekeeping

Good standard. Means of escape clear. Refuse stored appropriately

Secure Information Boxes

Secure information box (SIB) installed

Signage

Appropriate signage installed throughout premises

Signage Description

Fire Action signage present

Building

Property Type

Residential

Building Height

Approximately 6m to the highest occupied floor level

Number of Flats

35

Structural Wall Material

Concrete / brick render

Structural Stairs Material

Concrete

Exterior Cladding

No Exterior Cladding

Carpark

External/Outdoor Carpark

Building Era / Age

Assumed 1980 - 1999

Number of Storeys (Ground and above)

3

Flat Types

Single Storey

Structural Floor Material

Concrete

Construction (Details)

Traditional concrete frame and brick construction

Electronic Entrance System

Yes

Occupancy

Employees

Day staff

Residents

Yes

Visitors

Day

Lone Workers

None

~ Number of Employees on duty

2

Approx number of Residents

60

People With Reduced Mobility

Elderly, Other

Young Persons Employed in the Premises

None

Means Of Escape

Escapes & Exits

The escape routes comprises x 2 protected stairways that extends from the 2nd floor to the ground floor leading to a place of safety.

Number Of Internal Escape Stairs

2

External Means Of Escape

None Present

Evacuation Chairs Installed

No

Number Of Final Exits

4

Types Of Lifts Installed

Passenger

Refuge Points Present

Yes

Stairwells Protected / Lobbied

Yes

Flat Doors Open Onto Stairs

No

Evacuation

Current Evacuation Strategy

Simultaneous Evacuation

Current Simultaneous Evacuation Strategy Description

The current evacuation strategy is Simultaneous Evacuation as denoted by the fire action notices displayed in the common area and the presence of a common fire detection and alarm system to support it.

Current Evacuation Strategy for the property considered appropriate?

No

Description

The premises are purpose-built with an adequate standard of compartmentation. The current Simultaneous Evacuation strategy is not considered appropriate.

5 Findings

- 17 **17 negative answers**
Out of a total of 62
- 13 **13 actions to complete**
Identified in this assessment
- 38 **38 controls describe existing measures**
Identified in this assessment

Summary of Actions

Severity ▾ Timescale	Low Severity	Medium Severity
Planned Works	1	0
Medium Term	0	12

Prevention

6 Negative Answers

2 Actions 12 Controls

Electrical

- ✗ Fixed installations are periodically inspected and tested
- ✓ Is Electrical equipment testing is carried out? (Previously PAT)
- ✓ There is suitable limitation of trailing leads and adapters

EICR EXAMINATION:

The Client must verify that the equipment has been subjected to an EICR examination that resulted in a 'SATISFACTORY' outcome.
Service labels suggest the equipment has been tested; however, a valid certificate was not available on-site for inspection and test labels show the next inspection date is Jan 2023

Reference RB-PQUZ4N **Due** No Due Date
Category Management: Testing, Records, Log Books

Timescale

Medium Term

Severity

Medium Severity



There were no trailing leads seen within the common areas during the assessment. Tenants are responsible for their respective areas.

Extension cords can overheat and cause fires when used improperly. Overheating is usually caused by overloading or connecting appliances that consume more watts than the cord can handle. Damaged extension cords can also cause fires.

Housekeeping

- ✓ Combustible materials appear to be separated from ignition sources
- ✓ Unnecessary accumulation or inappropriate storage of combustible materials or waste is avoided
- ✓ A responsible person monitors housekeeping standards
- ✓ The overall standard of housekeeping is adequate

Good levels of housekeeping were observed. Escape routes were noted to be free from unauthorised storage and waste.

A responsible person has been assigned to monitor the housekeeping standards. Documentation is available that describes the expected standards and the responsible person's role.

Arson

- ✓ Basic security against arson by outsiders appears reasonable
- ✓ Refuse bins are secured

Bins were well managed and stored at a suitable distance from the building.

The main entry doors to the property were noted to be provided with a suitable access control system to prevent unauthorised access.

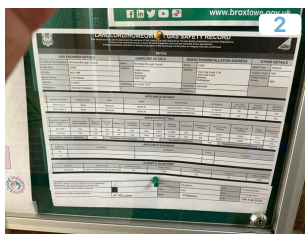
Access control of unauthorised entry to restricted areas.

Heating & Ventilation

- ✗ There is satisfactory control over the use of portable heaters
- ✓ Fixed heating and ventilation installations are subject to regular maintenance

The fixed heating and ventilation installations appear to have been maintained within the last 12 months. A system is in place to ensure maintenance is performed every 12 months.

Compliance in accordance with the Gas Safety (Installation & Use) Regulations 1998.



Cooking

There are no cooking facilities provided within the communal areas.

Smoking

- ✓ Smoking is prohibited in appropriate areas
- ✓ The smoking policy appears to be observed
- ✓ 'No Smoking' signs are displayed in the common areas

The property has a smoking policy that prohibits smoking in all indoor common areas and in close proximity to the outside of the building and hazardous or waste materials.

Smoking is not permitted in the communal area in accordance with the Smoke-free (Premises and Enforcement) Regulations 2006.

There is at least one 'No Smoking' sign in each of the common parts of the building and outdoor areas. Designated outdoor smoking areas are signposted.

There is no evidence of smoking in prohibited areas.

Lightning Protection System

Due to the nature of the building a lightning protection system is not required.

Contractors & Works

- ✗ There is satisfactory control over works carried out in the building
- ✗ Where appropriate, fire safety conditions are imposed on outside contractors
- ✗ Where appropriate, a permit to work system is used (e.g. for hot work)
- ✗ Suitable precautions are taken by in-house maintenance personnel who carry out works

The Client must verify what control measures are in place regarding contractor / staff management process.

Additionally, residents should be made aware of any specific hazards during any conducted works and maintenance carried out within the premises.

It is understood that the Client has a procedure in place for hot works, with permits to work being issued to appropriately trained contractors and staff; however, this was not verified.

Reference RB-SQXYQQ **Due** 23/08/2024

Category Management: Policy, Procedure, Drills

Timescale
Medium Term

Severity
Medium Severity

Fire Safety Signs & Notices

- ✓ There is a reasonable standard of fire safety signs and notices

Fire Action Notices were observed as displayed in the communal areas.

Protection

4 Negative Answers
3 Actions 13 Controls

Means of Escape

- ✓ The construction and glazing on escape routes appear to be suitably fire resisting and in good condition
- ✓ Travel distances to a relative place of safety appear to meet nationally recognised guidelines
- ✓ There are enough fire escapes to support the number of people in the building
- ✓ There are no notable obstructions or trip hazards on escape routes
- ✓ Fire doors on escape routes only open in the direction of travel
- ✓ Final exits are not obstructed externally and can be opened easily at all times.
- ✗ There is suitable provision to support the expected numbers of disabled occupants
- ✗ Smoke Control

Where the Client becomes aware of a disabled or vulnerable person occupying the premises a PEEP should be developed to ensure their safety in the event of a fire. All PEEPs and information on vulnerable residents should be retained within the Premises Information Box (PIB).

The residential areas of the building are not proposed to be provided with disabled refuges; However, following the recommendations of the Grenfell Inquiry further consideration should be given to vulnerable occupants.

Reference RB-EMA7ZD **Due** 23/08/2024

Category Management: Policy, Procedure, Drills

Timescale
Medium Term

Severity
Medium Severity

A suitable single action door release system has been provided to the Final Exit door.
Means of escape

Travel distances appear to comply with government sleeping risk guidance because there are multiple directions / routes of escape and the distance from a flat entrance door to a place of relative safety is less than 45m.

Emergency Break Glass door release call points have been provided at the Final Exit doors as an additional escape provision to release the locking mechanism.
Means of escape

The building is provided with adequate numbers of fire exits in relation to the level of risk.
Means of escape

Emergency Escape Lighting

- ✓ A reasonable standard of emergency escape lighting has been provided

Internally, suitable levels of emergency escape lighting have been provided throughout the building.

Externally, the emergency escape lighting provided to the escape routes was considered to be suitable.

Giving Warning

- ✓ A reasonable fire detection and fire alarm system is provided in the common areas, where necessary
- ✓ If there is a communal fire detection and fire alarm system, does it extend into the dwellings
- ✓ Where appropriate, a fire alarm zone plan has been provided
- ✗ The means of giving warning in case of fire are adequate and appropriate for the building type?

Any audible detection equipment installed within the communal areas should be decommissioned or removed so no audible equipment alarm in this area. The property is considered to be purpose built with suitable levels of compartmentation within its design. As such the most appropriate fire evacuation strategy would be Stay Put. In order to support the Stay Put policy, the equipment within the communal areas should be non-audible to avoid confusion.

Timescale
Medium Term

Severity
Medium Severity

Reference RB-A8V8EG **Due** 23/08/2024



A hardwired, Grade A Fire Alarm system has been provided to the property with detection equipment provided within the communal areas and interlinked detectors within the flats.

Zone plans have been provided.

The detection / alarm equipment was considered to be suitable, in accordance with BS9999: 2017

Spread of Fire

- ✓ There is reasonable limitation of linings that may promote fire spread
- ✓ As far as can reasonably be ascertained, there is reasonable fire separation within any roof space
- ✓ Compartmentation is of a reasonable standard
- ✓ Are soft furnishings suitably fire rated
- ✓ Communal Fire Doors
- ✓ External Fire Spread

LOBBY DOORS:

The Lobby doors were considered to be Notional FD30S fire doors and were observed to offer suitable levels of fire protection to the escape routes.

The communal doors must be suitable to offer suitable protection to the escape routes.

STOREY EXIT DOORS:

The Storey Exit doors were considered to be Notional FD30S fire doors and were observed to offer suitable levels of fire protection to the escape routes.

The communal doors must be suitable to offer suitable protection to the escape routes.

SUB-DIVIDING DOORS:

The Sub-dividing doors were considered to be Notional FD30S fire doors and were observed to offer suitable levels of fire protection to the escape routes.

The communal doors must be suitable to offer suitable protection to the escape routes.

The level of compartmentation within the building was considered to be acceptable with no compartmentation defects to the internal floors, walls and ceilings.

Fire Fighting Arrangements

- ✗ There is a reasonable provision of manual fire extinguishing appliances

REMOVE FIRE EXTINGUISHERS:

Fire extinguishers and associated signage should be removed from common parts of the property as residents are untrained in their safe use.

The provision of portable fire extinguishers is not considered appropriate in this building because residents are untrained in their safe use.

Reference RB-69YPDP **Due** No Due Date
Category Upgrades: Fire Fighting Equipment

Timescale
Planned Works

Severity
Low Severity

Management

7 Negative Answers
8 Actions 13 Controls

Procedures

- ✓ There are adequate procedures for investigating fire alarm signals
- ✓ There are suitable arrangements for summoning the fire and rescue service
- ✓ There is a suitable fire assembly point
- ✗ There are adequate procedures for evacuation of any disabled people who are likely to present
- ✗ There are suitable arrangements for means of escape for disabled occupants

The Client must verify if any Personal Emergency Evacuation Plans (PEEP's) have been created and are stored within the Premises Information Box (PIB). The Client must also verify that these are current, suitable and reviewed on a regular basis.

No access was afforded to the Premises Information Box

Reference RB-GP9F61 **Due** 23/08/2024
Category Management: Policy, Procedure, Drills

Timescale
Medium Term

Severity
Medium Severity

Management should encourage residents of this General Needs property to contact the building manager if they require assistance in developing a personal emergency evacuation plan (PEEP) or other fire safety advice.

This could be achieved by adding a contact reference for assistance to the fire action notices for the premises

There was no information on the arrangements in the building for means of escape for people with disabilities.

Reference RB-BVC55H **Due** No Due Date
Category Management: Policy, Procedure, Drills

Timescale
Medium Term

Severity
Medium Severity

Resident Engagement

- ✓ Information on fire procedures has been disseminated to residents
- ✓ Fire safety information is disseminated to new residents

BUILDINGS BELOW 11m:
For ALL residential buildings irrespective of height The Responsible person MUST –

- Provide residents with suitable Fire Safety Instruction and Information regarding Fire Doors. (Communicated at a 12-month anniversary or on commencement of leasehold or tenancy agreement and displayed in a conspicuous part of the building such as a notice board.)

The client must communicate the following information depending on the buildings height in accordance with the Fire Safety Regulations 2022

Reference RB-B35XKD **Due** 23/08/2024
Category Management: Policy, Procedure, Drills

Timescale
Medium Term

Severity
Medium Severity

The Client must verify the means of which information is communicated to the residents.

No suitable information has been provided or displayed.

Reference RB-3QDA8S **Due** 23/08/2024

Timescale
Medium Term

Severity
Medium Severity

Training & Drills

- ✓ All staff given adequate fire safety instruction and training
- ✓ Staff are given additional training to cover any specific roles and responsibilities
- ✗ When the employees of another employer work in the premises, appropriate information on fire risks and fire safety measures are provided
- ✗ Fire drills are carried out at appropriate intervals

The client must verify that all staff receive basic fire awareness training at induction and on a regular basis.

No records of staff training were provided.

Reference RB-RK5GHH **Due** 23/08/2024
Category Management: Policy, Procedure, Drills

Timescale
Medium Term

Severity
Medium Severity

The Client must verify the means of which Fire Safety information has been communicated to the contractors.

The tendering phase affords the Client ample time to communicate any existing Fire Hazards or areas of increased risk to the contractor. Equally, the contractors Risk Assessments and Method Statements (RAMS) are provided to the Client prior to any contractors attending site. Suitable control measures must be in place before any works are conducted.

Reference RB-2YGSC2 **Due** No Due Date
Category Management: Testing, Records, Log Books

Timescale
Medium Term

Severity
Medium Severity

Fire Action Notices are provided giving clear instructions of what to do in the event of a fire or an alarm activation

Communication of Fire Safety information

Fire Safety Management

- ✓ There are suitable records of the fire safety arrangements
- ✗ Procedures in the event of fire are appropriately and properly documented, where appropriate
- ✓ Routine in-house inspections of fire precautions are undertaken
- ✗ Is the existing evacuation strategy appropriate for the building

PURPOSE BUILT:

Review Fire Evacuation Strategy - The building currently operates a SIMULTANEOUS EVACUATION policy as indicated by signage.

Timescale
Medium Term

Severity
Medium Severity

A STAY-PUT policy is considered to be suitable as compartmenting has been incorporated within the design of the building.

Currently there is a 'simultaneous evacuation policy in place for the building.

Purpose built flats such as these are designed to confine a fire to the flat involved therefore the appropriate policy for the building is 'Stay Put'.

This means that other occupants not involved should stay in their flats unless they feel it is not safe or the fire service instructs them to evacuate.

Reference RB-74TEL5 **Due** 23/08/2024

A suitable Fire Policy is in place, detailing the responsibilities of on-site staff members. Suitable Fire Action Notices are displayed.

Evidence of routine inspections was provided for inspection during the visit.

The client must ensure that regular inspection of the property are conducted to identify hazards at the earliest available opportunity.

Maintenance & Testing

- ✓ FIRE ALARM SYSTEM: Weekly testing and periodic servicing of the fire detection and fire alarm system is undertaken
- ✓ EMERGENCY LIGHTING: Monthly and annual testing routines are in place for the emergency escape lighting
- ✓ FIRE EXTINGUISHERS: Annual maintenance and monthly visual inspections of fire extinguishing appliances is undertaken
- ✓ INTERNAL DOORS:

EMERGENCY LIGHTING Annual: Records were provided that verify annual testing of the emergency lighting system is being conducted in accordance with BS 5266.
Compliance in accordance with BS 5266.

FIRE ALARM SYSTEM Weekly :Records were provided that verify weekly testing and Annual maintenance is being conducted to the fire detection and fire alarm system in accordance with BS5389.

FIRE ALARM SYSTEM Annual :Records were provided that verify that periodic servicing and regular maintenance is being conducted to the fire detection and fire alarm system in accordance with BS5389.
Compliance with BS 5389.

EMERGENCY LIGHTING Monthly: Records were observed that verify Monthly function testing is being conducted on a regular basis.
Compliance in accordance with BS 5266.

FIRE EXTINGUISHERS: Service labels displayed on the fire extinguishers suggest that an annual inspection has been conducted with the last 12 months.

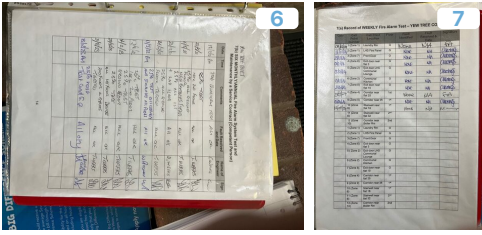
Automatic door release tests
Carried out and recorded on a monthly basis

Location Corridors

Records were provided that verify weekly testing is being conducted of the fire detection and fire alarm system in accordance with BS 5389.
Compliance with BS 5389.

Control Continues...

...Control Continued



FIRE EXTINGUISHERS: Service labels displayed on the fire extinguishers suggest that an annual inspection has been conducted with the last 12 months.



Records

- ✓ Fire training (where relevant)
- ✓ Appropriate record of false alarms (where relevant)

A Fire Logbook has been provided to log all false alarms.

Information Boxes

- ✓ There is a suitably located premises information box for the fire and rescue service
- ✗ Arrangements are in place to keep the premises information box up to date

The Client must verify the review schedule of the information retained within the Premises Information Box (PIB)
 Records must maintained on a regular basis

Reference RB-H15ZUH **Due** 23/08/2024
Category Management: Policy, Procedure, Drills

Timescale
Medium Term

Severity
Medium Severity

A suitable Premises Information Box has been provided at the building.

6 Action Plan

Any audible detection equipment installed within the communal areas should be decommissioned or removed so no audible equipment alarm in this area. The property is considered to be purpose built with suitable levels of compartmentation within its design. As such the most appropriate fire evacuation strategy would be Stay Put. In order to support the Stay Put policy, the equipment within the communal areas should be non-audible to avoid confusion.

Timescale
Medium Term

Severity
Medium Severity

Reference RB-A8V8EG **Due** 23/08/2024



Completed On / By

BUILDINGS BELOW 11m:

For ALL residential buildings irrespective of height The Responsible person MUST –

- Provide residents with suitable Fire Safety Instruction and Information regarding Fire Doors. (Communicated at a 12-month anniversary or on commencement of leasehold or tenancy agreement and displayed in a conspicuous part of the building such as a notice board.)

The client must communicate the following information depending on the buildings height in accordance with the Fire Safety Regulations 2022

Reference RB-B35XKD **Due** 23/08/2024

Category Management: Policy, Procedure, Drills

Completed On / By

Timescale
Medium Term

Severity
Medium Severity

PURPOSE BUILT:

Review Fire Evacuation Strategy - The building currently operates a SIMULTANEOUS EVACUATION policy as indicated by signage.

A STAY-PUT policy is considered to be suitable as compartmenting has been incorporated within the design of the building.

Currently there is a 'simultaneous evacuation policy in place for the building.

Purpose built flats such as these are designed to confine a fire to the flat involved therefore the appropriate policy for the building is 'Stay Put'.

This means that other occupants not involved should stay in their flats unless they feel it is not safe or the fire service instructs them to evacuate.

Reference RB-74TEL5 **Due** 23/08/2024

Completed On / By

Timescale
Medium Term

Severity
Medium Severity

The Client must verify if any Personal Emergency Evacuation Plans (PEEP's) have been created and are stored within the Premises Information Box (PIB). The Client must also verify that these are current, suitable and reviewed on a regular basis.

No access was afforded to the Premises Information Box

Reference RB-GP9F61 **Due** 23/08/2024

Category Management: Policy, Procedure, Drills

Timescale
Medium Term

Severity
Medium Severity

Action Continues...

...Action Continued

Completed On / By

The Client must verify the means of which information is communicated to the residents.

No suitable information has been provided or displayed.

Reference RB-3QDA8S **Due** 23/08/2024

Timescale
Medium Term

Severity
Medium Severity

Completed On / By

The Client must verify the review schedule of the information retained within the Premises Information Box (PIB)

Records must maintained on a regular basis

Reference RB-H15ZUH **Due** 23/08/2024

Category Management: Policy, Procedure, Drills

Completed On / By

Timescale
Medium Term

Severity
Medium Severity

The Client must verify what control measures are in place regarding contractor / staff management process.

Additionally, residents should be made aware of any specific hazards during any conducted works and maintenance carried out within the premises.

It is understood that the Client has a procedure in place for hot works, with permits to work being issued to appropriately trained contractors and staff; however, this was not verified.

Reference RB-SQXYQQ **Due** 23/08/2024

Category Management: Policy, Procedure, Drills

Completed On / By

Timescale
Medium Term

Severity
Medium Severity

The client must verify that all staff receive basic fire awareness training at induction and on a regular basis.

No records of staff training were provided.

Reference RB-RK5GHH **Due** 23/08/2024

Category Management: Policy, Procedure, Drills

Completed On / By

Timescale
Medium Term

Severity
Medium Severity

Where the Client becomes aware of a disabled or vulnerable person occupying the premises a PEEP should be developed to ensure their safety in the event of a fire. All PEEPs and information on vulnerable residents should be retained within the Premises Information Box (PIB).

The residential areas of the building are not proposed to be provided with disabled refuges; However, following the recommendations of the Grenfell Inquiry further consideration should be given to vulnerable occupants.

Reference RB-EMA7ZD **Due** 23/08/2024

Category Management: Policy, Procedure, Drills

Completed On / By

Timescale
Medium Term

Severity
Medium Severity

EICR EXAMINATION:

The Client must verify that the equipment has been subjected to an EICR examination that resulted in a 'SATISFACTORY' outcome.

Service labels suggest the equipment has been tested; however, a valid certificate was not available on-site for inspection and test labels show the next inspection date is Jan 2023

Reference RB-PQUZ4N **Due** No Due Date

Category Management: Testing, Records, Log Books



Completed On / By

Timescale
Medium Term

Severity
Medium Severity

Management should encourage residents of this General Needs property to contact the building manager if they require assistance in developing a personal emergency evacuation plan (PEEP) or other fire safety advice.

This could be achieved by adding a contact reference for assistance to the fire action notices for the premises

There was no information on the arrangements in the building for means of escape for people with disabilities.

Reference RB-BVC55H **Due** No Due Date

Category Management: Policy, Procedure, Drills

Completed On / By

Timescale
Medium Term

Severity
Medium Severity

REMOVE FIRE EXTINGUISHERS:

Fire extinguishers and associated signage should be removed from common parts of the property as residents are untrained in their safe use.

The provision of portable fire extinguishers is not considered appropriate in this building because residents are untrained in their safe use.

Reference RB-69YPDP **Due** No Due Date

Category Upgrades: Fire Fighting Equipment

Completed On / By

Timescale
Planned Works

Severity
Low Severity

The Client must verify the means of which Fire Safety information has been communicated to the contractors.

The tendering phase affords the Client ample time to communicate any existing Fire Hazards or areas of increased risk to the contractor. Equally, the contractors Risk Assessments and Method Statements (RAMS) are provided to the Client prior to any contractors attending site. Suitable control measures must be in place before any works are conducted.

Reference RB-2YGSC2 **Due** No Due Date

Category Management: Testing, Records, Log Books

Completed On / By

Timescale
Medium Term

Severity
Medium Severity

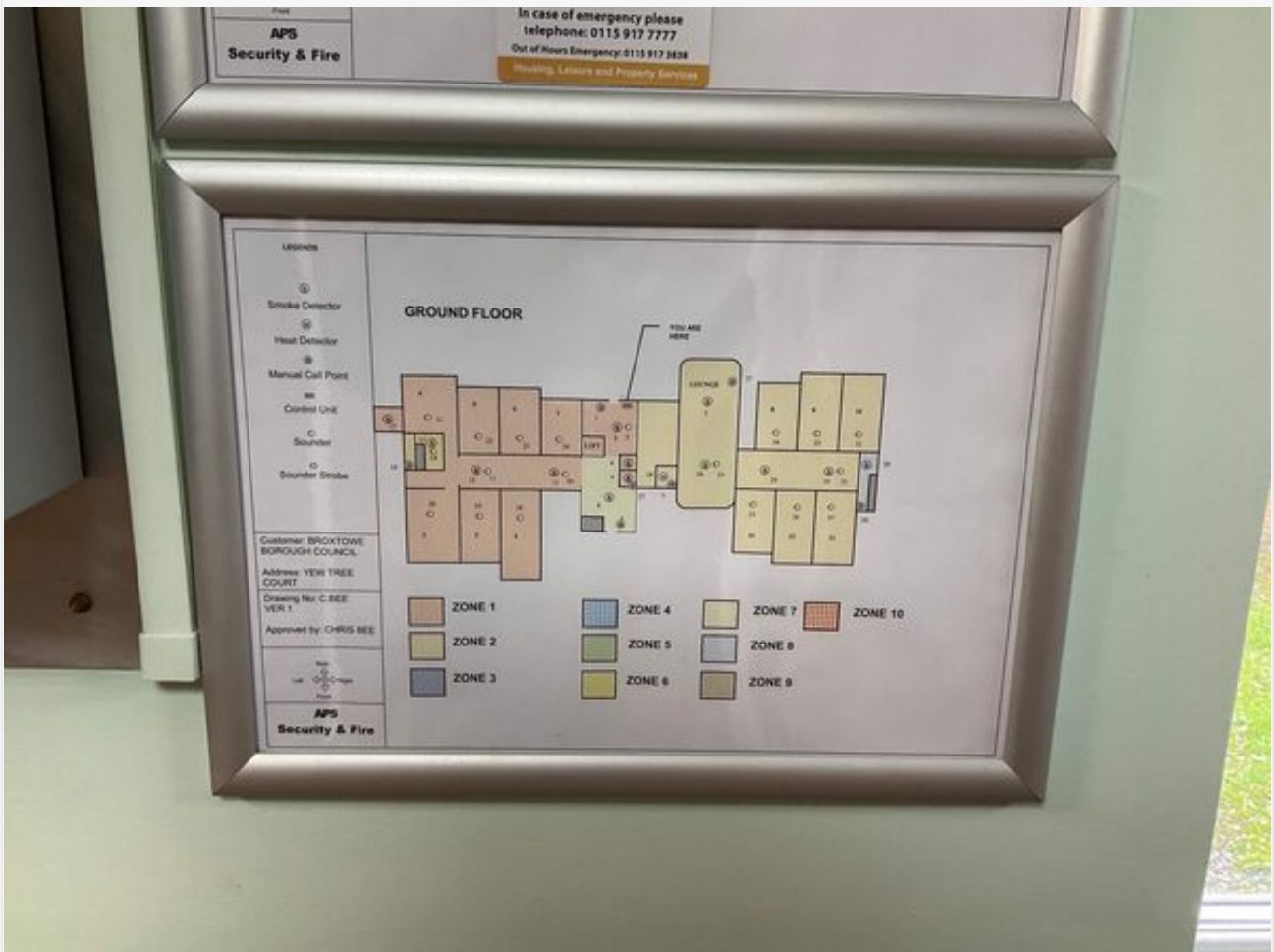














IMPORTANT NOTICE

ONLY AUTHORIZED PERSONNEL SHOULD OPERATE THIS FIRE PANEL.

ANY UNQUALIFIED PERSON INTERFERING WITH THIS VITAL SAFETY SYSTEM SHOULD NOTE IT IS EXTREMELY DANGEROUS AND HAS SERIOUS SAFETY IMPLICATIONS.

IF THE FIRE ALARM IS SOUNDING, PLEASE DO NOT TOUCH THIS EQUIPMENT BUT NOTIFY EITHER CENTRAL CONTROL OR THE JOINTS MANAGER.

THIS IS FOR YOUR OWN SAFETY. THANK YOU FOR YOUR CO-OPERATION.

SAFETY FIRE EQUIPMENT, HEALTH DEPARTMENT AND NOTIFICATION FOR BIRLAND.

FIRE ALARM

DO NOT TURN OFF

Fire

Panel controls including a central display, directional buttons, and various function buttons.

Fire Alarm Control

Panel keypad with 12 buttons.

IMPORTANT

IN CASE OF EMERGENCY PLEASE TELEPHONE 911 OR 112 FIRST

Fire Alarm Control

Logo















FIRNTEC
BUILDING COMPLIANCE

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Report of the Leader of the Council

Cabinet Work Programme

1. Purpose of Report

Cabinet is asked to approve its Work Programme, including potential key decisions that will help to achieve the Council’s key priorities and associated objectives.

2. Recommendation

Cabinet is asked to RESOLVE that the Work Programme, including key decisions, be approved.

3. Detail

The Work Programme for future meetings is set out below. Key decisions and exempt items are marked with *.

23 July 2024	<ul style="list-style-type: none"> • Skate Park • Options Appraisal for Land* • People Strategy • Leisure Facilities update • Speech Call Units and Lifeline Service update* • Management of Communal Areas* • Statement of Accounts Update and Outturn Position 2023/24* • Treasury Management Annual Report 2023/24 • Grants to Voluntary and Community Organisations • Performance Management Review of Business Plans – Outturn Report 2023/24 • Low Carbon Supplementary Planning Document* • Purchase of Civica Property Management System * • UKSPF Year 3 Major Proposals • Legal agreement for the construction of industrial units* • Land purchase for Kimberley Cemetery * • Citizens Advice Broxtowe Grant Aid 2024-27 • ASB Case Review (Community Trigger) Policy* • Annual Air Quality Status Report and Action Plan* • Annual Food Service Plan* • Modern Slavery Report • Request to purchase 3 homes in Kimberley * • Request to purchase one part completed scheme of flats in Eastwood*
3 September 2024	<ul style="list-style-type: none"> • Irrecoverable Arrears * • Dog Policy *

	<ul style="list-style-type: none"> • Workforce Profile • Greater Nottingham Strategic Plan-Regulation 19 Consultation * • Defibrillator Report* • Carbon Footprint Rebaselining and Scope 3 Emissions* • Community Infrastructure Levy* • House Building Delivery Plan update* • Leasehold Management Policy* • Housing Acquisitions Policy* • Asset Management Approach*
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4. Key Decisions

This is not key decision.

5. Financial Implications

There are no additional financial implications.

6. Legal Implications

The terms of reference are set out in the Council's constitution. It is good practice to include a work programme to help the Council manage the portfolios.

7. Human Resources Implications

There are HR implications purely from the point of view of clarifying roles and responsibilities of Council Officers and responsibilities of partner agencies.

8. Union Comments

There were no comments received

9. Climate Change Implications

There were no comments received.

10. Data Protection Compliance Implications

This report does not contain OFFICIAL(SENSITIVE) information. There are no Data Protection issues in relation to this report.

11. Equality Impact Assessment

There are no Equality Impact Assessment issues.

12. Background Papers

Nil

Report of the Monitoring Officer

Scrutiny Work Programme

1. Purpose of report

The purpose of this report is to request that Members aware of matters proposed for and undergoing scrutiny. This is in accordance with all of the Council's priorities.

2. Recommendation

The Committee is asked to CONSIDER the report and RESOLVE to agree subjects to be considered for review including those submitted as suggestions for Scrutiny.

3. Detail

Details of the reviews currently suggested on the work programme are within the appendix.

Members may wish to consider new topics using the criteria below for their current programme:

- Issues identified by Members as a key issue for the public
- Issue has a significant local impact
- Significant public dissatisfaction (e.g. through complaints)
- Issue raised by auditors
- New government guidance/legislation
- New evidence provided by external organisation
- Poor performance (e.g. evidence from performance indicators)
- High level budgetary commitment
- Pattern of budgetary overspending.

The work programme for the next meetings is as follows:

26 September 2024	• Spotlight Review Markets
28 November 2024	•
20 January 2025	• Budget Scrutiny
21 January 2025	• Budget Scrutiny
27 February 2025	•

4. Financial Implications

The comments from the Head of Finance were as follows:

There are no additional financial implications.

5. Legal Implications

The comments from the Head of Legal were as follows:

The terms of reference are set out in the Council's constitution. It is good practice to include a work programme to help the Council manage the portfolios.

6. Human Resources Implications

The comments from the Human Resources Manager were as follows:
Not Applicable

7. Union Comments

The comments from the Union were as follows:
Not Applicable

8. Climate Change Implications

The comments from the Head of Environment were as follows:
Not Applicable

9. Data Protection Compliance Implications

This report does not contain OFFICIAL(SENSITIVE) information. There are no Data Protection issues in relation to this report.

10. Equality Impact Assessment

There are no Equality Impact Assessment issues.

10. Background Papers

Nil

APPENDIX

1. Topics Agreed by the Overview and Scrutiny Committee

	Topic	Topic suggested by	Link to corporate priorities/values
1.	Disabled Facilities Grants	Councillor B C Carr	The Housing aim of a good quality home for everyone
3.	Child Poverty	Overview and Scrutiny Committee	A strong caring focus on the needs of all communities
4.	Budget Consultation	Overview and Scrutiny Committee	Continuous improvement and delivering value for money
5.	Homes for Life	Councillor S J Carr agreed by Overview and Scrutiny Committee	The Housing aim of a good quality home for everyone
6.	Building Control	Councillor B C Carr agreed by the Overview and Scrutiny Committee to put on hold. Awaiting the outcome of a report to Cabinet.	Continuous improvement and delivering value for money
7.	Diversity and Inclusion at the Council	Councillor S Dannheimer agreed by the Overview and Scrutiny Committee	A strong caring focus on the needs of all communities
8..	Resident Engagement Review	Cabinet	A strong caring focus on the needs of all communities

2. Spotlight Reviews

1.	Housing Repairs Service Review	Six Month Review 18 July 2024	The Housing aim of a good quality home for everyone
2.	Markets	Six Month Review	Continuous improvement and delivering value for money
3.	D. H Lawrence Museum	Six Month Review	Continuous improvement and delivering value for money