



HILLINGDON  
LONDON



# Social Services, Housing and Public Health Policy Overview Committee

**Date:** WEDNESDAY, 4  
NOVEMBER 2015

**Time:** 7.00 PM

**Venue:** COMMITTEE ROOM 6  
CIVIC CENTRE, HIGH  
STREET, UXBRIDGE  
UB8 1UW

**Meeting  
Details:** Members of the Public and  
Press are welcome to attend  
this meeting

## Councillors on the Committee

Wayne Bridges (Chairman)  
Teji Barnes (Vice-Chairman)  
Shehryar Ahmad-Wallana  
Peter Davis  
Beulah East (Labour Lead)  
Becky Haggar  
Manjit Khatra  
June Nelson  
Jane Palmer

## Co-Opted Member

Mary O'Connor

**Published:** Tuesday, 27 October 2015

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This Agenda is available on the Council's Intranet (Horizon) at:  
<http://modgov.hillingdon.gov.uk/ieListMeetings.aspx?CId=324&Year=2015>

*Putting our residents first*

Lloyd White  
Head of Democratic Services  
London Borough of Hillingdon,  
3E/05, Civic Centre, High Street, Uxbridge, UB8 1UW  
[www.hillingdon.gov.uk](http://www.hillingdon.gov.uk)

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## **SOCIAL SERVICES, HOUSING & PUBLIC HEALTH**

To perform the policy overview role outlined above in relation to the following matters:

1. Adult Social Care
2. Older People's Services
3. Care and support for people with physical disabilities, mental health problems and learning difficulties
4. Asylum Seekers
5. Local Authority Public Health services
6. Encouraging a fit and healthy lifestyle
7. Health Control Unit, Heathrow
8. Encouraging home ownership
9. Social and supported housing provision for local residents
10. Homelessness and housing needs
11. Home energy conservation
12. National Welfare and Benefits changes

# Agenda

## **CHAIRMAN'S ANNOUNCEMENTS**

- 1 Apologies for Absence and to report the presence of any substitute Members
- 2 Declarations of Interest in matters coming before this meeting
- 3 To receive the minutes of the meeting held on 6 October 2015 - *to follow*
- 4 To confirm that the items of business marked in Part I will be considered in Public and that the items marked Part II will be considered in Private
- 5 Major Reviews in 2015/16 - Raising Standards in Private Rented Sector Accommodation - Witness Session 3 1 - 38
- 6 Forward Plan 39 - 44
- 7 Work Programme 45 - 48

## **MAJOR REVIEWS IN 2015/16 - RAISING STANDARDS IN PRIVATE RENTED SECTOR ACCOMMODATION - WITNESS SESSION 3**

**Contact Officer:** D Youngs  
**Telephone:** x 7435

### **REASON FOR ITEM**

To enable the Committee to gather evidence as part of their Major Review into 'Raising Standards In Private Rented Sector Accommodation'

### **OPTIONS AVAILABLE TO THE COMMITTEE**

1. Question the witnesses
2. Highlight issues for further investigation.
3. To make a note of possible recommendations for the review.

### **BACKGROUND**

At the Committee meeting on 22 April 2015, Members discussed a number of potential review topics for 2015/16 and requested officers to prepare a scoping report on *Raising Standards In Private Rented Sector Accommodation*'.

The two previous witness sessions have focused on the role and scope of the Private Rented Sector in Hillingdon, along with the health implications of poor housing.

### **INFORMATION**

This witness session will look at the information, advice and guidance provided to tenants at the outset of their tenancy and what improvements might be made.

To assist the Committee, the following witnesses will be attending the meeting:

- Mr David Miller from Charrison Davis, Letting Agents, Harlington to provide a High Street perspective.

- Mr David Youngs, Category Manager - Housing, Landlord Engagement Team to explain what the Council currently provides to new tenants.

At present, initial enquiries regarding landlord issues are dealt with via the Council's contact centre who have scripts for dealing with a variety of query types.

The Homelessness Prevention Team will provide basic advice on landlord and tenant relationships. The team also may also signpost as necessary for further advice on this.

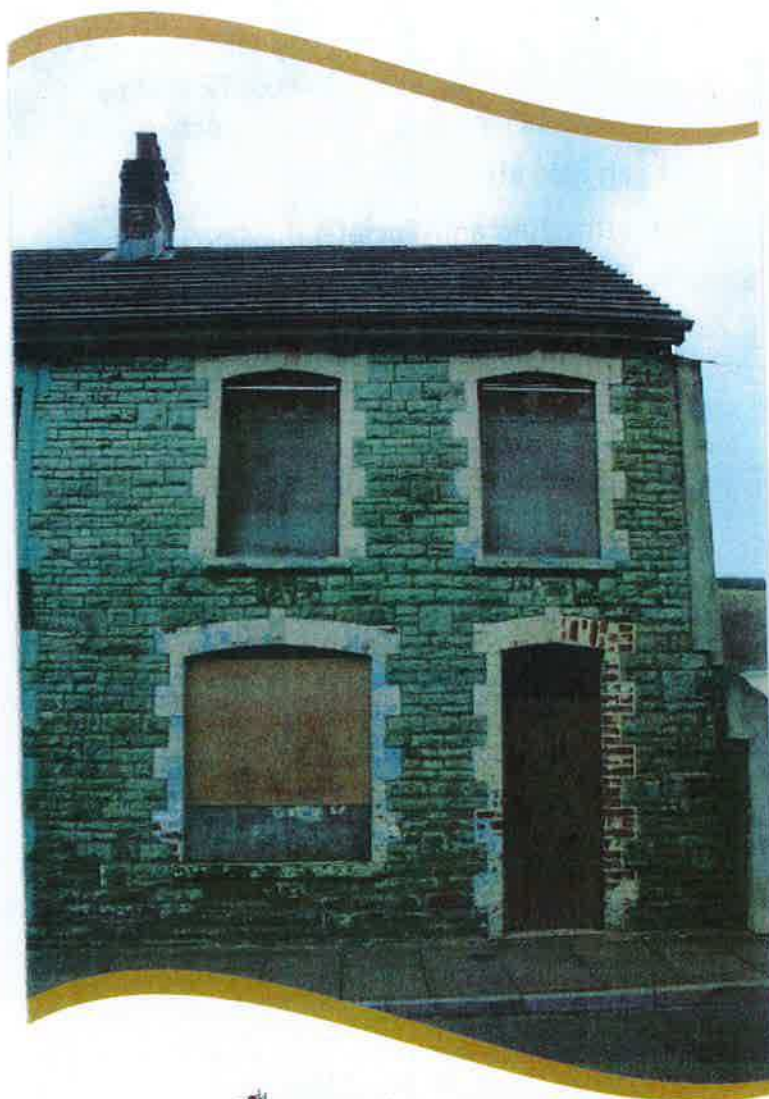
Where there may be a need for more specific intervention in relation to housing standards, households are directed to the Private Sector Housing Team. A section of the Council website is devoted to private sector housing conditions and provides detailed advice for both tenants and landlords. Please see the link below:

<http://www.hillingdon.gov.uk/article/7800/Private-housing>

A sample of the information, advice and guidance currently provided by the Council is attached in Appendix A.

A copy of the Major Review scoping report is attached in Appendix B.

# Bringing life to empty homes



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[www.hillingdon.gov.uk](http://www.hillingdon.gov.uk)





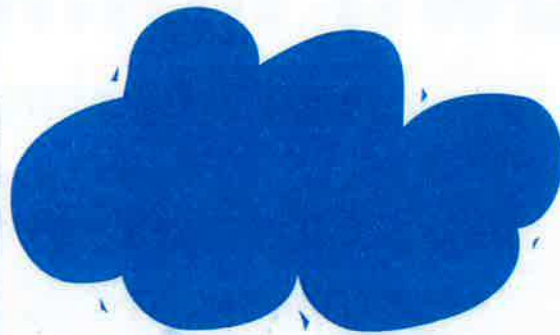
# Landlords' Guide to Electrical Safety

Supported by:  
**LACORS**

**ELECTRICAL**  
  
**SAFETY**  
**COUNCIL**



# **Asbestos**





# Feel **safe** in your own home

- at the touch of a button

Get a **careline**!

If you are disabled or elderly, or you live alone, a careline can help you:

- in social and medical emergencies;
- if you are suffering harassment;
- if you are suffering domestic violence; or
- if someone calls at your home and you are not sure of their identity (bogus callers).



# **Furniture in rented homes... ...fire safety standards**

**A guide for landlords and tenants**



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[www.hillingdon.gov.uk](http://www.hillingdon.gov.uk)

## **Empty Dwelling Management Orders**

Guidance for residential property owners  
on new powers available to local councils



# housing



# **Carbon monoxide... ...the silent killer**

**A guide for landlords and tenants**



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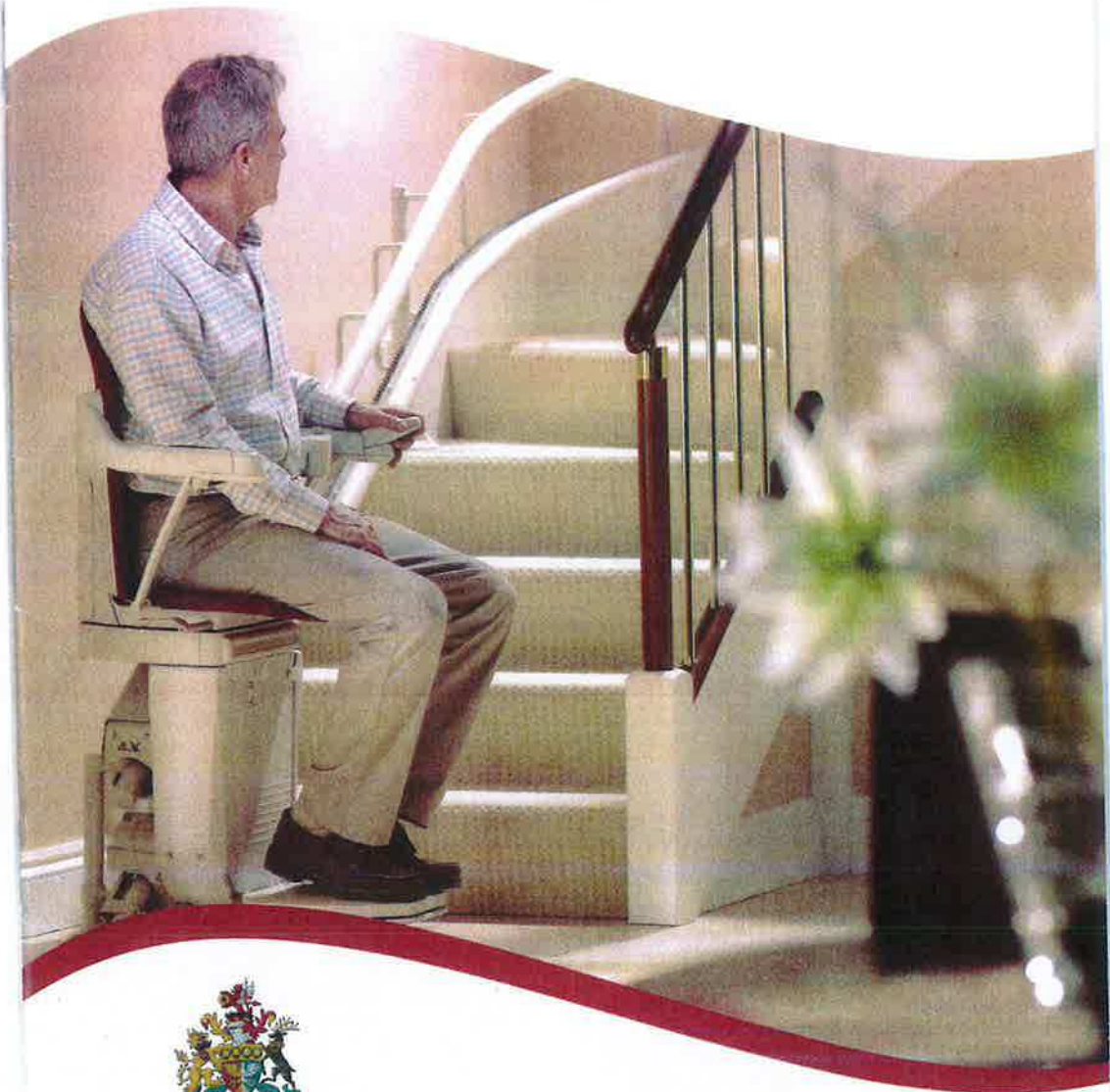
# HMO licensing

A guide for tenants in bedsits,  
shared housing and other  
houses in multiple occupation

West London Housing Partnership

# Disabled facilities grants

How to apply for disability adaptations  
A guide for home-owners and private tenants



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[www.hillingdon.gov.uk](http://www.hillingdon.gov.uk)





# Housing Health and Safety Rating System

This guide, prepared by the **London Landlord Accreditation Scheme**, provides information for landlords on the 29 hazards used to assess the suitability of the dwelling under the new Housing Health and Safety Rating System (HHSRS).

The HHSRS was introduced with the Housing Act 2004, and replaces the previous housing fitness standard. The Government introduced the system as the way of deciding whether the housing conditions of residential premises are satisfactory. It looks at whether premises have any defects that may give rise to hazard, which in turn could cause harm to the occupiers, or any visitors. A residential property should be capable of satisfying the basic fundamental needs for the everyday life of a household, such as providing shelter, space and facilities for the occupants.

The HHSRS assesses 29 housing hazards and the effects that each may have on the health and safety of the current or future occupant or any visitor to the property. It applies to all residential properties irrespective of whether they are occupied by a homeowner or a tenant. It is not possible to completely remove all risk of harm from within a property, but the system provides a way that hazards can be assessed and to decide on what is the best way of dealing with them.

## Physiological Requirements

1

### Damp and mould growth

Health threats due to dust mites, mould or fungal growths, including mental and social well-being health threats associated with damp, humid, mouldy conditions.

*Health effects: allergies; asthma; effects of toxins from moulds; fungal infections.*



2

### Excess cold

Threats to health from sub-optimal indoor temperatures. Healthy indoor temperature is approximately 21°C.

*Health effects: respiratory (flu, pneumonia and bronchitis); cardiovascular conditions (heart attacks and strokes); thermoregulatory system impairment (body's temperature control); etc.*



3

### Excess Heat

Threats due to excessively high indoor air temperatures.

*Health effects: dehydration; trauma; stroke; cardiovascular, respiratory and genitourinary disorders.*



4

### Asbestos (and MMF)

Presence of, and exposure to, asbestos fibres and MMF within dwellings.

*Health effects: pleural disease; lung cancer; mesothelioma* NOTE: Attempting to remove asbestos which is in good condition and not likely to be disturbed is significantly more hazardous than not removing it. Work on asbestos should be done by a contractor licensed by the Health and Safety Executive.



5

### Biocides

Threats to health from chemicals used to treat timber and mould growth.

*Health effects: risk from inhalation; skin contact; ingestion (eating or drinking the chemical)*



6

### Carbon monoxide and fuel combustion products

Hazards due to the presence of excess levels in the atmosphere of carbon monoxide, nitrogen dioxide or sulphur dioxide and smoke within the dwelling.

*Health effects: Dizziness; nausea; headaches; disorientation; unconsciousness; respiratory disorders; bronchitis and breathlessness.*





## Physiological Requirements

7

### Lead

Health threat from lead ingestion. Lead sources: paint, water pipes, soil, fumes from leaded petrol.



*Health effects: lead poisoning; nervous disorders; mental health; blood production issues; behavioural problems in children.*

8

### Radiation

Health threats from radon gas and its daughters, primarily airborne, but also radon dissolved in water; Concern expressed about possible health effects of electromagnetic fields (EMFs); Leakage from microwave ovens (rare).



*Health effects: lung cancer caused by exposure to radon gas. Risk increases with dose and duration of exposure.*

9

### Uncombusted fuel gas

Threat from fuel gas escaped into the atmosphere within the dwelling.

*Health effects: suffocation*



10

### Volatile organic compounds

Diverse group of organic chemicals, including formaldehyde, that are gaseous at room temperature and found in a wide variety of materials in the home.



*Health effects: allergies; irritation to eyes, nose, skin and respiratory tract; headaches; nausea; dizziness and drowsiness.*

12

### Entry by intruders

Difficulties in keeping a dwelling secure against unauthorised entry and the maintenance of defensible space.



*Health effects: fear of burglary occurring; stress and anguish caused by burglary; injuries caused by intruder.*

13

### Lighting

Threats to physical and mental health associated with inadequate natural/artificial light, including psychological effects associated with the view from the dwelling through glazing.



*Health effects: depression and psychological effects due to lack of natural light, eyestrain from glare and inadequate light.*

14

### Noise

Threats to physical and mental health due to exposure to noise inside the dwelling or within its curtilage.



*Health effects: psychological and physiological changes resulting from sleep disturbance; poor concentration; headaches and anxiety.*

## Psychological Requirements

11

### Crowding and space

Hazards associated with lack of space for living, sleeping and normal household/family life.



*Health effects: psychological distress and mental disorders; increase hygiene risk and risk of accidents; personal space and privacy needs compromised.*

15

### Domestic hygiene, pests and refuse

Poor design, layout and construction, such that the dwelling cannot be readily kept clean and hygienic; access into, and harbourage within the dwelling for pests; inadequate and unhygienic provision for storing and disposal of household waste.



*Health effects: stomach and intestinal disease; infection; asthma; allergies; food spoilage; disease from rats and birds; physical hazards.*



**16****Food safety**

Threats of infection from poor provision and facilities for storage, preparation and cooking of food.



*Health effects: stomach and intestinal disease; diarrhoea; vomiting; stomach upsets; dehydration.*

**17****Personal hygiene, sanitation and drainage**

Threats of infection and threats to mental health associated with personal hygiene, including personal and clothes washing facilities, sanitation and drainage.



*Health effects: stomach and intestinal disease, including dysentery; skin infections; depression.*

**18****Water supply**

The quality and adequacy of the water supply within the dwellings for drinking and domestic purposes, including threats to health from contamination by bacteria, protozoa, parasites, viruses and chemical pollutants.



*Health effects: dehydration; fatigue; headaches; dry skin; bladder infections; stomach and intestinal and respiratory disorders; Legionnaires' disease.*

**Protection Against Accidents****19****Falls associated with baths etc.**

Falls associated with a bath, shower or similar facility.



*Health effects: Physical injuries; cuts; lacerations; swelling; bruising.*

**20****Falling on level surfaces etc.**

Falls on any level surface such as floors, yards and paths, including falls associated with trip steps, thresholds or ramps where the change in level is less than 300mm.



*Health effects: physical injury; bruising; fractures; head, brain and spinal injuries.*

**21****Falling on stairs etc.**

Falls associated with stairs, steps and ramps where the change in level is greater than 300mm.



It includes falls associated with internal stairs or ramps within the dwelling; external steps or ramps within the curtilage of the dwelling; internal common stairs or ramps and external steps or ramps within the curtilage of the building containing the dwelling and those to shared facilities or means of escape in case of fire. It includes falls over balustrading associated with stairs, steps or ramps.

*Health effects: physical injury; bruising; fractures; head, brain and spinal injuries.*

**22****Falling between levels**

Falls from one level to another, inside or outside a dwelling, where the difference in levels is more than 300mm. e.g. falls from balconies, landings, out of windows, over garden retaining walls etc.



*Health effects: physical injuries.*

**23****Electrical hazards**

Hazards from shock and burns resulting from exposure to electricity, including from lightning strikes.



*Health effects: shock*

**24****Fire**

Threats from exposure to uncontrolled fire associated smoke at a dwelling. It includes injuries from clothing catching alight, which appears to be common when people attempt to extinguish such a fire.



*Health effects: burns, being overcome by smoke or gas, death.*

# Housing Health and Safety Rating System

## Protection Against Accidents

25

### Flames, hot surfaces etc.

Threats of burns – injuries caused by contact with a hot flame or fire, with hot objects or hot non-water based liquids; scalds – injuries caused by contact with hot liquids and vapours. Includes burns caused by clothing catching alight.

*Health effects: burns; scalds; permanent scarring; death.*



26

### Collision and entrapment

Risks of injury from trapping body parts in architectural features, e.g. trapping fingers in doors; and colliding with objects such as architectural glazing, windows, doors, low ceilings, walls.

*Health effects: injuries through collision or entrapment involving doors and windows, e.g. cuts from glass, shutting door on part of body.*



27

### Explosions

Threat from the blast of an explosion, from debris generated by the blast and from the partial or total collapse of a building as the result of an explosion.

*Health effects: while the likelihood of an explosion is small, injuries can include: physical injuries, crushing; bruising; puncture; fractures; head, brain and spinal injuries, scalding if involves hot water.*



28

### Position and operability of amenities etc.

Threats of physical strain associated with functional space and other features at dwellings.

*Health effects: strain and sprain injuries.*



29

### Structural collapse and falling elements

Threat of dwelling collapse or of a part of the fabric being displaced or falling due to inadequate fixing, disrepair or the result of adverse weather conditions.

*Health effects: physical injuries.*



## Health Effects and Prevention

Some hazards are more likely to occur than others, for example injuries associated with falls are common, and some have a greater, more serious or more immediate impact on health status. The immediate and long term health effects, caused by these hazards, are varied and not necessarily limited to those listed in this guide.

Additional details provided in the HHSRS can assist landlords in identifying hazards in their properties and provide them with information on preventing and minimising the risks.

## Further information

More detailed information about the HHSRS is available from the Office of the Deputy Prime Minister website at [www.odpm.gov.uk](http://www.odpm.gov.uk). The guidance provided by the Government is the *Housing Health and Safety Rating System – Operating Guidance ISBN 13: 978 185112 846 4* is available to download or from Stationery Office Ltd, PO Box 29, Norwich NR3 1GN.

## London Landlord Accreditation Scheme

To learn more about your rights and responsibilities as a landlord, how you can minimise the health and safety risks in your property and develop your management skills, or simply to be recognised for providing good quality safe accommodation, contact the London Landlord Accreditation Scheme about becoming an Accredited Landlord.

**Phone:** 020 7974 1970

**Email:** [LLAS@camden.gov.uk](mailto:LLAS@camden.gov.uk)

**Web:** [www.londonlandlords.org.uk](http://www.londonlandlords.org.uk)



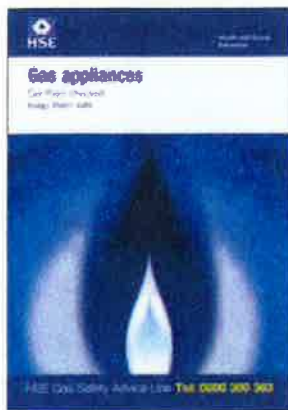
In association with

**Loot**



# Gas appliances

Get them checked  
Keep them safe



This is a web-friendly version of leaflet INDG238(rev3), revised 03/09

## The problem

Every year about 14 people die from carbon monoxide poisoning caused by gas appliances and flues which have not been properly installed or maintained. Many others also suffer ill health. When gas does not burn properly, as with other fuels such as coal, wood or oil, excess carbon monoxide is produced, which is poisonous.

You can't see it. You can't taste it. You can't even smell it. But carbon monoxide can kill without warning in just a matter of hours.

You are particularly at risk when you are asleep because you cannot recognise the early symptoms of carbon monoxide poisoning. These include tiredness, drowsiness, headache, nausea, pains in the chest and stomach pains. These symptoms can mimic many common ailments and may easily be confused with flu or simple tiredness.

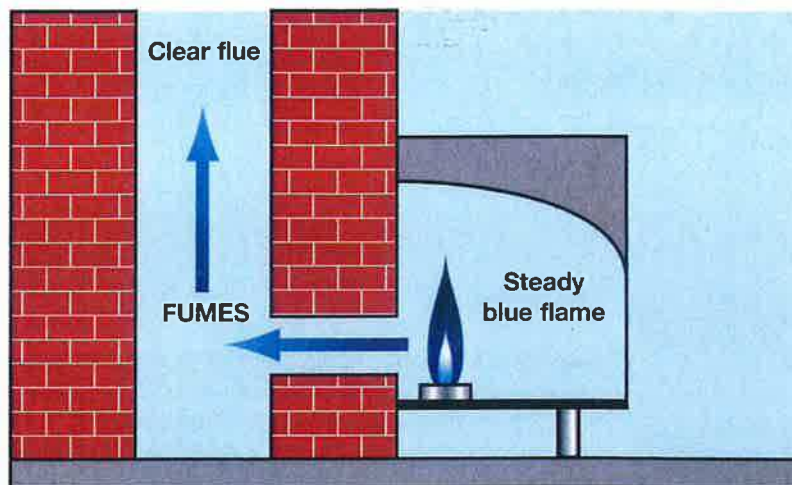
If you or your family experience the above symptoms, and you believe carbon monoxide may be involved, **you must seek urgent medical advice**. Your doctor will need to test a blood or breath sample. Carbon monoxide quickly leaves the blood and **tests may be inaccurate if taken more than four hours after exposure has ended**.

You are at risk of carbon monoxide poisoning if:

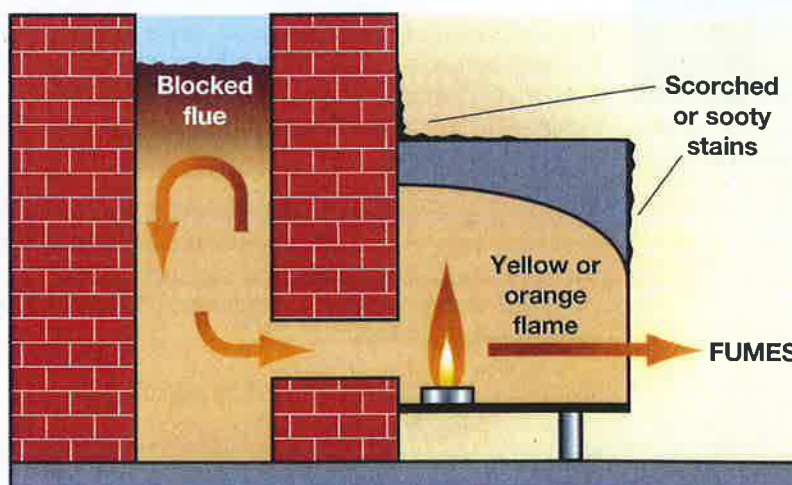
- your appliance was poorly installed;
- your appliance is not working properly;
- your appliance has not been checked for safety or maintained regularly;
- there is not enough fresh air in the room;
- your chimney or flue gets blocked up;
- you allow an engineer who is not on the Gas Safe Register to install or maintain your appliance(s).

There is a particular risk if you sleep in a room where an appliance that is not of the room-sealed type (eg a conventional gas fire) is left burning at night. (Flue outlets for room-sealed appliances are commonly located on an external wall at a low level protected by a cage rather than at or above roof level.)

### A safe gas appliance



### A dangerous gas appliance



### The answers

**NEVER** use a gas appliance if you think it is not working properly. Signs to look out for include yellow or orange flames (except for fuel-effect fires which display this colour flame), soot or stains around the appliance and pilot lights which frequently blow out.

**NEVER** cover an appliance or block the convection air vents.

**NEVER** block or obstruct any fixed ventilation grilles or air bricks.

**NEVER** block or cover outside flues.

**CAUTION** Whenever draught exclusion, ceiling or extraction fans, double glazing or conservatory extensions are fitted to a room containing a gas appliance, the appliance should subsequently be checked for safety.



**ALL** gas consumers are advised to have appliances checked for safety **at least every 12 months** by a Gas Safe registered engineer.

**You could be entitled to a free safety check.** If you are over 60, chronically sick, disabled, deaf or hearing-impaired, blind or visually impaired, you are entitled to join your supplier's Priority Service Register. It is free to join and once a member you are entitled, among other things, to a free annual gas safety check (unless you live in rented accommodation where it is your landlord's duty to ensure the check is done). For more information look at the back of your gas bill.

**CARBON MONOXIDE ALARMS** are a useful back-up precaution but must **NOT** be regarded as a substitute for proper installation and maintenance of gas equipment by a Gas Safe registered engineer. If you decide to buy a carbon monoxide alarm, ensure it meets current safety standards (BS EN 50291) and carries the Kitemark. If in doubt ask a member of staff for advice. Always follow the manufacturer's siting instructions.

If you smell gas, or suspect there is a gas escape or a carbon monoxide leak, you should immediately do the following:

- Open all doors and windows.
- Shut off the gas supply at the meter control valve (if you know where it is). If gas continues to escape call **National Grid** on the **Gas Emergency Freephone Number 0800 111 999**.
- Make sure that any investigations or repairs are carried out by a Gas Safe registered engineer.

## The law

The Gas Safety (Installation and Use) Regulations 1998 place duties on gas consumers, installers, suppliers and landlords. These regulations link with other safety controls on combustion equipment, eg the Building Regulations, which are standards for ventilation and flues. For your own protection remember:

- **by law anyone carrying out work on gas appliances or fittings as part of their business must be competent and registered with the Gas Safe Register.** Always check your engineer is registered by asking to see their ID card which has a photo of the engineer, their business registration number and personal licence number, company name, the start and expiry date of the card and a security hologram. The reverse of the card details what kind of gas work the engineer is able to do. You can also call Gas Safe Register during normal office hours on 0800 408 5500 or go to the website [www.gassaferegister.co.uk](http://www.gassaferegister.co.uk);
- **by law only a competent person can carry out work on gas appliances or fittings.** Do-it-yourself work on gas appliances or fittings could be dangerous and is likely to be illegal;
- **by law you must not use any gas appliance or fittings you know or suspect to be unsafe.** Through Gas Safe Register, HSE has asked all



- registered engineers to disconnect any gas appliance or fittings which are so dangerous as to be a threat to life if they are used. If your engineer asks your permission to disconnect such an appliance or fitting it will be in the interests of your own safety, and that of others, to agree. Before you use this appliance or fitting again, have it repaired by a Gas Safe registered engineer;
- **by law, landlords are generally responsible for making sure that gas fittings and flues are maintained in good order, and gas appliances and flues are checked for safety once in a period of 12 months. They must also keep a record of the safety checks for at least two years and issue the latest certificate to existing tenants and any new tenants before they move in.** If you own the appliance, you are responsible for its maintenance and safety checks;
- **by law, with the exception of the room-sealed type, there are restrictions on the installation of gas appliances such as fires, boilers and heaters in sleeping accommodation. These restrictions apply only to appliances fitted after 1 January 1996 and to those already installed in rooms in rented accommodation which have been converted to bedrooms after 31 October 1998.** Appliances which are not room-sealed, eg conventional gas fires of 14 kilowatts or less, may only be fitted if they have a device which automatically turns the gas supply off before a dangerous level of fumes can build up. However, for appliances above 14 kilowatts only those of a room-sealed type are allowed in such accommodation;
- **by law, since 31 October 1998, it has been illegal to install in any room instantaneous water heaters which are not room-sealed or fitted with a safety device which automatically turns the gas supply off before a dangerous level of poisonous fumes builds up;**
- **by law, mains gas transporters/emergency service providers (ESPs) must, in the event of an emergency, make the situation safe.** They should establish the cause of a gas escape and take action to prevent the gas from escaping within 12 hours. In the case of actual or suspected escapes of carbon monoxide they should respond to reports from consumers and make the situation safe.

### Further reading

If you would like more detailed information on the subject, you will find the following HSE publication useful: *Safety in the installation and use of gas systems and appliances. Gas Safety (Installation and Use) Regulations 1998. Approved Code of Practice and guidance L56* (Second edition) HSE Books 1998 ISBN 978 0 7176 1635 0.

Also, for safety information on gas, solid fuel and oil burning appliances, and information on the symptoms of carbon monoxide poisoning, look at the Department of Health booklet *Keep warm keep well* (updated annually). Download it from [www.dh.gov.uk](http://www.dh.gov.uk) or [www.direct.gov.uk](http://www.direct.gov.uk), or write to Department of Health Publications, PO Box 777, London SE1 6XH, Tel: 0300 123 1002.

### **Further information**

HSE priced and free publications are available by mail order from HSE Books, PO Box 1999, Sudbury, Suffolk CO10 2WA Tel: 01787 881165 Fax: 01787 313995 Website: [www.hsebooks.co.uk](http://www.hsebooks.co.uk) (HSE priced publications are also available from bookshops and free leaflets can be downloaded from HSE's website: [www.hse.gov.uk](http://www.hse.gov.uk).)

British Standards can be obtained in PDF or hard copy formats from the BSI online shop: [www.bsigroup.com/Shop](http://www.bsigroup.com/Shop) or by contacting BSI Customer Services for hard copies only Tel: 020 8996 9001 e-mail: [cservices@bsigroup.com](mailto:cservices@bsigroup.com).

For information about health and safety ring HSE's Infoline Tel: 0845 345 0055 Fax: 0845 408 9566 Textphone: 0845 408 9577 e-mail: [hse.infoline@natbrit.com](mailto:hse.infoline@natbrit.com) or write to HSE Information Services, Caerphilly Business Park, Caerphilly CF83 3GG.

HSE Gas Safety Advice Line

**Tel: 0800 300 363**

HSE's Gas Safety website: [www.hse.gov.uk/gas/index.htm](http://www.hse.gov.uk/gas/index.htm)

Gas Safe Register website: [www.gassaferegister.co.uk](http://www.gassaferegister.co.uk)

**This guidance is issued by the Health and Safety Executive. Following the guidance is not compulsory and you are free to take other action. But if you do follow the guidance you will normally be doing enough to comply with the law. Health and safety inspectors seek to secure compliance with the law and may refer to this guidance as illustrating good practice.**

This leaflet is available in priced packs of 15 from HSE Books, ISBN 978 0 7176 6337 8. Single free copies are also available from HSE Books.

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## Advice from Hillingdon Council Keep your home free from damp and mould



This page was previously available as a Department of the Environment leaflet. Crown copyright acknowledged.

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**Is your home damp?** Damp can cause mould on walls and furniture and make timber window frames rot. Damp housing encourages the growth of mould and mites, and can increase the risk of respiratory illness.

Some damp is caused by condensation. This page explains how condensation forms and how you can keep it to a minimum, so reducing the risk of dampness and mould growth.

---

### **First steps against condensation**

You will need to take proper steps to deal with the condensation, but meanwhile there are some simple measures you can take right away. Wipe down the windows and sills every morning. Wring out the cloth rather than drying it on a radiator. Condensation channels and sponge strips can be bought at DIY shops. They are fitted to windows to collect the condensation and thus help prevent window frames from rotting and avoid damp forming under sills. Care must be taken to fit these devices properly.

---

### **First steps against mould**

First treat the mould already in your home. If you then deal with the basic problem of condensation, mould should not reappear. To kill and remove mould, wipe down walls and window frames with a fungicidal wash which carries a Health and Safety Executive 'approval number'. Follow the manufacturers' instructions precisely. Dry-clean mildewed clothes, and shampoo carpets. Disturbing mould by brushing or vacuum cleaning can increase the risk of respiratory problems. After treatment, redecorate using a good quality fungicidal paint to help pr

event mould. Note that this paint is not effective if overlaid with ordinary paints or wallpaper.

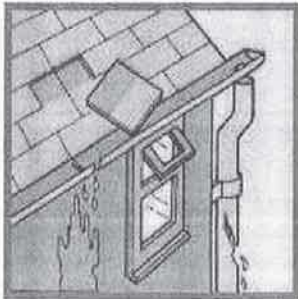
***The only lasting way of avoiding severe mould is to eliminate dampness.***

### **Is it condensation?**

Condensation is not the only cause of damp. It can also come from:

- leaking pipes, wastes or overflows;
- rain seeping through the roof where a tile or slate is missing, spilling from a blocked gutter, penetrating around window frames, or leaking through a cracked pipe;
- rising damp due to a defective damp-course or because there is no damp-course

These causes of damp often leave a 'tidemark'



If your home is newly built it may be damp because the water used during its construction (for example, in plaster) is still drying out.

If your home is damp for any of these reasons it may take weeks of heating and ventilating to dry out. Hiring a dehumidifier will help.

If you do not think the damp comes from any of these causes, it is probably condensation.

### **What is condensation?**

There is always some moisture in the air, even if you cannot see it. If the air gets colder it cannot hold all the moisture and tiny drops of water appear. This is condensation. You notice it when you see your breath on a cold day, or when the mirror mists over when you have a bath.

Condensation occurs mainly during cold weather, whether it is raining or dry. It does not leave a 'tidemark'. It appears on cold surfaces and in places where there is little movement of air. Look for it in corners, on or near windows, in or behind wardrobes and cupboards. It often forms on north-facing walls.



## How to avoid condensation

These four steps will help you reduce the condensation in your home.

### **1. Produce less moisture**

Some ordinary daily activities produce a lot of moisture very quickly.

**Cooking:** To reduce the amount of moisture, cover pans and do not leave kettles boiling.



**Paraffin and portable flueless bottled gas heaters:** These heaters put a lot of moisture into the air — one gallon of gas or paraffin produces about a gallon of water vapour. If you have a problem with condensation, try to find an alternative means of heating.

**Washing clothes:** Put washing outdoors to dry if you can. Or put it in the bathroom with the door closed and the window open or fan on. If you have a tumble dryer make sure you vent it to the outside (unless it is the self-condensing type). DIY kits are available for this.

### **2. Ventilate to remove the moisture**

You can ventilate your home without making draughts.

Some ventilation is needed to get rid of moisture being produced all the time, including that from people's breath. Keep a small window ajar or a trickle ventilator open when someone is in the room.

You need much more ventilation in the kitchen and bathroom when cooking, washing up, bathing and drying clothes. This means opening the windows wider. Better still, use a humidistat-controlled electric fan (these come on automatically when the air becomes humid, and are cheap to run).

Close the kitchen and bathroom doors when these rooms are in use even if your kitchen or bathroom has an extractor fan. A door closer is advisable. Doing this will help stop the moisture reaching other rooms, especially bedrooms, which are often colder and more likely to suffer condensation.

Ventilate cupboards and wardrobes. Avoid putting too many things in them, as that stops the air circulating. Cut a ventilation slot in the back of each shelf or use slatted shelves. Cut 'breather' holes in doors and in the back of wardrobes. Leave space between the back of the wardrobe and the wall. Put floor-mounted furniture on blocks to allow air underneath. Where possible, position wardrobes and furniture against internal walls (walls which have a room on both sides) rather than against outside walls.

If you replace your window units at any time, make sure that the new frames incorporate trickle ventilators.

### **3. Insulate and draughtproof**

Insulation in the loft, cavity wall insulation and draughtproofing of windows and outside doors will help keep your home warm and you will have lower fuel bills as well. When the whole home is warmer, condensation is less likely.





When draughtproofing:

- do not block permanent ventilators;
- do not completely block chimneys (leave a hole about two bricks in size and fit a louvered grille over it);
- do not draughtproof rooms where there is condensation or mould;
- do not draughtproof a room where there is a fuel-burning heater (for example, a gas fire) or cooker;
- do not draughtproof windows in the bathroom and kitchen.

If you live in a house, insulating your loft is a cost-effective way of cutting heating costs. Remember to draughtproof the loft hatch but do not block the opening under the eaves. Cavity wall insulation is also an effective way of cutting heating costs. Before deciding on this method of insulating, however, you should talk to your local building inspector as building regulations approval is required.

Secondary and double glazing of windows reduces heat-loss and draughts but you must ensure that there is some ventilation.

#### **4. Heat your home a little more**

In cold weather, the best way to keep rooms warm enough to avoid condensation is to keep low background heating on all day, even when there is no one at home. **Alternatively, you can set the timer for the heating to come on about an hour before you come home. This will prevent condensation forming on the cold surfaces when you start washing and cooking.** This is very important in flats and bungalows and other dwellings where the bedrooms are not above a warm living room. So if possible, install a very small heater with a thermostat in each bedroom (but do not use a paraffin or flueless bottled gas heater for this purpose). The thermostat will help control heating and costs.

Dehumidifiers will help dry out damp in newly built houses. They can also help reduce condensation in warm rooms with a lot of moisture, but they are of little use in cold damp rooms.

---

#### **Points to remember**

##### **Produce less moisture:**

- cover pans
- dry clothes outdoors
- vent your tumble dryer to the outside
- avoid using paraffin or flueless bottled gas heaters

##### **Ventilate to remove moisture:**

- ventilate when someone is in
- increase ventilation of the kitchen and bathroom when in use and shut the door
- ventilate cupboards, wardrobes and blocked chimneys

**Insulate and draughtproof:**

- insulate the loft
- draughtproof windows and external doors
- consider cavity insulation
- consider secondary glazing
- find out if you are eligible for a grant or other help

**Heat your home a little more:**

- if possible, keep low background heat on all day **or set the heating timer so that your home is warm when you get back.**
  - find out about benefits, rebates and help with fuel bills
-

### **Other information and advice on costs**

For information on heating, insulation or solar heating please telephone Energysmart on 0800 358 6664. This is a not for profit scheme to provide residents of Hillingdon with discounted energy saving measures.

If, due to dampness, window frames and so on in your home are affected by rot, you may decide to treat the wood with preservatives. A leaflet 'Wood Preservatives in your Home' gives valuable advice on the use of these chemicals; the leaflet is available from the Department of the Environment, Publications Despatch Centre, Blackhorse Road, London SE99 6TT; fax: 0208-694 0099.

*It is important to remember, however, that the only lasting remedy for wood rot is to cure the damp which caused it in the first place.*

'Tackling Condensation', a more comprehensive guide to the causes, diagnosis and remedies of condensation, is available for purchase from the Building Research Establishment, Garston, Watford WD2 7JR. Telephone numbers for specific interests and enquiries are as follows: BRE Bookshop (BRE publications): (01923) 664444; general and technical advice: (01923) 664664.

If you are a householder who receives an income-related benefit or Disability Living Allowance, or if you are a householder over 60, you may be able to get a grant for draughtproofing and loft insulation under the Warm Front Scheme. If you are an owner-occupier or private tenant (and receive any of the above benefits) you may be eligible for a renovation grant or minor works assistance to help you carry out insulation, draughtproofing or heating works.

For information on grants under the Warm Front Scheme, contact:

Customer Services Manager  
Eaga Partnership  
FREEPOST NEA 12054  
Newcastle upon Tyne  
NE2 1BR  
*freephone* (0800) 3162808

If you are a local authority tenant and wish to receive financial help with these works you should approach Hillingdon Homes via your local office directly.

For advice and help on insulation and heating contact your local council office, Citizens Advice Bureau or DSS office. Your local gas or electricity company can give advice about budget schemes like fuel saving stamps which spread the costs of heating.

If you want to get a copy of booklet Its criminal to waste energy please contact Energy Efficiency Helpline 0845 7277200. If you have access to a computer try [www.saveenergy.co.uk](http://www.saveenergy.co.uk)

## **Further information**

HSE priced and free publications are available by mail order from HSE Books, PO Box 1999, Sudbury, Suffolk CO10 2WA Tel: 01787 881165 Fax: 01787 313995 Website: [www.hsebooks.co.uk](http://www.hsebooks.co.uk) (HSE priced publications are also available from bookshops and free leaflets can be downloaded from HSE's website: [www.hse.gov.uk](http://www.hse.gov.uk).)

British Standards can be obtained in PDF or hard copy formats from the BSI online shop: [www.bsigroup.com/Shop](http://www.bsigroup.com/Shop) or by contacting BSI Customer Services for hard copies only Tel: 020 8996 9001 e-mail: [cservices@bsigroup.com](mailto:cservices@bsigroup.com).

For information about health and safety ring HSE's Infoline Tel: 0845 345 0055 Fax: 0845 408 9566 Textphone: 0845 408 9577 e-mail: [hse.infoline@natbrit.com](mailto:hse.infoline@natbrit.com) or write to HSE Information Services, Caerphilly Business Park, Caerphilly CF83 3GG.

HSE Gas Safety Advice Line

**Tel: 0800 300 363**

HSE's Gas Safety website: [www.hse.gov.uk/gas/index.htm](http://www.hse.gov.uk/gas/index.htm)

Gas Safe Register website: [www.gassaferegister.co.uk](http://www.gassaferegister.co.uk)

**This guidance is issued by the Health and Safety Executive. Following the guidance is not compulsory and you are free to take other action. But if you do follow the guidance you will normally be doing enough to comply with the law. Health and safety inspectors seek to secure compliance with the law and may refer to this guidance as illustrating good practice.**

This leaflet is available in priced packs of 15 from HSE Books, ISBN 978 0 7176 6337 8. Single free copies are also available from HSE Books.

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1. The first part of the document is a letter from the author to the editor, dated 10/10/10. The letter discusses the author's interest in the journal and the specific topic of the article.

2. The second part of the document is the title page of the article, which includes the title, author's name, and affiliation.

3. The third part of the document is the abstract, which provides a brief summary of the article's content and findings.

4. The fourth part of the document is the introduction, which sets the context for the study and states the research objectives.

5. The fifth part of the document is the methodology, which describes the research design, data collection methods, and analysis techniques.

6. The sixth part of the document is the results, which present the findings of the study in a clear and concise manner.

7. The seventh part of the document is the conclusion, which summarizes the main findings and discusses their implications for the field.



# HILLINGDON

LONDON

## Policy Overview & Scrutiny Committee Review Scoping Report 2015/16

### ***RAISING STANDARDS IN PRIVATE RENTED SECTOR ACCOMMODATION***

#### **Aim of review**

This review aims to examine standards in private sector rented accommodation in Hillingdon, and will focus on the specific issues detailed in the Terms of Reference.

#### **Terms of Reference**

- a. To provide a profile of the sector and its tenants and how this has changed for comparative purposes and provide information regarding accessibility to such accommodation;
- b. To report on levels and the impact of overcrowding in the sector particularly in relation to the health of occupants;
- c. Consider current and potential mechanisms through which information regarding their options is made available to existing and prospective private rented sector tenants. To include council services and signposting to other agencies;
- d. To make recommendations to Cabinet based on the findings of this review

#### **Reasons for the review**

At 22 April 2015 meeting, the Committee considered investigating Raising Standards in Private Rented Sector Accommodation as its first major review topic for 2015/16. At the 2 July 2015 meeting a verbal overview of the Private Rented Sector in Hillingdon was given by Housing Officers to assist the Committee in narrowing the focus of the review.

## **INFORMATION AND ANALYSIS**

### **Key Issues**

1. The private rented sector in Hillingdon has grown significantly in terms of both the number and proportion of households that live in this tenure. The cost of accessing private sector housing in Hillingdon has also increased markedly and the make-up of the sector has changed. Increased competition comes from within the borough and further afield. These factors create a different climate for private rented sector housing than previously and have an impact on households' ability to access the sector. There are also potential impacts on property conditions and management standards. There is, for instance, some evidence that overcrowding is increasing. The Council needs to better understand the private rented market and in particular the impact of overcrowding on occupants' health.
2. Resources to address issues in the private rented sector are limited and consequently it is important that information about available options is disseminated effectively in relation to both Council services and those provided by others. Given the rapid growth of the sector and other changes, such as those relating to welfare benefits, it is timely to review this.

### **Background and importance**

#### **Overview**

3. The private rented sector has continued to grow in size and importance, not only for traditional groups housed in the sector, such as young single people, but also for families with children.
4. The London Housing Strategy includes a target to increase the supply of purpose built private rented sector housing. The Mayor of London has also developed a London Rental Standard; a set of minimum standards that the Mayor expects every landlord and letting agent in London to meet.
5. There has been significant growth in the Buy-to-let market and although the recent Budget set out plans to reduce tax relief to basic rate only, buy-to-let is likely to continue to be seen as an attractive investment prospect.
6. The majority of landlords are reputable and provide decent well maintained homes, but there are a minority of landlords who ignore their obligations and knowingly rent out unsafe and overcrowded accommodation.
7. Tenants may not be aware of their rights and what can be expected of their accommodation and their landlord. Encouraging tenants to raise

complaints and concerns about their landlords, letting agents or neighbouring tenants can help to target investigations.

8. Likewise a small number of landlords have little awareness of their obligations towards their tenants. In many cases landlords are willing to learn how to be better in their role. Landlord education, training and signposting can assist in improving the management of property.
9. Legislation now requires all letting and property management agents to join one of three approved redress schemes, which gives tenants a process through which to hold agents to account.
10. There are important links between housing and health. The Building Research Establishment (BRE) estimate that, across the country, avoidable disease and injuries caused by poor housing costs the NHS at least £600m a year.
11. Growing up in an overcrowded household can have a serious impact on the health of children. Infectious diseases spread more readily in overcrowded conditions and frequent illnesses lead to missed days at school. Research has found evidence of a relationship between overcrowding and the physical health of children, including respiratory conditions and meningitis.<sup>1</sup>

## Remit

### Private rented sector – size and profile

12. Between the 2001 and 2011 census the number of private rented dwellings increased from 9,439 to 18,141 and it is thought that the increase has continued at pace since the census. The growth of the private rented sector is a common across the country but has been particularly strong in London. According to a report by Kent Alliance<sup>2</sup>, in the last year, 77% of the new households formed in Great Britain were created in the private rented sector. The review will examine this growth in more detail.

### Rent levels in the private rented sector

13. Market rents in the private rented sector have been increasing and there have been various changes to the way in which the Local Housing Allowance operates that have been made since it was introduced in 2008. A number of other welfare benefit changes are also relevant in relation to

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<sup>1</sup> The Impact of Overcrowding on Health & Education: A literature review (Office for the Deputy Prime Minister, 2004)

<sup>2</sup> The Kent Alliance: Buy to Let Britain report, Edition Two



households' ability to access the sector, including the household benefit cap. The review will explore rent levels and affordability in more detail.

### Overcrowding and Health Implications

14. "Crowding and space" is one of the 29 possible hazards in domestic dwellings identified in the Housing Health and Safety Rating Scheme (HHSRS) introduced in 2006 to support the enforcement regime created in the Housing Act 2004. Crowding and (lack of) space is described in HHSRS as a "psychological hazard" as the effects of lack of space for living, sleeping and normal household and family life are mainly psychological distress and mental disorders as personal space and privacy needs are compromised. There is also an increased risk of accidents and lack of hygiene. There appears to be no particular age group more vulnerable than others, but those most at risk will be those who spend most time in the dwelling, typically older people, the very young, those who are mobility impaired and their carers. The likelihood of overcrowding depends, of course, mainly on choices made by landlords and occupiers, but the type of property where likelihood increases is in newer houses, for example those built since 1979, as room sizes and overall dimensions of properties have become smaller. The lowest risk is in properties built before 1920. Overcrowding in flats is generally less common than in houses, where the temptation to introduce additional tenants, family members or families is higher. However, some of the more extreme cases of overcrowding can occur in flats, for example one family living in each room including the living room.
15. Enforcement action open to the Council under the Housing Act 2004 includes an Improvement Notice, requiring the owner to make changes within a time frame, or a Prohibition Notice, requiring the owner to cease using the premises as a dwelling completely, or partially for example by returning it to single family use or limiting the number of occupiers.
16. This is in addition to traditional enforcement powers under public health legislation relating to filthy premises or removal of conditions encouraging pests.

### Information, advice and guidance

17. Initial enquiries regarding landlord issues are dealt with via the Council's contact centre who have scripts for dealing with a variety of query types. The Homelessness Prevention Team also provide advice to people on what they should expect from landlord and tenant relationships. The team also signpost as necessary for legal advice. Where there may be a need for more specific intervention in relation to housing standards, households are directed to the Private Sector Housing Team. A section of the Council website is devoted to private sector housing conditions and provides advice for both tenants and landlords.

**Connected work** (recently completed, planned or ongoing)

18.The Renewal of HMO Scheme.

## **EVIDENCE & ENQUIRY**

### **Witnesses**

Debby Weller

Nigel Dicker

Ed Shaylor

Steve Hajioff

Lynn Forshaw

Local management agents

Private sector landlords

### **Lines of enquiry**

The first witness session will focus on the profile of the private rented sector and accessibility.

- The size and composition of the private rented sector and its occupants
- The differences within the private rented sector in different parts of Hillingdon
- The various sub-markets within the sector
- How the sector has changed. Current market trends and the effect this has had on the private rental market?
- Likely future trends?
- Private rental reposessions and the impact on homelessness
- Accessibility of the sector including the impact of rental costs and of welfare reform

The second witness session will focus on overcrowding and the impact on health.

- A definition of overcrowding
- The room standard and the space standard
- Households overall at greater risk of illness, infection poor diet and nutrition.
- Specific impact on children. Prevalence of meningitis and respiratory problems. Overcrowded homes and linkage to slow growth in children and correlation with increased risk of heart disease as an adult.
- Detrimental effect on emotional and mental health.

The third witness session will look at information, advice and guidance

- What information is currently provided to prospective Private Rented Sector tenants?
- Should the Council consult to see if this is effective?
- What further forms of information might be provided?
- Channels of communication

The fourth and final session will

- Agree the final report including recommendations to Cabinet/Cabinet Members based upon the findings of the review.

## **LOGISTICS**

Proposed timeframe & milestones

<b>Meeting</b>	<b>Milestone</b>	<b>Outcomes</b>
30 July 2015	Agree Scoping Report	<ul style="list-style-type: none"> <li>• Agreed terms of reference and preferred witnesses</li> </ul>
3 Sept 2015	<p><i>First witness session</i></p> <p>Potential witnesses include:</p> <ul style="list-style-type: none"> <li>• Debby Weller</li> <li>• Nigel Dicker</li> </ul>	<ul style="list-style-type: none"> <li>• To review the size and scale private rented market in Hillingdon</li> <li>• Sub - markets</li> <li>• The evolution of the sector and future trends</li> </ul>
6 Oct 2015	<p><i>Second witness session</i></p> <p>Potential witnesses include:</p> <ul style="list-style-type: none"> <li>• Ed Shaylor</li> <li>• Steve Hajioff</li> <li>• Nigel Dicker</li> </ul>	<ul style="list-style-type: none"> <li>• To determine what overcrowding is and the current levels</li> <li>• To determine the most likely health impacts</li> <li>• To propose those steps which might be taken to improve conditions</li> </ul>
4 Nov 2015	<p><i>Third witness session</i></p> <p>Potential witnesses include:</p> <ul style="list-style-type: none"> <li>• Lynn Forshaw</li> <li>• Ed Shaylor</li> <li>• Debbie Weller</li> <li>• Local management agents (Orchard &amp; Shipman and Gibbs Gillespie)</li> <li>• Private sector landlords</li> </ul>	<ul style="list-style-type: none"> <li>• Information, advice and guidance</li> <li>• Sign posting by the Council to other agencies</li> </ul>
20 January 2016	Final session	Agree final report.

## **Risk assessment**

To meet its terms of reference the review will need to be resourced. Officers will be tasked to support the review as an integral part of the Housing Delivery Plan.

The impact of the review may be reduced if the scope of the review is too broad.

DRAFT



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# Agenda Item 6

## **CABINET FORWARD PLAN**

**Contact Officer:** Charles Francis  
**Telephone:** 01895 556454

## **REASON FOR ITEM**

The Committee is required to consider the Forward Plan and provide Cabinet with any comments it wishes to make before the decision is taken.

## **OPTIONS OPEN TO THE COMMITTEE**

1. Decide to comment on any items coming before Cabinet
2. Decide not to comment on any items coming before Cabinet

## **INFORMATION**

1. The Forward Plan is updated on the 15<sup>th</sup> of each month. An edited version to include only items relevant to the Committee's remit is attached below. The full version can be found on the front page of the 'Members' Desk' under 'Useful Links'.

## **SUGGESTED COMMITTEE ACTIVITY**

1. Members decide whether to examine any of the reports listed on the Forward Plan at a future meeting.

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Ref	Decision	Further information	Ward(s)	Final decision by Full Council	Cabinet Member(s) Responsible	Officer Contact for further information	Consultation on the decision	NEW ITEM	Private decision?
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Council Departments: RS = Residents Services CYPs =Children and Young People's Services ASCS= Adult Social Care Services AD = Administration FD= Finance

### Cabinet meeting - 19 November 2015

54	Carers Strategy - progress update	As requested at it's meeting in April 2015, Cabinet will receive an updated on progress implementing the Carers' Strategy and Delivery Plan.	All		Cllr Philip Corthorne	AD - Vicky Trott			
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## Ref Decision Further information

Ward(s)

Council Departments: RS = Residents Services CYPs =Children and Young People's Services ASCS= Adult Social Care Services AD = Administration FD= Finance

## Cabinet meeting - 17 December 2015

Ref	Decision	Further information	Ward(s)	Final decision by Full Council	Cabinet Member(s) Responsible	Officer Contact for further information	Consultation on the decision	NEW ITEM	Private decision?
74	<b>Contract Award for a Provision of Service to People who experience Domestic Violence</b>	This report will seek Cabinet approval to award a tender to provide (a) accommodation based and (b) floating support service to people who experience domestic violence via contractual arrangements for a period of 3 years.	All		Cllr Philip Corthorne	FD / ASC - Ella Trafankowska		<b>NEW</b>	Private (3)
70	<b>Care and Support Services for People with Mental Health Needs – Award of Contract</b>	The report will recommend to Cabinet the award of a contract, following an open tender, to an organisation to provide care and support services to residents living in supported living services and for a floating support service for adults with mental health needs. The contract award will be for three years, with the option to extend for 1+1 years, subject to performance, cost and approval.	All		Cllr Philip Corthorne	FD / ASC - Beverley Grayley		<b>NEW</b>	Private (3)



Ref	Decision	Further information	Ward(s)	Final decision by Full Council	Cabinet Member(s) Responsible	Officer Contact for further information	Consultation on the decision	NEW ITEM	Private decision?
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Council Departments: RS = Residents Services CYPs =Children and Young People's Services ASCS= Adult Social Care Services AD = Administration FD= Finance

## Cabinet - 11 February 2016

61b	The Council's Budget - Medium Term Financial Forecast 2016/17 - 2020/21 <b>BUDGET &amp; POLICY FRAMEWORK</b>	Following consultation, this report will set out the Cabinet's proposals for the Medium Term Financial Forecast (MTFF), which includes the draft General Fund reserve budget and capital programme for 2016/17 for consultation, along with indicative projections for the following four years. This will also include the HRA rents for consideration. Subject to Cabinet's decision, the budget will then be referred to full Council for approval.	All	18 February 2016 or 25 February 2016 (reserve date)	Cllr Ray Puddifoot MBE & Cllr Jonathan Bianco	FD - Paul Whaymand	Public consultation through the Policy Overview Committee process and statutory consultation with businesses & ratepayers	<b>NEW</b>	
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# Agenda Item 7

**WORK PROGRAMME 2015/16**

**Contact Officer:** Charles Francis  
**Telephone:** 01895 556454

## **REASON FOR ITEM**

This report is to enable the Committee to review meeting dates and forward plans. This is a standard item at the end of the agenda.

## **OPTIONS AVAILABLE TO THE COMMITTEE**

1. To confirm dates for meetings
2. To make suggestions for future working practices and/or reviews.

## **INFORMATION**

*All meetings to start at 7.00pm*

<b>Meetings</b>	<b>Room</b>
<b>2 July 2015</b>	<b>CR 5</b>
<b>30 July 2015</b>	<b>CR 5</b>
<b>3 September 2015</b>	<b>CR 5</b>
<b>6 October 2015</b>	<b>CR 6</b>
<b>4 November 2015</b>	<b>CR 6</b>
<b>20 January 2016</b>	<b>CR 6</b>
<b>23 February 2016</b>	<b>CR3/3a</b>
<b>24 March 2016</b>	<b>CR 6</b>
<b>20 April 2016</b>	<b>CR 6</b>

**2015/16 - DRAFT Work Programme**

<b>Meeting Date</b>	<b>Item</b>
<b>2 July 2015</b>	Major Reviews Topics 2015/16
	Work programme for 2015/16
	Cabinet Forward Plan

<b>30 July 2015</b>	Budget Planning Report for SS,Hsg&PH
	Scoping Report for Major Review
	Work Programme
	Cabinet Forward Plan

<b>3 September 2015</b>	Major Review - Witness Session 1
	Cabinet Forward Plan
	Annual Complaints Report
	Adults Safeguarding
	Work Programme

<b>6 October 2015</b>	Major Review - Witness Session 2
	Update on previous review recommendations (Shared Lives Review)
	Cabinet Forward Plan
	Work Programme

<b>4 November 2015</b>	Major Review - Witness Session 3
	Public Health Report - (deferred to 20 January 2016)
	Cabinet Forward Plan
	Work Programme

<b>20 January 2016</b>	Budget Proposals Report for 2016/17
	Major Review - Final Report
	Consideration of second review
	Public Health Report
	Work Programme
	Cabinet Forward Plan

<b>23 February 2016</b>	Cabinet Forward Plan
	Work Programme
	Witness Session

<b>24 March 2016</b>	Cabinet Forward Plan
	Work Programme
	Witness Session

<b>20 April 2016</b>	Cabinet Forward Plan
	Major Review Second Final report



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