

Final Internal Audit Report

Fire Safety (FRAs)

July 2024

Distribution: Corporate Director of Housing
Interim Director of Housing- Estates & Improvement
Head of Fire and Building Safety
Fire Safety Project Manager
Director of Finance (Deputy S151)
Corporate Director of Resources and S151 Officer (Final only)

Assurance Level	Issues Identified	
Limited	Priority 1	4
	Priority 2	5
	Priority 3	2

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Please refer to the Statement of Responsibility in Appendix 4 of this report for further information about responsibilities, limitations, and confidentiality.

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1. Introduction

- 1.1 London Borough of Croydon (the Council) has a statutory duty, under the Regulatory Reform (Fire Safety) Order 2005, to identify and assess the risk of fire in properties where they have responsibility for maintenance. Having identified the hazards and people at risk, they have a duty to take precautions to prevent the risk of fire and, in the event of fire, ensure there is a means of escape or an otherwise effective response to protect the safety of occupants.
- 1.2 Since Grenfell, landlords have been subject to greater scrutiny by residents, regulators, and the media, emphasising that essential robust frameworks on fire safety are in place to mitigate the heightened risk levels. In this context, the Regulator of Social Housing ('RSH') will introduce new tenant satisfaction measures from 1 April 2023, enabling residents to scrutinise landlord's performance and allow providers of social housing greater insight on ways to improve¹. The tenant satisfaction measures will include fire safety checks measured by landlords' management information.
- 1.3 The Council's approach to fire safety management is outlined in its Corporate Fire Safety Policy (May 2021) and Fire Safety Guidance (December 2020). The Council was also in the process of drafting a housing-specific Fire Safety Policy. Throughout the audit, we referred to the draft Fire Safety Policy as it best reflects current practice.
- 1.4 The draft Fire Safety Policy includes a list of building risk classifications such as the following:

High risk

- equal to or more than six storey general needs purpose-built blocks
- equal to or more than four storey general needs converted properties
- all sheltered housing schemes
- all hostels
- all housing in multiple occupation (HMOs)

Medium risk

- four or five storey general needs purpose-built blocks
- three storey properties converted to general needs flats

Low risk:

- equal to or less than three storey general needs purpose-built blocks
- equal to or less than two storey properties converted to general needs flats

- 1.5 The Council maintains a Fire Risk Assessment (FRA) Schedule detailing all properties where a FRA is in place. The schedule identifies 756² properties

¹ Tenant Satisfaction Measures - Summary of RSH requirements (accessible) - GOV.UK (www.gov.uk)

² As at the time of audit.

where an FRA is undertaken, of which 61 are categorised by the Council as high risk, 511 as medium risk and 184 as low risk properties.

- 1.6 The draft Fire Safety Policy also outlines the frequency cycle of FRAs against three risk levels. The following FRA cycles have been outlined:
- High risk: one year
 - Medium risk: two years
 - Low risk: three years
- 1.7 FRAs are conducted by two third-party risk assessors, Delco and Millwood, who are responsible for undertaking a review of buildings to assess fire hazards and where necessary, provide recommendations where remedial actions are required to reduce the risk and ensure safety. The FRA Schedule² records 301 properties assessed by Delco and 455 properties assessed by Millwood.
- 1.8 The outcome of FRAs is detailed within individual FRA reports. This includes recommendations on areas of improvement in fire safety and the priority for each action. The Council's Compliance Administrator is responsible for populating an FRA Actions Primary Spreadsheet which is used to track all recommendations raised in the reports. The spreadsheet is also used to monitor the completion of remedial actions against a timeframe. The Council assigns remedial actions to contractors, such as AJS Group Services, for completion.
- 1.9 The draft Fire Safety policy states, *"the Fire Safety Manager regularly reviews the FRA Monitoring system to ensure that no surveys are falling behind target"*. The Fire Safety Manager is also responsible for ensuring recommended works are being delivered on time.
- 1.10 Performance reported to the Council's Senior Leadership Team in September 2022 highlighted that 100% of FRAs are completed and reports received within required timescales³, although, in August 2022, the Council reported only 97.5% of FRAs had been completed in target.
- 1.11 While the audit and testing were performed remotely, we have been able to obtain all relevant documents required to complete the review.
- 1.12 This audit was undertaken as part of the agreed Internal Audit Plan for 2022/23. The objectives, approach and scope are contained in the Audit Terms of Reference at Appendix 2.

³ Refer Section 3 of the report for further discussion on the accuracy of performance reporting arrangements considered in this review.

2. Key Issues

Priority 1 Issues

Remedial actions arising from FRAs were marked as complete, however evidence of completion could not be provided for those sampled. **(Issue 1)**

The Council’s FRA Actions Primary Spreadsheet identified 2,748 remedial actions marked as "in progress" and 2,777 actions with blank completion status fields which had exceeded the target date to be implemented and were overdue by an average of 10.69 months. **(Issue 2)**

Testing of a the sample of 20 FRAs found that 136 remedial actions had not been completed in a timely manner, including three medium priority actions due for completion in August 2020. **(Issue 3)**

There were data input errors and omissions of information within the FRA Schedule and the FRA Actions Primary Spreadsheet reviewed at the time of audit. **(Issue 4)**

Priority 2 Issues

FRA reports produced by Delco did not include information on the property’s tenure type. **(Issue 5)**

Issues related to FRAs were not regularly monitored by the Fire Safety Board, with the most recent last meeting having been undertaken in September 2021. **(Issue 6)**

There were discrepancies between properties within the FRA Schedule and the Communal Flooring Report. **(Issue 7)**

The dates for FRAs, and remedial actions were incorrectly recorded within the FRA Actions Primary Spreadsheet. **(Issue 8)**

FRAs were not completed within required timescales leading to potentially inadequate fire safety arrangements being in place. **(Issue 9)**

The Priority 3 issues are included under section 4

3. Actions and Key Findings/Rationale

Control Area 4: Remedial Actions Raised Within FRAs

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 1
1	<p>Our FRA process will be updated to reflect new ways of working introduced from March 2024.</p> <p>At the point of audit, limited evidence was being collected, however, this has been reviewed following the Interim Director of Repairs & Asset Management and Head of Fire & Building Safety joining LBC.</p> <p>FRA actions will only be closed when sufficient evidence is available to allow closure.</p> <p>FRA open/closed cases are reported to a monthly Compliance Board, chaired by Director of Repairs and Asset Management. This report is also shared with DMT monthly.</p> <p>All documents are held on SharePoint, until we agree on</p>	<p>Expected Control</p> <p>All FRA remedial actions are only recorded as complete when confirmation has been provided and sufficient evidence to support completion is obtained.</p> <p>Issue/Finding</p> <p>FRA reports produced by Delco and Millwood highlighted the risk classification levels applicable to the hazards identified. Recommendations requiring remedial actions included the following ratings:</p> <ul style="list-style-type: none"> • High – Significant fire hazards (highly likely to result in death or serious injury) requiring urgent actions • Medium – Outbreak of fire could foreseeably result in injury (including serious injury) requiring essential action to reduce the risk • Low – Fire is unlikely to occur as a result of negligible potential sources of ignition <p>A sample of ten remedial actions (four high, four medium and two low priority) marked as completed from the ‘FRA Actions Primary Spreadsheet’ were reviewed. Of these, the Council was unable to provide evidence to demonstrate completion for two high priority and two medium priority remedial actions.</p> <p>Management advised that FRA actions are marked as completed on the tracker when these are communicated to the relevant teams for completion, rather than when the actions are actually completed. We were further advised that the Council does not</p>

	<p>the implementation of a compliance IT system.</p> <p>Monthly auditing of closure of actions undertaken by the Head of Service.</p>	<p>request confirmation of completion and do not follow up on actions to check that these have been completed and to an appropriate standard.</p> <p>Risk</p> <p>The Council may record remedial actions arising from FRAs as complete when this has not been confirmed, leading to potentially inadequate fire safety arrangements being in place and placing tenants' safety at risk.</p>
Responsible Officer	Deadline	
Head of Fire & Building Safety	30 June 2024	

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 2																									
1	<p>A significant amount of work has been undertaken since March 2024 to close FRA actions, overseen by the Head of Fire & Building Safety. (initial action)</p> <p>We have commenced the procurement of a Fire & Building Safety contractor to support us with larger works wef 1 December 2024. In the meantime, our incumbent contractors Mullaley and AJS will support with the closure of FRA remedial works. (secondary action)</p> <p>Also refer to actions in Finding 3</p>	<p>Expected Control</p> <p>Remedial actions are completed in a timely manner, in line with date to be actioned.</p> <p>The status of remedial actions is accurately reflected in the FRA Actions tracker.</p> <p>The Council undertakes regular and accurate performance reporting which provides management and the Board with oversight of the completion status of FRA remedial actions.</p> <p>Issue/Finding</p> <p>Review of the Council’s FRA Actions Primary Spreadsheet at the time of audit identified 2,748 actions marked as "in progress" and 2,777 actions with blank completion status fields, all of which had exceeded the date to be actioned, as shown below:</p> <table border="1"> <thead> <tr> <th>Priority Rating</th> <th>Number overdue and marked as "in progress"</th> <th>Least overdue (months)</th> <th>Most overdue (months)</th> <th>Avg. months overdue</th> </tr> </thead> <tbody> <tr> <td>High</td> <td>108</td> <td>2.66</td> <td>31.99</td> <td>11.26</td> </tr> <tr> <td>Medium</td> <td>4,725</td> <td>0.13</td> <td>35.80</td> <td>9.85</td> </tr> <tr> <td>Low</td> <td>692</td> <td>0.13</td> <td>26.30</td> <td>16.34</td> </tr> <tr> <td>Overall</td> <td>5,525</td> <td>0.13</td> <td>35.80</td> <td>10.69</td> </tr> </tbody> </table>	Priority Rating	Number overdue and marked as "in progress"	Least overdue (months)	Most overdue (months)	Avg. months overdue	High	108	2.66	31.99	11.26	Medium	4,725	0.13	35.80	9.85	Low	692	0.13	26.30	16.34	Overall	5,525	0.13	35.80	10.69
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Responsible Officer	Deadline																										
Head of Fire & Building Safety	Initial Action – 30 June 2024 Secondary action – 1 January 2025																										

actions, which were overdue at the time of the audit by nine months, five months and eight months respectively.

In addition, there were nine remedial actions (eight medium priority and one low priority), within the FRA Actions Primary Spreadsheet, which had missing fields within “date to be actioned” column.

It was further noted that the Council’s monthly outstanding actions report, presented to Corporate Management Team (CMT), only highlighted the figures related to actions with blank statuses (even though actions marked as ‘in progress’ were also technically overdue if not completed). Therefore, no high-priority, 2,938 medium priority and 569 low priority actions were reported as outstanding as of 31 October 2022.

Risk

Remedial actions arising from FRAs are not completed according to timescales, which can result in harm to residents and legal actions, in the occasion of a preventable fire-related incident.

The Council is inaccurately reporting outstanding FRAs actions to the Executive Team, resulting in poor decision making and lack of oversight on significant areas. Lack of assurance over the position of safety of homes puts tenants, staff and other stakeholders at risk of harm.

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 3				
1	<p>New reporting introduced from April 2024, with monthly updates to the Compliance Board and DMT.</p> <p>All high and medium risk actions have been reviewed and prioritised for remedial action including works.</p> <p>All new High-Risk actions wef 1 April 2024 are reviewed within 1 working day and works programmed within 5 working days for completion within 10 working days.</p> <p>All new medium actions wef 1 April 2024 are reviewed within 3 working days and works programmed within 10 working days for completion within 30 working days.</p> <p>Also refer to actions in Finding 2</p>	<p>Expected Control</p> <p>There are appropriate systems and processes in place to ensure that all remedial actions raised within FRAs are effectively managed and actioned in a timely manner.</p> <p>Issue/Finding</p> <p>A sample of 20 FRAs to were reviewed to confirm whether all remedial actions had been actioned in line with the Council's target timescales. A total of 220 actions were raised within our sample and we identified that 136 remedial actions were overdue, including four high, 117 medium and 15 low priority actions. We noted three medium priority actions were due for completion in August 2020.</p> <p>The Senior Fire Safety Surveyor advised that several open and overdue actions were caused by a Covid-19 backlog and manufacturing delays.</p> <p>Management advised that following the Senior Fire Safety Surveyor’s request, AJS Group Services have completed a stock list for critical and spare parts, commonly used by engineers, to mitigate against further delays.</p> <p>Risk</p> <p>Where remedial actions arising from FRAs are not completed in a timely manner, tenants may be exposed to undue risk.</p>				
<table border="1"> <thead> <tr> <th data-bbox="194 1201 490 1267">Responsible Officer</th> <th data-bbox="490 1201 792 1267">Deadline</th> </tr> </thead> <tbody> <tr> <td data-bbox="194 1267 490 1362">Head of Fire & Building Safety</td> <td data-bbox="490 1267 792 1362">30 June 2024</td> </tr> </tbody> </table>		Responsible Officer	Deadline	Head of Fire & Building Safety	30 June 2024	
Responsible Officer	Deadline					
Head of Fire & Building Safety	30 June 2024					

Control Area 8: Data Integrity – FRAs are up to date and reviewed on a periodic basis

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 4
1	<p>All FRA’s reviewed in March 2024. New process in place to ensure spreadsheet reviewed monthly. (initial action)</p> <p>With the introduction of a new IT system (potentially NEC) will use UPRN as a key data identifier for all FRA’s and FRA Remedial actions. This will avoid the use of spreadsheets going forward. (secondary action)</p>	<p>Expected Control</p> <p>The information recorded for FRAs is accurate and reviewed on a periodic basis.</p> <p>Issue/Finding</p> <p>The Council had an FRA Schedule in place which was used to monitor the FRA review dates, frequency of assessments, the risk assessor and risk rating for each property owned by Croydon.</p> <p>Review of the FRA Schedule and the FRA Actions Primary Spreadsheet identified the following discrepancies within the data recorded:</p> <ul style="list-style-type: none"> • FRA Schedule: the unique property reference number (UPRN), date of the FRA, property risk rating and frequency of FRA were not recorded for five properties. We were advised by the Senior Fire Safety Surveyor that these related to new properties but did not receive evidence to confirm this. • FRA Actions Primary Spreadsheet: the unique property reference number (UPRN) was not recorded for 23 remedial actions and the property address was not recorded in the case of 203 FRA remedial actions; where a UPRN and/or address would be required, with the spreadsheet recording "N/A" or "?". Review of the FRA Actions Primary Spreadsheet also identified 114 FRA actions marked as completed, with no completion date recorded. The Building Services Compliance Surveyor advised that some completions were recorded in error, and some involved the user (at the time of completion) forgetting to input the date.
Responsible Officer	Deadline	
Head Fire & Building Safety	Initial action completed – March 2024	<p>Risk</p> <p>The FRA Schedule and FRA Actions Primary Spreadsheet lack key information in relation to the fire safety status of properties.</p>

	Secondary action – March 2025	Misstatements of FRA and/or remedial actions data, including omitted FRA dates or remedial actions inappropriately marked as complete, may lead to potentially inadequate fire safety arrangements being in place, thereby placing tenants' safety at risk.
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Control Area 3: Adequacy of completion of FRAs

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 5				
2	<p>FRA template reviewed with Delco to ensure information meets requirements. (initial action)</p> <p>The implementation of an IT solution will enable sharing of data via API's avoiding data errors and more up to date reporting. (secondary action)</p>	<p>Expected Control</p> <p>FRAs for each of the Council's premises have considered as a minimum the size, build and complexity of the buildings.</p> <p>Issue/Finding</p> <p>Review of a sample of 20 FRA reports to establish whether these contained key details about the property noted that, while FRAs completed by Millwood, included information on tenure type (i.e. general needs, sheltered block etc.), all sample FRAs completed by Delco did not include information on the property tenure type.</p>				
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Responsible Officer	Deadline					
Head of Fire & Building Safety	<p>Initial action completed March 2024.</p> <p>Secondary action – target date 31 March 2025</p>					

Control Area 5: Reporting on progress of the fire safety programme

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 6				
2	<p>Compliance Board, chaired by Director meets monthly and receives assurance monitoring report. This report is also shared with DMT (wef April 2024).</p> <p>It is intended to share a 6 monthly report with CMT.</p>	<p>Expected Control</p> <p>Performance reports are provided to Senior Management and the Board which provide clear and transparent assessment of the status of the fire risk programme.</p> <p>Issue/Finding</p> <p>Whilst performance information related to fire safety was observed as presented to CMT monthly, the Council's Fire Safety Board (including Health and Safety Consultant) did not receive regular FRA related performance reporting.</p> <p>The Compliance Manager advised that the last Fire Safety Board meeting took place in September 2021.</p> <p>Risk</p> <p>Senior Management / Council (and relevant Cabinet Member if applicable) is unaware of the fire safety compliance position of the Council's housing portfolio and significant issues relating to fire safety.</p>				
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Responsible Officer	Deadline					
Head of Fire & Building Safety	<p>Completed April 2024</p> <p>Secondary action – target date 31 July 2024.</p>					

Control Area 7: Data integrity – Completion of FRAs for all of the Council’s communal areas

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 7
2	<p>Six of seven identified properties were surveyed by the Compliance team and have no internal communal area, hence no requirement for an FRA. The seventh, Frensham Drive, is a new property, which was not added to the FRA schedule due to ambiguity in the process for the Assets team to update the Compliance team on new stock. This has now been addressed.</p> <p>Weekly review meetings are in place to ensure datasets remain up to date, until new IT system available.</p> <p>The Asset, Compliance and Fire & Building Safety teams attend Asset Review Group meetings, Chaired by Corporate Director of Housing. This ensures any new properties due to be acquired</p>	<p>Expected Control</p> <p>FRAs are in place for all properties with communal areas.</p> <p>The asset management database is an accurate reflection of properties with communal flooring</p> <p>Issue/Finding</p> <p>A reconciliation between the Communal Flooring Report⁴ and the FRA Schedule was conducted to confirm whether an FRA had been undertaken on all communal areas.</p> <p>We identified seven properties that were not on the FRA Schedule but were on the Communal Flooring Report. We were provided with photographic evidence where management were of the view that a communal area was not present for four of the properties. However, an explanation was not provided for the remaining three properties with communal flooring (127 Northborough Road, 20 Newlands Road, and Frensham Drive blocks 90-100).</p> <p>Risk</p> <p>The Council’s records on the presence of communal areas are inaccurate, leading to uncertainty on the completeness of the FRA Schedule and where the Council is responsible for undertaking FRAs. FRAs are not undertaken for all communal areas, exposing tenants at risk.</p>

⁴ The Communal Flooring Report is managed by the Asset Management team and includes a list of properties with communal flooring.

	are reviewed against safety/compliance criteria and documents provided by development before handover takes place.	
Responsible Officer	Deadline	
Head of Fire & Building Safety	Completed April 2024	

Control Area 8: Data integrity – FRAs are up to date and reviewed on a periodic basis

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 8				
2	<p>New process mobilised in March 2024 to review FRA actions as outlined above. Data anomalies addressed.</p> <p>Once new IT solution implemented, data integrity can be improved through the use of API's with contractors/Fire Risk Assessors.</p>	<p>Expected Control</p> <p>FRAs are up to date and reviewed on a periodic basis, with remedial actions completed in a timely manner.</p> <p>Issue/Finding</p> <p>Comparison of the information on the FRA reports against the FRA Actions Primary Spreadsheet for a sample of 20 FRAs and noted the following limitations:</p> <ul style="list-style-type: none"> • Remedial actions raised for two FRAs (354700 & 344078) on 24 October 2022 and 20 October 2022 respectively, have not been included in the Council's FRA Actions Primary Spreadsheet document. This resulted in 17 medium and four low priority actions being omitted. • Whilst the FRA date for property 354700 was recorded as 17 November 2022 on the FRA Schedule, the actual date that the FRA was undertaken was 24 October 2022. This could result in the next FRA becoming overdue by approximately a month. • From review of the FRA Actions Primary Spreadsheet, one instance was noted where three of the 25 FRA remedial actions raised for property 351796 were recorded under January 2022, when the FRA was conducted in December 2021. The three remedial actions were identified as medium priority. <p>As the above findings were based on sample testing, it is likely that further discrepancies exist.</p> <p>Risk</p> <p>Remedial actions arising from FRAs are not completed due to not being tracked/monitored in the FRA Actions tracker, which may expose tenants to undue risk.</p>				
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Responsible Officer	Deadline					
Head of Fire & Building Safety	Initial action Complete Secondary action – 31 March 2025					

Priority	Action Proposed by Management	Detailed Finding/Rationale - Issue 9
2	<p>Whilst all site visits are done within the required timeframes, there have been delays with reports being issued. Delco and Millwood contracts now include SLA for provision of reports within 5 working days of site visit. As a result, compliance is now 100%. (Initial Action)</p> <p>A move toward a system-based approach will facilitate improved visibility of the programme, ensuring all FRA's are completed before due date. (secondary action)</p>	<p>Expected Control</p> <p>High risk properties have FRAs conducted every year, in line with the frequency stated in the Council's draft Fire Safety Policy.</p> <p>Issue/Finding</p> <p>Review of the Council's FRA Schedule identified that 15 high risk properties were overdue for an FRA at the time of the audit. We were provided with FRA reports for 13 of these properties as evidence of completion, although the FRA Schedule had not been updated to reflect these. The remaining two properties (342446 and 346818) were due for an FRA on 8 November 2022; however, the Council had not received the FRA reports at the time of the audit (which completed on 11 November 2022). We were therefore unable to determine whether an FRA had been undertaken for these two properties, as the Council was unable to receive a response from the contractor during the audit.</p> <p>Of the 13 FRAs received, we noted that three high risk property FRAs had not been completed within the 12-month timeframe. These FRAs were completed late by eight working days for property 348749, six working days for property 348969 and one working day for property 348892.</p> <p>Risk</p> <p>FRAs are not completed within required timescales leading to potentially inadequate fire safety arrangements being in place and placing tenant's safety at risk.</p>
Responsible Officer	Deadline	
Head of Fire & Building Safety	<p>Initial Action Complete.</p> <p>Secondary action – 31 March 2025</p>	

4. Priority 3 Issues

























Agreed action	Findings
<p>There are 20 sheltered schemes and 6 extra schemes. All schemes have had an FRA.</p> <p>These are low rise blocks.</p> <p>Work is underway to review warden call system and AOV/fire detection systems.</p> <p>FRA's have been updated and no high-risk actions are present.</p> <p><u>Responsible officer</u> Head of Fire & Building Safety</p> <p><u>Deadline</u> Complete</p>	<p>Expected Control</p> <p>The Council's draft Fire Safety Policy states that all sheltered schemes are classified as high-risk properties.</p> <p>Issue/Finding</p> <p>Review of the Council's FRA Schedule identified ten sheltered blocks that were rated as medium risk.</p> <p>With consideration that the Fire Safety Policy is in draft, the Senior Fire Safety Surveyor explained that risk classifications have not been fully implemented on all Council properties and that, once the draft policy has been finalised and approved by the Corporate Director of Housing, the Council intends to review risk classification of all properties.</p> <p>Risk</p> <p>Fire risk is not managed in accordance with the risk profile of buildings within the Council's stock, as a result affecting the overall periodic risk cycles at which FRA's are reviewed. There is a risk that FRA's are not completed at the correct frequency which could result in harm to residents.</p>
<p>Monthly reporting now in place as outlined above.</p> <p><u>Responsible officer</u> Head of Fire & Building Safety</p> <p><u>Deadline</u></p>	<p>Expected Control</p> <p>Performance reports are provided to Senior Management and the Board which provide clear and transparent assessment of the status of the FRA schedule.</p> <p>Issue/Finding</p> <p>Reports were being provided to the CMT monthly, and key performance indicators ('KPIs') were included within the Corporate Performance</p>



















Agreed action	Findings
<p>Complete</p>	<p>Framework. Review of the Corporate Performance Framework for September 2022 noted that the Council reports on:</p> <ul style="list-style-type: none"> • Number of FRAs completed. • Number of FRAs required; and • Percentage of FRA completed on target. <p>Performance reporting could be improved by introducing indicators related to the percentage of FRAs overdue for renewal; and by further breaking the number of outstanding FRA remedial actions overdue into the priority level.</p> <p>We were advised by the Compliance Manager that detailed indicators were presented to Departmental Management Team (DMT), however we were not provided with the KPIs presented to DMT although requested.</p> <p>The Corporate Performance Framework, incorporating the suite of KPIs, includes a ‘key’ table with colour referencing. However, our review of this noted that the definition for each colour was not included. In addition, although the table included trend arrows to provide an overview of direction of performance improvement, trend arrows were not used in relation to FRA KPIs and therefore the direction of travel was not clear.</p> <p>Examples of good practice for fire safety performance reporting including forward-looking remedial action KPIs have been provided in Appendix 1 of this report.</p> <p>Risk</p> <p>Reporting on the progress of the FRA Schedule is not transparent, as a result, CMT does not have sufficient oversight over the Council’s fire safety performance, and therefore a could result in overdue/incomplete FRAs</p>




Agreed action	Findings
	and/or remedial actions that potentially put tenants at risk of harm not being reported to those responsible.

Fire Safety Performance Reporting Example

Below is an example of Fire Safety reporting by a peer organisation.

Indicator	Status	Target	July 2020	Aug 2020	Sep 2020	Oct 2020	Short Term Trend	Long Term Trend
OPI022 Fire : % of emergency lighting in communal areas inspections completed		100%	100%	100%	100%	100%		
OPI023 Fire : No. of remedial actions (emergency lighting in communal areas) outstanding		0	1	1	0	0		
OPI024 Fire : % of fire alarms tested		100%	100%	100%	100%	100%		
OPI025 Fire : No. of remedial actions (fire alarms) outstanding		0	4	8	2	1		
SKPI024 Fire : % of Fire Risk Assessment's in date		100%	99.4%	99.39%	100%	100%		
SKPI025 Fire : Total number of FRA actions (incomplete)		0	219	178	175	108		
SKPI025a Fire : Total number of high priority remedial FRA actions overdue and unactioned		0	0	0	0	0		
SKPI025b Fire : Total number of medium priority remedial FRA actions overdue and unactioned		0	0	2	1	0		

Indicator	Status	Target	July 2020	Aug 2020	Sep 2020	Oct 2020	Short Term Trend	Long Term Trend
SKPI025c Fire : Total number of low priority remedial FRA actions overdue and unactioned		0	7	3	0	0		
SKPI026 Fire : Total number of overdue, in progress remedial FRA actions		0	80	86	76	64		
	% of outstanding in no access procedure:		0%	0%	0%	0%		
SKPI030a Fire : % of servicing schedule completed for properties with gas, CO detectors annual servicing		100%	99.12%	99.04%	99.08%	99.39%		
	% of outstanding in no access procedure:		42%	82%	85%	86%		
SKPI030b Fire : % of servicing schedule completed for properties with gas, smoke and heat detectors annual servicing		100%	99.4%	99.31%	99.37%	99.76%		
	% of outstanding in no access procedure:		42%	82%	76%	85%		
SKPI030c Fire : % servicing schedule completed for properties with no gas, smoke and heat detectors annual servicing		100%	99.47%	98.98%	99.18%	99.75%		
	% of outstanding in no access procedure:		42%	87%	41%	79%		
SKPI031a Fire : No. of remedial actions (smoke/heat detectors) outstanding and actions to address		0	3	3	1	1		
	% of outstanding in no access procedure:		0%	0%	0%	100%		

Indicator	Status	Target	July 2020	Aug 2020	Sep 2020	Oct 2020	Short Term Trend	Long Term Trend
SKPI031b Fire : No. of remedial actions (CO detectors) outstanding and actions		0	0	0	0	0		

The table below shows how many recommendations were raised with current FRA priority and then summarised by when these recommendations are due. This helps providers to ensure works are planned for completion in line with their due date. The table below is not reflective of current performance, these figures are for illustrative purposes only.

Priority	Total	Overdue	Due this week	Due in 1-2 weeks	Due this month	Due in 60 days	Future
Low	121		2	6	10	35	68
Medium	87	10		3	15	27	32
High	10			7	3		
Immediate	1		1				
Totals	219	10	3	16	28	62	100

AUDIT TERMS OF REFERENCE

Fire Safety

1. INTRODUCTION

- 1.1 London Borough of Croydon (the ‘Council’) has a duty under the Regulatory Reform (Fire Safety) Order 2005, to carry out Fire Risk Assessments (FRAs) on all blocks of Housing Stock. As part of their housing strategy, the Council agreed to improved fire safety in its housing stock by providing staff with accredited training on carrying out FRAs. The FRAs make recommendations on areas of improvement on fire safety and the priority for each item. These assessments are intended to highlight identified hazards but also give direction to conduct further detailed investigations into specific areas of the buildings and to consider the best course of action.
- 1.2 This audit was undertaken as part of the agreed Internal Audit Plan for 2022/23.

2. OBJECTIVES AND METHOD

- 2.1 The overall audit objective was to provide an objective independent opinion on the adequacy and effectiveness of controls / processes.
- 2.2 The audit for each controls / process being considered:
- Walkthrough the processes to consider the key controls;
 - Conduct sample testing of the identified key controls; and
 - Report on these accordingly.

3. SCOPE

- 3.1 This audit, focused on Fire Safety (FRA), was undertaken as part of the 2022/23 Internal Audit Plan. The specific scope included the following areas and identified issues:





Audit Areas	Issues Raised		
	Priority 1 (High)	Priority 2 (Medium)	Priority 3 (Low)
Policy and procedural guidance	0	0	0
Risk profiling of buildings / risk-based approach to undertaking FRA reviews	0	0	1
Adequacy of completion of FRAs	0	1	0
Remedial actions raised with FRAs	3	0	0
Reporting on progress of the fire safety programme	0	1	1

Audit Areas	Issues Raised		
	Priority 1 (High)	Priority 2 (Medium)	Priority 3 (Low)
Monitoring and controlling the performance of fire risk contractors	0	0	0
Data integrity – completion of FRAs for all of LBC’s communal areas	0	1	0
Data integrity – FRAs are up to date and reviewed on a periodic basis	1	2	0
Totals	4	5	2

Definitions for Audit Opinions and Identified Issues

In order to assist management in using our reports:

We categorise our **audit assurance opinion** according to our overall assessment of the risk management system, effectiveness of the controls in place and the level of compliance with these controls and the action being taken to remedy significant findings or weaknesses.

	Full Assurance	There is a sound system of control designed to achieve the system objectives and the controls are constantly applied.
	Substantial Assurance	While there is basically a sound system of control to achieve the system objectives, there are weaknesses in the design or level of non-compliance of the controls which may put this achievement at risk.
	Limited Assurance	There are significant weaknesses in key areas of system controls and non-compliance that puts achieving the system objectives at risk.
	No Assurance	Controls are non-existent or extremely weak, leaving the system open to the high risk of error, abuse, and reputational damage.

Priorities assigned to identified issues are based on the following criteria:

Priority 1 (High)	Fundamental control weaknesses that require immediate attention by management to action and mitigate significant exposure to risk.
Priority 2 (Medium)	Control weakness that still represent an exposure to risk and need to be addressed within a reasonable period.
Priority 3 (Low)	Although control weaknesses are considered to be relatively minor and low risk, still provides an opportunity for improvement. May also apply to areas considered to be of best practice that can improve for example the value for money of the review area.

Statement of Responsibility

We take responsibility to the London Borough of Croydon for this report which is prepared on the basis of the limitations set out below.

The responsibility for designing and maintaining a sound system of internal control and the prevention and detection of fraud and other irregularities rests with management, with internal audit providing a service to management to enable them to achieve this objective. Specifically, we assess the adequacy and effectiveness of the system of internal control arrangements implemented by management and perform sample testing on those controls in the period under review with a view to providing an opinion on the extent to which risks in this area are managed.

We plan our work in order to ensure that we have a reasonable expectation of detecting significant control weaknesses. However, our procedures alone should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify any circumstances of fraud or irregularity. Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud.

The matters raised in this report are only those which came to our attention during the course of our work and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you for their full impact before they are implemented. The performance of our work is not and should not be taken as a substitute for management's responsibilities for the application of sound management practices.

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