Fire Safety Policy

1 Introduction

1.1 Stockport Homes Group (SHG) manage circa. 11,000 domestic properties on behalf of Stockport Metropolitan Borough Council (SMBC). SHG also manage a number of other assets of behalf of SMBC including community centres and garages. SHG also own (in their own right) and manage approx. 530 domestic properties.

1.2 SHG currently manages 25 High-Rise Buildings, which are captured under the new regulatory reporting and compliance requirements. 5 Medium-Rise buildings and circa 600 blocks of various occupancy and tenancy types.

1.3 This policy outlines how we will meet our statutory obligation and commitment to fire safety in buildings. This policy will also provide guidance on our approach to a sterile environment within communal areas that form protected escape routes within communal blocks.

1.4 The scope of this policy includes:

- Premises subject to the Fire Safety Order
- High-rise residential buildings
- Buildings over 11 metres
- Medium and lower-rise blocks
- Sheltered or supported accommodation
- Workplaces and offices
- Individual dwellings where separate landlord duties apply.

2 Legal and Regulatory Framework

2.1 SHG is committed to complying with all relevant legislation, regulations, and standards relating to fire safety. This includes, but is not limited to, the Regulatory Reform (Fire Safety) Order 2005, the Fire Safety Act 2021, the Building Safety Act 2022, the Fire Safety (England) Regulations 2022; the Fire Safety (Residential Evacuation Plans) (England) Regulations 2025; the Smoke and Carbon Monoxide Alarm (Amendment) Regulations 2022; the relevant housing legislation; applicable workplace fire-safety legislation and the Building (Higher-Risk Buildings Procedures) (England) Regulations 2023.

2.2 In addition, SHG adheres to statutory guidance, codes of practice, and British Standards relevant to the design, management, and maintenance of fire safety measures. Compliance with these requirements ensures that fire safety risks are effectively managed, residents are protected, and SHG can demonstrate accountability and due diligence in the management of its housing stock.

2.3 All staff and contractors are expected to operate within this legal and regulatory framework and to maintain records that demonstrate adherence to statutory obligations.

3 Responsible Person

3.1 The Responsible Person for each premises will be identified in accordance with article 3 of the Regulatory Reform (Fire Safety) Order 2005, taking account of ownership, employment responsibilities and the extent of control over the premises.

3.2 SHG is a Responsible Person, to the extent of its control, for premises that it owns, manages, maintains or repairs. SMBC or other organisations may also be Responsible Persons where they retain control of the premises or particular fire-safety activities.

3.3 The Responsible Person retains statutory responsibility for compliance with fire-safety legislation. Employees, managers, consultants and contractors may assist with fire-safety activities, but these appointments do not transfer the Responsible Person's legal duties.

3.4 Where more than one Responsible Person has duties for the same premises, SHG will cooperate, coordinate and share relevant fire-safety information with the other duty holders. For occupied higher-risk buildings, SHG will also cooperate with the relevant Accountable Person and Principal Accountable Person.

3.5 SHG, in its capacity as a Responsible Person and to the extent of its control, will make and give effect to appropriate arrangements for the effective planning, organisation, control, monitoring and review of preventive and protective fire-safety measures, proportionate to the premises and the risks present.

4 Fire Risk Assessment

4.1 A fire risk assessment (FRA) is a systematic evaluation of a building to identify potential fire hazards, assess the level of fire risk, and determine appropriate measures to mitigate those risks. It helps to ensure the safety of people, property, and the environment by identifying and implementing necessary fire safety measures.

4.2 There are four different types of fire risk assessments:

- Type 1 – Common parts only (non-destructive)
- Type 2 – Common parts only (destructive)
- Type 3 – Common parts and flats/bedrooms (non-destructive)
- Type 4 – Common parts and flats (destructive).

4.3 All of our properties subject to The Regulatory Reform (Fire Safety) Order 2005 (RRFSO) will receive a type 1 FRA. Buildings over 18 meters in height will receive a type 3 FRA.

4.4 The review period for FRAs is building dependent. The review schedule for each building type is as follows:

Building Type		Review Schedule
Level 1	Premises with vulnerable occupants, HMO's, converted premises, mid- and high-rise blocks (greater than 3 storeys), communal halls, offices etc. that are subject to the RRFSO.	Annually
Level 2	Purpose built, general needs residential blocks of 3 storeys (Ground +2 upper floors) that are subject to the RRFSO.	Every 2 years
Level 3	Purpose built, general needs residential blocks of no more than 2 storeys (ground +1 upper floor) that are subject to the RRFSO.	Every 3 years

4.5 We will undertake new FRAs following any of the events below:

- A fire, near miss or threat of arson
- The introduction of new work practices
- Any works affecting the means of escape or design of alarm systems
- Structural or material changes to the building or its use
- Widespread changes in the type of residents occupying the building
- A significant change in legislation or guidance
- If we have reason to believe the existing FRA is no longer valid
- If the annual Fire Risk Review identifies a need to undertake a new or revised fire risk assessment.

4.6 Outside the circumstances outlined above, FRAs will be renewed on or before the date recommended by the schedule outlined above as a minimum, or in line with the Fire Risk assessor's recommendations.

4.7 If on completion of a type 1 FRA, the fire risk assessor recommends a more in-depth survey is required, we will undertake either a type 2, 3 or 4 as they recommend and would aim to complete this at the earliest opportunity.

4.8 All completed FRA's are stored within our compliance management software. We also provide a summary FRA document for high-rise buildings which is stored on our website for our customers to view, along with our progress on completing any actions identified.

5 Management and Remedial Actions

5.1 Both management and remedial actions detailed in FRAs will be completed in a risk-based priority order. The different action types can be defined as follows:

- **Management Actions**: actions to be taken in relation to the management of the building where further confirmation is required, or further site checks are needed.

- **Remedial Actions**: works which generally involve the need for contractors to complete. Examples of remedial actions are replacement or repair of fire doors, compartmentation improvements, automatic fire detection, alarm works etc.

5.2 All actions will be allocated a target timescale in line with the risk matrix set out below:

FRA Actions		**Premises Risk Rating**
		Risk Type 1
Remedial Actions	Intolerable	1 month
	Substantial	2 months
	Moderate	3 months
	Tolerable	6 months
	Trivial (Recommendation)	Each action to be reviewed by the Compliance team
	Priority 1 (High Risk)	24 hours

Management Actions	Priority 2 (Low Risk)	1 month

5.3 There are circumstances where it is appropriate to review and potentially extend the timeframes attached to actions. Any extension to an action target date must be supported by documented competent advice and a current risk assessment, approved by an authorised manager, supported by suitable interim controls and assigned a revised completion date. An extension does not remove or automatically reduce the original risk rating. Changes to timeframes will be signed off by the Director of Property and shall be clearly explained.

5.4 If a timescale cannot be met, mitigating measures will be considered to ensure risk is managed.

6 Management of Buildings

6.1 We will manage our buildings in a way that mitigates fire risk where possible. The following measures will be in place:

- We will ensure each building has an evacuation strategy stated clearly in the FRA and this evacuation will be clearly displayed in each communal area or relevant property. The FRA will record the current and recommended evacuation strategy. Any exceptions, ie. where the current and recommended strategy differ will be reported and referred to the Building Safety Steering Group. Information on the evacuation strategy will be shared with customers annually or when a new tenancy is taken.
- All planned and responsive works should be done so in line with current legislation and British Standards.
- All our homes will have detection installed to comply with the Smoke and Carbon Monoxide Alarm regulations 2022. All residents are responsible for their own fire safety within their homes, including carrying out regular tests of their individual fire detection system. We will also carry out a test of the smoke detector annually when accessing the property to complete compliance activities.
- In all residential properties where furniture and furnishings are provided, whether in common areas or as part of a furnished tenancy, all will be in compliance with the Furniture and Furnishings (Fire Safety) Regulations 1988 (as amended 1993).

7 Sterile Approach to Communal Areas

7.1 Protected escape routes, stairways, landings, firefighting access routes and access to fire-safety equipment will be kept clear of obstruction and

unacceptable combustible materials. Items presenting an immediate fire, ignition or evacuation risk will be removed or otherwise controlled without delay. Other items will be managed through a documented, risk-based process consistent with the fire risk assessment. To ensure that all communal areas are safe and free of hazards, we implement the following:

- The storage of possessions, waste or unwanted items will not be permitted where it obstructs an escape route, increases fire or ignition risk, restricts firefighting access or is otherwise inconsistent with the fire risk assessment.
- Areas such as stairways, landings and hallways must be kept completely clear of all items such as prams, pushchairs, bicycles, children's toys, plant stands, furniture, door mats and rubbish or other such obstacles that may prevent clear access.
- Items presenting an immediate or significant fire, ignition or evacuation risk will be removed or otherwise controlled without delay. Other items will be managed in accordance with the risk-based timescales set out in Section 8.
- Where a designated mobility scooter store is not available, scooters must be stored inside the flat or house. Storage and charging of mobility scooters, motorised wheelchairs, electric scooters or bikes in communal areas creates a significant fire hazard and is not permitted in any of our communal areas.
- Mobility scooters or motorised wheelchairs are the owner's responsibility. Mobility equipment, batteries and charging equipment must be maintained in safe condition, used in accordance with manufacturer instructions and not stored or charged in prohibited locations. SHG may require inspection or other evidence where justified by the fire risk assessment or an identified safety concern.

7.2 Any items placed, stored or left in a shared communal area are a hazard that can prevent Fire Services entering the building as well as people leaving safely in the event of a fire. These items may also pose a source of ignition for a fire themselves.

7.3 SHG will take proportionate enforcement action in response to breaches of this policy, with immediate priority given to matters presenting a significant risk to life, safe evacuation or firefighting operations.

8 Management of Unwanted Items in Communal Areas

8.1 To ensure the safety of residents and maintain clear means of escape, a risk-based approach is applied to items stored or left within communal areas.

Items are assessed based on their potential to contribute to fire load, ignition risk, obstruction, or risk to life in the event of evacuation.

8.2 Two priority levels are defined:

- **Priority 1 (High Risk):** Items that present an immediate or significant fire risk, obstruction to escape, or increased hazard due to ignition sources (including electrical or fuel-related risks). These items must be removed within 24 hours of identification. We will aim to collect them on the same day, but in all cases they will be collected no later than 24 hours after being reported.
- **Priority 2 (Lower Risk)**: Items that present a potential fire load or minor obstruction but do not pose an immediate threat to life or safe evacuation. These items must be removed within 1 month of identification.

8.3 This approach ensures proportionate enforcement while prioritising resident safety, particularly in relation to emerging risks such as lithium-ion batteries and electrically powered transport devices.

8.4 Customers can contact us to report items left within communal areas by ringing 0161 217 6016, visiting our website https://www.stockporthomes.org/do-it-online/tellus/contact-us/ or visiting our head office at Cornerstone, 1-3 Edward Street, Stockport, SK1 3NQ. Report can also be made by Facebook and Instagram.

8.5 Colleagues can report items to the Environmental Team or the Compliance and Building Safety Team.

Priority 1 – Removal Within 24 Hours (High Risk)

8.6 These are items/conditions that significantly increase fire risk, especially ignition or rapid fire spread:

- Electrical / battery-related risks
- E-bikes, e-scooters, or electric skateboards stored in communal areas
- Any device containing lithium-ion batteries left unattended
- Charging of e-bikes, scooters, or batteries in communal areas
- Fuel / combustible risks
- Petrol, diesel, or fuel containers (including for motorbikes or equipment)
- Mopeds or motorcycles stored internally in communal spaces
- Gas cylinders (propane, butane, camping gas)
- Obstruction & high fire load
- Items blocking escape routes (e.g. corridors, stairwells, exits)

- Large accumulations of combustible waste (e.g. cardboard, rubbish bags)
- Furniture in protected routes (sofas, mattresses, wardrobes)
- Prams/buggies in stairwells or where they obstruct egress
- Deliberate / Unsafe Conditions
- Evidence of tampering with fire doors (wedged open with items)
- Items placed within or near electrical intake cupboards or risers
- Items stored in plant rooms, bin stores or bin chute rooms (where inappropriate), or near ignition sources.

Priority 2 – Removal Within 1 Month (Lower Risk)

8.7 These items present a manageable but unacceptable fire load or housekeeping issue:

- General Combustible Items
- Small items of furniture (e.g. chairs, small tables) not obstructing escape
- Door mats, shoe racks, or small storage units outside flats
- Decorative items (plants, ornaments) in corridors
- Mobility & Personal Items (Non-Electrical or Lower Risk)
- Non-electric bicycles (where not obstructing escape routes)
- Folded prams/buggies stored neatly without blocking exits
- Mobility aids (subject to individual risk assessment and PEEP considerations)
- Storage & Clutter
- Low levels of stored personal belongings in communal cupboards
- Minor clutter that does not impede movement but contributes to fire load over time
- Items left temporarily in corridors (e.g. shoes, bags, parcels).

8.8 Costs incurred for removal, disposal, or any associated works may be recharged to the responsible resident(s) in line with tenancy agreements. Repeated or serious breaches of the policy may be treated as a breach of tenancy, which could result in formal action, including court proceedings.

8.9 Additionally, any fly-tipping or illegal dumping in or around communal areas will be investigated, and residents found responsible may be liable for associated removal and legal costs. These measures ensure that communal areas remain safe, accessible, and compliant with fire safety regulations for all residents.

9 Fire Safety Systems and Equipment

9.1 The testing of fire detection systems will be undertaken by competent engineers. Systems to be included in the fire safety equipment maintenance programme will include, but not limited to:

- Automatic Fire Detection (AFD) and alarm systems (and associated equipment such as hold open devices, door release mechanisms, fire curtains etc.)
- Smoke control systems (such as automatically opening smoke vents AOVs)
- Emergency lighting systems
- Portable firefighting equipment
- Rising (dry and wet) mains
- Firefighting lifts
- Fire suppression systems such as sprinklers / mist systems
- Lightning protection systems.

9.2 We maintain a skills/training matrix to ensure that all colleagues undertaking key roles within the scope of this policy have appropriate training. Anyone appointed to carry out roles externally will be vetted to ensure they have the relevant skills, knowledge and experience to carry out their role.

9.3 We will also ensure that fire risk assessors undertaking assessments on its buildings are competent to do so. Fire risk assessors should be able to demonstrate competency individually via registration on a recognised national scheme such as the Institution of Fire Engineers Register of Fire Risk Assessors, Fire Protection Association, Institution of Fire Safety Managers or similar.

9.4 Companies should also be 3rd party registered through schemes such as the BAFE SP205-1 or similar. External companies should have experience in undertaking Fire Risk Assessments in the type of properties concerned. Contractors undertaking work on our behalf are competent and have the appropriate skills, knowledge, training and experience to undertake any fire related work.

10 Evacuation and Emergency Planning

10.1 Each building will have a documented evacuation strategy appropriate to its design, construction, fire precautions, alarm arrangements, use and resident profile. The strategy will be supported by the current fire risk assessment and, where available, the building fire strategy.

10.2 Evacuation arrangements may include stay put, simultaneous evacuation, phased evacuation or other arrangements appropriate to the premises. Resident and staff instructions must reflect the approved strategy applicable to that building or part of the building.

10.3 Where the Fire Safety (Residential Evacuation Plans) (England) Regulations 2025 apply, the Responsible Person will identify potentially relevant residents, offer and complete the required person-centred fire risk assessment process, agree reasonable and proportionate mitigating measures, prepare emergency evacuation statements where required and maintain the required building emergency evacuation arrangements.

10.4 Relevant arrangements will be reviewed when a resident's circumstances, the building, the evacuation strategy or the available mitigating measures materially change.

10.5 All residents receive clear guidance on fire safety procedures, including:

- How and when to evacuate under the building's evacuation strategy
- How to respond to alarms and instructions from fire safety personnel
- The location of escape routes, exits, and assembly points.

10.6 For applicable multi-occupied residential buildings, residents will be provided with instructions explaining how to report a fire, the building's evacuation strategy and what they must do once a fire has occurred. The information will be displayed conspicuously, issued when a resident moves in, reissued at least annually and updated whenever the information changes.

11 Asset and Data Management

11.1 We maintain a comprehensive register of all fire safety assets across our housing stock, including fire doors, alarms, emergency lighting, sprinkler systems, and other fire protection equipment. The register records the location, type, installation date, maintenance schedule, and inspection history of each asset, ensuring that all fire safety equipment is accurately accounted for and managed.

11.2 Each high-rise building has a dedicated Premises Information Box containing up-to-date building information, fire risk assessments, inspection records, and details of remedial actions. These files are reviewed regularly and updated following any works, upgrades, or changes in building layout or occupancy.

11.3 All fire safety data is maintained to a high standard of accuracy and completeness. Records are stored securely and retained in line with statutory requirements and SHG policies. Data is accessible to authorised staff and the fire and rescue service when required, supporting effective monitoring, audit, and regulatory compliance.

11.4 Where applicable, SHG will comply with the Fire Safety (England) Regulations 2022 requirements relating to secure information boxes, external-wall information, floor and building plans, lifts and essential firefighting equipment, wayfinding signage, fire doors and information to residents.

11.5 Regular audits and inspections are carried out to ensure asset registers and Fire and Emergency Files remain accurate. Any discrepancies or issues are escalated promptly, and performance against maintenance and compliance schedules is reported to senior management.

12 Training and Competence

12.1 All staff, including front-line employees, property management teams, and contractors, receive appropriate training to ensure they are competent to carry out their fire safety responsibilities. Training includes:

- Understanding the fire strategy for each building type, including stay put and simultaneous evacuation procedures
- Awareness of fire safety systems, equipment, and emergency protocols
- Safe implementation of fire risk assessments, inspections, and remedial actions
- Specific training for high-risk roles, such as fire wardens or those conducting Personal Emergency Evacuation Plans (PEEPs).

12.2 Training is delivered through a combination of induction, refresher courses, and role-specific sessions. Records of all training are maintained and monitored to ensure compliance with statutory requirements and SHG standards.

12.3 The effectiveness of fire safety management is continuously monitored through audits, inspections, and performance reporting. Key monitoring activities include:

- Regular checks of fire safety equipment and assets
- Review of fire risk assessments and the completion of associated remedial actions

- Reporting of non-compliance, defects, or gaps to senior management for escalation
- Periodic review of training effectiveness and competence across teams.

12.4 Monitoring and assurance processes ensure that fire safety practices remain robust, risks are mitigated, and continuous improvement is achieved across all residential buildings.

13 Monitoring, Performance & Assurance

13.1 SHG is committed to ensuring that fire safety standards are consistently met across all properties through robust monitoring, performance management, and assurance processes. Monitoring includes:

- Regular inspections and audits of fire safety assets, equipment, and systems are undertaken to ensure compliance with statutory requirements and SHG standards.
- Fire risk assessments and associated remedial actions are tracked to ensure completion within agreed timescales.
- Any non-compliance, defects, or risks identified during monitoring are recorded and escalated promptly to the appropriate level of management.

13.2 Performance Management:

- Key performance indicators (KPIs) are established for fire safety activities, including completion rates of fire risk assessments, remedial works, training, and equipment maintenance.
- Performance is reviewed regularly by management and reported to the Building Safety Steering Group and senior leadership to ensure accountability.
- Trends and recurring issues are analysed to inform improvements to fire safety management and operational practices.

13.3 Assurance:

- SHG maintains a programme of internal and external audits to provide assurance that fire safety obligations are being met.
- Findings from audits, inspections, and performance reviews are used to improve processes, address gaps, and support continuous improvement.

- Senior management and the Board are provided with regular assurance reports on compliance, risks, and performance against policy commitments.

13.4 These monitoring, performance, and assurance activities ensure that fire safety practices remain effective, risks are proactively managed, and SHG can demonstrate compliance with regulatory and statutory requirements.

14 Contractor Management

14.1 SHG recognises that contractors play a key role in delivering and maintaining fire safety across our housing stock. All contractors engaged in fire safety works must be competent, qualified, and adhere to statutory requirements and SHG standards.

14.2 Contractors are selected through a robust procurement process that assesses competency, experience, and accreditation relevant to fire safety works. Only contractors meeting SHG and regulatory standards are approved to carry out fire safety activities.

14.3 Contractors are managed and supervised to ensure works are completed safely, to the required standard, and within agreed timescales. Site-specific risk assessments and method statements are reviewed and approved before works commence, and compliance with SHG fire safety procedures and statutory obligations is monitored throughout the contract period. Contractor performance is regularly reviewed, and any non-compliance or defects are escalated promptly.

14.4 Records of works, inspections, and maintenance carried out by contractors are maintained and audited to ensure quality and compliance. Lessons learned from contractor activity are incorporated into future procurement and management practices to continuously improve fire safety outcomes.

15 Planned and Reactive Works

15.1 Planned and reactive works are carried out to ensure that all fire safety measures remain effective and compliant with statutory requirements. Planned works include scheduled inspections, maintenance, upgrades, and replacement of fire safety assets such as doors, alarms, emergency lighting, and fire-fighting equipment.

15.2 Reactive works are undertaken in response to defects, incidents, or urgent safety issues identified through inspections, audits, or reports from residents and staff. All works are prioritised based on risk, and contractors and staff involved are required to follow approved procedures and maintain records of completion.

15.3 SHG monitors progress of all planned and reactive works to ensure they are completed safely, to the required standard, and within agreed timescales, with any outstanding issues escalated promptly to management. Lessons learned from completed works are used to improve future maintenance and operational practices.

16 Implementation

16.1 This policy will be implemented through SHG's documented fire-safety management arrangements established in accordance with article 11 of the Regulatory Reform (Fire Safety) Order 2005.

16.2 These arrangements will be supported by approved procedures, programmes and records covering, as applicable:

- Identification of Responsible Persons
- Fire risk assessment
- Fire risk assessment action management
- Inspection, testing and maintenance
- Fire-door management
- Emergency and evacuation arrangements
- Resident fire-safety information
- Management of relevant resident information
- Communal-area management
- Contractor and hot-work control
- Fire-safety defects and impairments
- Planned and reactive work
- Fire incidents and post-incident reviews
- Competence and training
- Information and record management
- Performance monitoring, assurance and management review.

16.3 Any gap identified in implementing this policy will be recorded, risk assessed, assigned to a named owner and supported by suitable interim measures until the required arrangements are completed.

16.4 Defects or impairments affecting critical fire-safety systems will be assessed promptly. Suitable interim measures will be introduced where necessary, relevant persons and the Fire and Rescue Service will be notified where required, and the defect will be tracked until completion has been evidenced and verified.

17 Roles and Responsibilities

17.1 All colleagues are responsible for carrying out their work in line with this policy and associated procedures.

The Audit and Risk Committee	Provides oversight and assurance to the SHG Board and SMBC on the effectiveness of fire-safety governance, risk management and internal control. The Committee will receive significant audit findings, material non-compliance and assurance relating to the discharge of Responsible Person duties.
Responsible Person	Retains statutory responsibility for ensuring that the applicable requirements of the Fire Safety Order and associated fire-safety legislation are met. The Responsible Person will ensure that suitable arrangements, resources and competent assistance are available. Delegated activities do not transfer the Responsible Person's legal duties.
The Chief Executive Officer (CEO)	Has overall executive responsibility for ensuring that SHG has suitable governance, leadership, resources and management arrangements to discharge its fire-safety responsibilities. The Chief Executive will allocate executive responsibilities, ensure that material fire-safety risks and non-compliance are appropriately escalated, and recommend this policy for approval through the relevant governance arrangements.
SHG Director of Property	Is the executive sponsor for this policy and is responsible for ensuring that appropriate arrangements are established for its implementation, monitoring and assurance. The Director will ensure that sufficient resources and authority are available, that significant fire-safety risks and failures are escalated and that relevant performance and assurance information is reported to senior leadership and the appropriate governance bodies. The Director will chair, or ensure appropriate representation at, the governance forum responsible for oversight of fire and building safety.

Assistant Director of Assets and Development	Supports the Director of Property in coordinating the implementation of this policy across asset management, investment, development and operational services. The Assistant Director will ensure that fire-safety risks arising from planned work, investment programmes, refurbishment and development activity are appropriately assessed, controlled and escalated.
Head of Compliance and Building Safety	Is SHG's senior operational lead for the implementation of the organisation's fire-safety management arrangements. The Head of Compliance and Building Safety will: • ensure that appropriate fire-safety policies, management arrangements and procedures are established; • oversee the fire risk assessment programme; • ensure that fire-safety actions, defects and remedial work are monitored and escalated; • ensure that competent persons and contractors are appointed; • oversee performance monitoring and assurance; • report significant risks, failures and non-compliance to the Director of Property; and • provide assurance concerning the implementation of the Responsible Person's fire-safety arrangements. This is a delegated organisational role and does not transfer the statutory duties of the Responsible Person.
Compliance Manager (Fire Safety and Lifts)	Is responsible for coordinating the day-to-day implementation of approved fire-safety arrangements, including: • fire risk assessments; • fire-safety inspection and servicing programmes; • action and defect management; • contractor monitoring; • performance reporting; • record keeping; and • escalation of overdue actions and material risks. The Compliance Manager will provide regular performance and exception reports to the Head of Compliance and Building Safety.
SHG Building Safety Manager	Supports coordination of the interface between fire-safety management and building-safety risk management in occupied higher-risk buildings. The Building Safety Manager will support the exchange of information between the Responsible Person, SHG as Accountable Person and SMBC as Principal Accountable Person and will ensure that relevant fire-safety information

	is considered within building-safety risk-management arrangements. The role does not replace or assume the statutory duties of the Responsible Person, Accountable Person or Principal Accountable Person.
Competent Person(s)	Competent persons appointed to assist with fire-safety activity must work within the limits of their competence, notify SHG where additional or specialist competence is required and provide suitable records and evidence of the work undertaken. SHG will assess competence before appointment and periodically thereafter, taking account of the skills, knowledge, experience and behaviours required for the relevant function.
All employees	All employees must comply with this policy, complete required training, follow approved fire-safety arrangements and promptly report hazards, defects, incidents and concerns. Employees are accountable for the activities assigned to them through their employment responsibilities. Statutory accountability under the Fire Safety Order remains with the relevant Responsible Person.

18 Internal Controls

1	**Version control** Version number will change every three years or at major review		
	Version No.	**Date**	**Change/s and reasons for change**
	1	August 2026	Review of existing policy

2	**Policy Owner** i.e. Executive Director	Director of Property Services
	Policy Author/s i.e. Head of Service	Head of Compliance and Building Safety
	Approved by/date	Property Management Meeting – 13 August 2026 – Decision
	Effective Date - the date of sign-off	13 August 2026
	Next Full Review Date i.e. 1 years after effective date	12 August 2027 Annual, or earlier following a significant legislative or regulatory change, serious fire incident, material audit finding or significant change to organisational fire-safety arrangements

3	Regulatory Standards	Please list the Consumer, Governance, Viability standards and outcomes this policy meets
	Standard/s / Legislation	**Required outcome**
	Safety and Quality Standard	1.1 Stock Quality 1.1.1 Registered providers must have an accurate, up to date and evidenced understanding of the condition of their homes that reliably informs their provision of good quality, well maintained and safe homes for tenants. 1.2 Decency 1.2.1 Registered providers must ensure that tenants' homes meet the standard set out in section five of the Government's Decent Homes Guidance and continue to maintain their homes to at least this standard unless exempted by the regulator. 1.3 Health and Safety 1.3.1 When acting as landlords, registered providers must take all reasonable steps to ensure the health and safety of tenants in their homes and associated communal areas. 1.4 Repairs, maintenance and planned improvements Registered providers must provide an effective, efficient and timely repairs, maintenance and planned

		improvements service for the homes and communal areas for which they are responsible.
	Legislation	
		SHG is committed to complying with all relevant legislation, regulations, and standards relating to fire safety. This includes, but is not limited to: • Regulatory Reform (Fire Safety) Order 2005 • Fire Safety Act 2021 • Building Safety Act 2022 • Fire Safety (England) Regulations 2022 • Fire Safety (Residential Evacuation Plans) (England) Regulations 2025 • Smoke and Carbon Monoxide Alarm (Amendment) Regulations 2022 • The relevant housing legislation; applicable workplace fire-safety legislation and the Building (Higher-Risk Buildings Procedures) (England) Regulations 2023.

4	**Linked policies/strategies**	
		SHG Compliance policy documents: Gas Safety Electrical Fixed Wire Testing Fire Safety Policy Smoke/Heat Alarm and CO2 Detector Meter Capping Asbestos Management Asbestos Management Plan Powered Lifting Equipment Legionella Management Mechanical and Electrical Planned Maintenance SHG Eyes Wide Open Commitment Block Inspection Procedure

5	**Equality, diversity and inclusion**	Describe how different experiences, characteristics, and approaches were considered during the formulation of the policy, e.g. neurodiversity, age, religion, sex/gender, financial/digital inclusion.
		There is a process in place to record information regarding abilities/vulnerabilities of residents which is determined by whether they could self-evacuate in the event of a fire or other emergency. This information is gathered and recorded by the Compliance and Building Safety Team. This

		information is stored locally within the team and also shared with the Greater Manchester Fire Services via the premises information boxes located within each high rise. This information is designed to assist the fire service in the event of an emergency so they can see where there are residents who may not be able self-evacuate and could need assistance should the fire spread in a particular direction. 5.2 Residents are advised that that in the event of a fire residents are advised to remain in their property for as long as they feel safe to do so, if they see signs of smoke, flame or heat then they should leave via the protected stairwells. The exception to this rule would be when the fire is in their own property in which case they should leave and call 999. The advice being giving to anyone who is unable to self-evacuate is to leave their property and find a safe place beyond as many fire doors on their landing as they can, whether that be cross corridor doors, bin chute room doors (where possible) or even other neighbours properties.

6	**Customer/Colleague Voice**	Describe how the customer and/or colleague voice shapes and influences the policy and services
		This policy is primarily informed by legislative and regulatory requirements. Whilst customer consultation has not directly influenced the policy content, feedback from residents and colleagues is considered through ongoing engagement, fire safety management arrangements, complaints, and lessons learned processes.

7	**Risk management**	This policy helps to mitigate the following risks identified on the Corporate Risk Register
	Corporate Risk 9	SHG and the Council are not able to demonstrate that they are meeting the Regulatory Standards set out by the Regulator of Social Housing
	Corporate Risk 14	SHG is not adequately prepared for a major change in government / housing policy
	Corporate Risk 6	SHG does not deliver excellent customer services in the way that customers require them
	Corporate Risk 1	The long-term stock investment needs of the stock cannot be met, including investment needs of high-rise blocks and all legal and statutory compliance requirements for homes, communal areas

		and neighbourhoods
	Corporate Risk 3	Building Assessment Certificates are not obtained from the Building Safety Regulator (BSR) for the High-Rise Buildings
	Corporate Risk 4	Health and safety obligations to customers aren't fulfilled (the Big 6) including damp and mould, gas safety, electrical safety, fire safety, legionella, lift safety, asbestos and carbon monoxide

8	**Performance monitoring**	Please list the relevant performance indicators (including government TSMs (Tenant Satisfaction Measures))
		Performance Indicators (PIs) and Key Performance Indicators (KPIs) will be reported to the Asset Compliance Group, Executive Team or Board at the frequencies outlined within the Building Safety Management Plan. The KPIs incorporate two Building Safety related Tenant Satisfaction Measures which are a requirement of the Regulator of Social Housing. • HRBs Registered with the Building Safety Regulator (Total Number and % of Total HRBs) • Building Assessment Certificate applications submitted by the Principal Accountable Person within 28 calendar days of direction from the Building Safety Regulator. • Building Safety Regulator requests for further information responded to within the period specified by the Regulator. • HRB Fire Equipment service/ inspections completed within target for Fire Safety as a % of Total HRBs (i.e. Fire Alarms/ Emergency Lighting/ AOVs/ Dry Risers/ FFE) • HRB Communal Fire Door inspections completed within target as a % of Total HRBs • HRB Flat Entrance Door inspections completed within target as a % of Total HRBs • HRBs with Outstanding and Overdue FRA Remedial Actions • Number of Mandatory Occurrences (within the reporting period) reported to the Building Safety Regulator, MOR Report submitted within the 10-calendar day timescale. • Building Safety Related Complaints (within the reporting period)

		• HRB Structural Surveys completed within Target (5 yearly Review) as a % of Total HRBs • HRB External Surveys completed within Target (5 yearly Review) as a % of Total HRBs. The KPIs will be reviewed periodically by the Building Safety Steering Group and additional/amended measures may be recommended. Where appropriate, KPIs will include the Total Number of Actions or Buildings required and the Total Number within Target as well as percentage figure. Commentary will be provided for any Properties or Actions out of date to include the date they became overdue, days overdue, and the remedy/remedies proposed to bring them back into a compliant position. To provide additional context, commentary will also include information on the proportion of activities within the reporting period that were undertaken before and after their due date. A detailed PI and KPI suite will be defined within the Management Plans.